



PeriShip®, LLC
7 Business Park Unit 15
Branford, Ct 06405

Phone: (203) 315-8637
Fax: (203) 315-0429

www.periship.com
info@periship.com

Client Profile

Client Information:

Company Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

Email: _____

Contact Name for Shipping Purposes: _____

Contact phone number (if different): _____ Contact EMail (if different): _____

Contact Name for Billing Purposes: _____

Contact phone number (if different): _____ Contact EMail (if different): _____

Do you have access to the Internet / Web? Yes If yes, High Speed or Dialup
No

Currently do you ship by using: The Ship Manager at FedEx.com

A FedEx Workstation (Powership or Café system)

Filling out a manual air bill

Referred to PeriShip by: FedEx (representative's name, if known) _____

Web Search

PeriShip Customer (please specify): _____

Other (please specify): _____

Primary Shipping Location: Address _____

(if different) _____

City, State, Zip _____

You may not be able to answer all the questions on the survey - please provide as much information as possible and fax the form to us at the number shown above.



Prior Experiences:

What is your number one challenge in managing an overnight program?

How much time do you or your employees spend tracking packages and dealing with issues related to your overnight program?

How many times in the last 6 months did you discover late in the day, or days later, that a shipment did not make it to its destination?

How many claims did you have to present in the past 6 months?

How much time do you spend on the phone dealing with your carrier's Customer Service department?

What percentage of your shipments are: Express? . _____ Ground? . _____
Who is your primary carrier? Express . _____ Ground . _____

Have you changed your primary carrier in the last 12 months? .

If yes, Why? Rates . Claims Service Level Other.

Please rate the Customer Service and Service Performance of each carrier you have used in the past 12 months, on a scale of 1 to 10, 10 being best: FedEx Customer Service . Service Level

DHL Customer Service . Service Level .

UPS Customer Service . Service Level .

BAX Customer Service . Service Level .

Additional Shipping Locations: Address . _____ Zip Code . _____

Address . _____ Zip Code . _____

Address . _____ Zip Code . _____



Express Shipping

Typical number of packages shipped per Week: _____ per Month: _____

Average Weight per Box: _____

Box Sizes (list all in common use): _____

Insulation: Molded Styrofoam _____ 1" _____ 1½" _____ 2" _____

Panels / Inserts _____

(Please note that PeriShip advises that you **do not use** panels / inserts in the express shipping environment)

% that are: Fresh _____ packed in : Water Ice _____ Gel Packs _____ Cryomat _____ Other _____

Frozen _____ packed in : Dry Ice _____ Gel Packs _____ Cryomat _____ Other _____

(Please note that PeriShip advises that you **do not use** water ice in the express shipping environment)

Average Express Shipping Expenses per Month: Under \$5,000 _____ \$5,000 - \$20,000 _____

_____ \$20,000 - \$50,000 _____ Over \$50,000 _____

Do you use: FedEx _____ UPS _____ DHL _____ BAX _____ Other _____

Do you have a regularly scheduled pickup: No _____ Yes _____ If yes, days _____
time: _____

Package Information:

Air Cargo

Typical number of packages shipped per Week: _____ per Month: _____

Average Weight per Box: _____

Box Sizes (list all in common use): _____

Insulation: Molded Styrofoam _____ 1" _____ 1½" _____ 2" _____

Panels / Inserts _____

% that are: Fresh _____ packed in : Water Ice _____ Gel Packs _____ Cryomat _____ Other _____

Frozen _____ packed in : Dry Ice _____ Gel Packs _____ Cryomat _____ Other _____

Average Air Cargo Shipping Expenses per Month: Under \$5,000 _____ \$5,000 - \$20,000 _____
\$20,000 - \$50,000 _____ Over \$50,000 _____