

General Customer Onboarding Intake Questionnaire

Please complete this questionnaire to help us understand your business needs and ensure a smooth onboarding process. This document is formatted for printing and manual completion if preferred.

1. Company Profile

Official Company Name:

Doing Business As (DBA), if applicable:

Industry / Sector:

Company Website URL:

Physical Street Address:

City, State, Zip/Postal Code:

2. Primary Contact Information

Primary Contact Full Name:

Job Title:

Email Address:

Phone Number:

3. Business Objectives & Expectations

What is your primary goal or objective in working with us?

What is the biggest challenge or pain point you are currently facing?

What is your target launch date or desired completion timeline?

4. Technical & Operational Background

What software, tools, or legacy systems are you currently using?

Who are the key decision makers and stakeholders involved in this project?

5. Additional Comments

Are there any other specific requirements, questions, or concerns you would like to note?