

Accurate Answering Service, Inc
31511 Harper, St. Clair Shores, MI 48082, 586-296-4000, Fax 586-293-8330

Customer Information Questionnaire

Account Name: _____

Address: _____

City/State/Zip: _____

Cross Roads: _____

Is it okay to give your address to callers?: _____

Telephone number we'll be answering: _____

Private Number: _____ Fax: _____

Your website: _____

Is it okay to give your website to callers?: _____

Is your company incorporated? _____ If yes, in what state?: _____

Tax ID #: _____ or Social Security Number: _____

Anticipated Start Date: _____

How did you learn about our service?

Owner Information:

Owner's Full Name: _____

Home Address: _____ City/State/Zip: _____

Home Phone: _____ Mobile: _____

Pager: _____ Email: _____

Briefly describe the type of business activity your company engages in: _____

You will receive a copy of your messages every business day. Would you like these messages faxed or emailed?: _____ What time would you like them sent?: _____

Service Information:

Answer Phrase: “ _____ ”

Names of people we'll be receiving calls for: _____

Regular business hours that someone is in your office answering calls:

Mon _____, Tue _____, Wed _____, Thu _____

Fri _____, Sat _____, Sun _____, Holidays _____

What Information would you like us to get from callers?:

Are there some calls or types of calls you want someone to be contacted for after hours? _____

If yes, what types of calls would you like someone contacted for: _____

How will you provide us with after hour on call schedules? (please circle all that apply):

schedule doesn't change by fax verbally via email

How would you like your on call reps contacted after hours? (i.e. home first, then page every 10 minutes):

How long should the on call person be given to answer? _____

If the on call person doesn't answer in the given time what procedure would you like followed for contacting a back up person?: _____

Contact information for on call reps:

Name _____ home (____) _____ pgr (____) _____

cell (____) _____ email: _____

Name _____ home (____) _____ pgr (____) _____

cell (____) _____ email: _____

Name _____ home (____) _____ pgr (____) _____

cell (____) _____ email: _____

Name _____ home (____) _____ pgr (____) _____

cell (____) _____ email: _____

Name _____ home (____) _____ pgr (____) _____

cell (____) _____ email: _____

Name _____ home (____) _____ pgr (____) _____

cell (____) _____ email: _____

Please print your name: _____

Signature: _____ **Date:** _____