

**QUESTIONNAIRE**

- 1. Name of the Industry : .....
- 2. Address : .....
- 3. Nature of Business : .....
- 4. Product Description : .....
- 5. Area of Consultancy Required : .....  
.....
- 6. Details of Contact Person
  - 6.1 Name : .....
  - 6.2 Designation : .....
  - 6.3 Mobile No : .....
  - 6.4 Telephone (office) : .....
  - 6.5 E mail : .....
- 7. Any other Information : .....

Date:

Signature:  
Name: