



Erie Mutual Insurance

Customer Experience Survey

www.eriemutual.com   

We want to ensure that your contact with Erie Mutual Insurance is the absolute best Customer Experience each and every time. Completing and returning this survey will assist us in maintaining a successful relationship with you, our valued policyholder. Your survey may be returned via mail, fax (905) 774-6468, email (darcy@eriemutual.com), or office drop off.

Completed surveys returned by July 1, 2015 eligible for draw - \$100 Gift Card!!

1. Name (please print): _____ Date of Birth: _____

Spouse's Name (if applicable): _____ Date of Birth: _____

___ I do not give permission for my policy to be discussed or changed with another person on my behalf.

___ I give permission for my policy to be discussed or changed with another person on my behalf as follows:

Name: _____ Relationship _____

Name: _____ Relationship _____

Your Signature granting permission: _____

2. Rate your Overall Customer Experience with Erie Mutual in regards to the following:

Professionalism:	Poor	Average	Good	Excellent
Timely/Efficient:	Poor	Average	Good	Excellent
Friendly Service:	Poor	Average	Good	Excellent
Honesty:	Poor	Average	Good	Excellent
Integrity:	Poor	Average	Good	Excellent
Innovation:	Poor	Average	Good	Excellent

Other Comments with regards to your customer experience?

3. Please rank each element of your insurance in order of importance:

- _____ Premium
- _____ Service by Agent/CSR
- _____ Convenience (Local, Payment Options, Appointments at My Residence)
- _____ Knowledge of Product You Purchase (Understanding my Policy)
- _____ Claims Service

Comments:

4. Please rank the following based on your most recent Customer Experience with Erie Mutual:

Agent Service	Poor	Average	Good	Excellent
Customer Service	Poor	Average	Good	Excellent
Claims Service	Poor	Average	Good	Excellent
Inspection Service	Poor	Average	Good	Excellent
Scheduling Loss Prevention Visit (Inspection)	Poor	Average	Good	Excellent

5. Would you recommend Erie Mutual Insurance to a friend, family member, or colleague?

Yes – Why?

No – Why Not?

6. How would you prefer to communicate with your Agent/CSR? Please rank in order of preference:

- _____ Phone Please provide number to contact: _____
- _____ Email Please provide email address: _____
- _____ Text Please provide cell number for texting: _____
- _____ Erie Mutual office (stop in or by appointment)
- _____ Other (please specify) _____

7. What could Erie Mutual do to improve your overall Customer Experience?