

# B2B Customer Feedback Collection Questionnaire

Company Name

Contact Person

Contact Email

Industry

## Experience with Our Product/Service

How long have you been using our product/service?

How satisfied are you with our product/service?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What do you like most about our product/service?

What aspects could be improved?

## Support & Communication

How would you rate the quality of our customer support?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Any comments on our communication?

## Future Relationship

How likely are you to continue using our product/service?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Would you recommend us to other businesses?

☐ Yes ☐ No

Other comments or suggestions