**FORMULAIRE DE PRISE DE CONTACT POUR ENTREPRISES**

|  |  |  |
| --- | --- | --- |
| **NOM DE L’ENTREPRISE** |  | **VOTRE LOGO** |
| LIGNE D’ADRESSE 1 |
| LIGNE D'ADRESSE 2 |
| VILLE/ÉTAT/CODE POSTAL |
| NUMÉRO DE TÉLÉPHONE |
| ADRESSE WEB |
|  |  |  |  |  |  |
| **DATE** | **ADMINISTRATEUR** |
|   |   |
| INFORMATIONS D’ADHÉSION DU CLIENT  |
| **NOM DU CONTACT** |   |  |   |
| **FONCTION DU CONTACT** |   | **ADRESSE DE L’ENTREPRISE** |   |
| **TÉLÉPHONE PRINCIPAL** |   |  |   |
| **FAX** |   |  |   |
| **SITE WEB** |   | **ADRESSE DU DOMICILE** |   |
| **ADRESSE E-MAIL** |   |  |   |
| INFORMATIONS COMMERCIALES |
| **NOM DE L’ENTREPRISE** |   |  |   |
| **PRINCIPAL TYPE D’ENTREPRISE** |   | **ADRESSE DE L’ENTREPRISE** |   |
| **TÉLÉPHONE PRINCIPAL** |   |  |   |
| **FAX** |   | **ADRESSE E-MAIL** |   |
| **SITE WEB** |   |  |  |  |
|  |  |  |  |  |  |
| *Comment avez-vous entendu parler de nous pour la première fois ?* |
|   |
| *Quelle est la nature de votre relation professionnelle avec nous ?* |
|   |
| *Quels problèmes passés avez-vous rencontrés avec ce type de service ?* |
|  NONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNONNON |
| *Quels types de préoccupations budgétaires avez-vous ?* |
|   |
| *Quels types de services vous intéressent ?* |
|   |

**EXCLUSION DE RESPONSABILITÉ**

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