

Sales and Marketing Audit



Company: _____ **Date:** _____

Name: _____

Position: _____

Address: _____

Suburb: _____ **Prov. State:** _____ **Post Code:** _____

Phone: _____ **Fax:** _____

Mobile: _____

E-mail: _____

Website: _____

General

Why did you start your own business?

When did you start your business?

What role do you play in your business?

How would you describe your business?

What is your core product or service offering?

What are the three biggest challenges/obstacles you are currently dealing with in your business?

What would you like to achieve by talking to us?

Business & Planning

Do you have a business plan that guides your day to day operation and includes long term business goals?

Yes No

What do you want your business to look like in 12 Months? _____

In 3 Years? _____

In 5 Years? _____

What will stop you from achieving this? _____

What are the key strengths of your business?

What are the weaknesses in your business?

What opportunities do you identify in your business?

Yes No

Describe any current threats to your business?

Yes No

If you could start over what would you do differently?

Do you have a Policies and Procedures Manual?

Yes No

Financial

What was your turnover last year? _____

The year before? _____

The year before that? _____

The growth trend over the past three years has therefore been at _____%

What is your projected growth rate for the next 12 months? _____

Do you have key initiatives in place to achieve this growth? Yes No

If yes, please describe. _____

What is the most profitable aspect of your business? _____

What is the least profitable aspect of your business? _____

What is your average sales value per transaction? _____

What would be the average life of your customer? _____

What is the lifetime value of your customer? (avg sales transaction value x avg life of customer)

What is your average Gross Profit % per transaction?

How could you increase profits in the next 12 months?

Do you have overdraft facilities?

Yes No

Do you offer your clients credit card & finance facilities to pay?

Yes No

Do you use financial software packages in your business?

Eg: MYOB

Yes No

If yes, please detail

Who are the financial decision makers in your business?

Pre-Sales Enquiries

How do potential clients contact your business?

Walk in _____%

Phone _____%

Internet _____%

Other:

Do you have systems / scripts / call books for all enquiries?

Yes

No

How many enquiries do you get per day / week / month?

Of the enquiries, how many sales do you convert per day / week / month?

Do you track all your conversions?

Yes

No

Sales

Please describe your sales process: _____

Do you have a set of standard sales letters / scripts?

Yes No

Do you conduct regular sales specific training?

Yes No

Do you up sell to your clients?

Yes No

Do you cross sell to your clients?

Yes No

Do you have any strategic alliances?

Yes No

Have you ever initiated a joint marketing program?

Yes No

Have you ever created a loss leader or given away free samples of your product / service?

Yes No

What guarantees do you offer your clients?

After Sales

How do you maintain a relationship with your customers after they buy from you?

Indicate which customer care initiatives do you have in place for your clients?
(These are all action points)

- | | |
|---|--|
| <input type="checkbox"/> Thankyou cards | <input type="checkbox"/> Discount cards to premium clients |
| <input type="checkbox"/> Special offers | <input type="checkbox"/> Newsletters |
| <input type="checkbox"/> Recognition program | <input type="checkbox"/> Personalised communications |
| <input type="checkbox"/> Articles of interest | <input type="checkbox"/> Loyalty program |

How do you recognise and reward loyalty?

Do you have a system for generating customer referrals? Yes No

Who could refer customers to you for cross-selling opportunities?

Do you conduct customer surveys?

Yes No

What is the process to respond to customer complaints?

How are these recorded?

Marketing & Advertising Promotion

Do you have a written marketing plan?

Yes No

Describe your core target market

**How is your product/service offering different to your competitors.
What is your USP?**

What marketing materials do you have to promote your business?

Corporate ID Kit
(Business Cards/Letterhead)

Company Profile

Company Orientation

Testimonials

Advertorials

Product/Service Brochures
&/or Flyers

Website

Banners/Signs

Newsletters

**Do you use non-traditional advertising eg:
eMarketing, sponsorships, car signage...?**

Yes No

Please describe

What marketing mediums do you use and how much do you spend?

Direct Mail \$ _____ Yellow Pages \$ _____ Website \$ _____

Telemarketing \$ _____ Newspapers \$ _____ eMarketing \$ _____

Referral Programs \$ _____ Loyalty Programs \$ _____ Customer Care Initiatives \$ _____

Radio \$ _____ TV \$ _____ Magazines \$ _____

Would you describe these marketing mediums as effective in reaching your core target market?

Yes No

How do you measure the effectiveness in terms of ROI on your marketing spend? Eg: sales revenue increase, incremental profit margin, client referrals & acquisition, repeat sales

How do you measure the effectiveness in terms of ROI on your marketing spend?

Eg: revenue increase, incremental profit margin, client referrals & acquisition, repeat sales

In what ways would you like to improve your marketing initiatives?

For eg: Build one to one customer relationships, promote targeted offers to your customers, reduce costs associated with design and printing

Do you have a website?

Yes go to page 14

No go to next page

Clients without Websites

Have you thought about creating a website for your business?

Yes No

What would you describe as the benefits of having a website?

What has prevented you from creating a website before now?

Which of the following would you like to see in a website for your business?

- | | |
|---|---|
| <input type="checkbox"/> eNewsletter | <input type="checkbox"/> Database segmentation |
| <input type="checkbox"/> Personalisation | <input type="checkbox"/> e-Commerce |
| <input type="checkbox"/> Event management | <input type="checkbox"/> Loyalty Program |
| <input type="checkbox"/> Frequently asked questions | <input type="checkbox"/> Online catalogue |
| <input type="checkbox"/> Self-managed content | <input type="checkbox"/> Private area |
| <input type="checkbox"/> Traffic analysis | <input type="checkbox"/> Automated refresh of contact information |

Do your competitors use a website?

Yes No

Please provide website addresses.

Clients with Websites

What is the overall objective with your web site? _____

Is your web address on all of your marketing materials? Yes No

Do you segment your customer database by customer profile, product purchase type....? Yes No

Please describe

Is the information presented on your website static or dynamic (i.e. easily updateable by you?)

When was your website last updated? _____

How does your website compare to your major competitors' sites?

How could you improve your website to make it more effective?

Does your website include eCommerce ie. an online store 24/7? Yes No

Would this be of value to you?

Do you have an auto-respond feature on your web site for product and service information? Yes No

Do you regularly collect testimonials and display them on your website? Yes No

Are you using any lead generation strategies from your website? Yes No

- | | |
|--|---|
| <input type="checkbox"/> eNewsletters | <input type="checkbox"/> Loyalty Programs |
| <input type="checkbox"/> eMarketing | <input type="checkbox"/> Internet referral Programs |
| <input type="checkbox"/> Sponsored links | <input type="checkbox"/> Seminars or other events |

If yes, how do you measure the effectiveness of these strategies?

Do you analyse your website traffic, in particular, number of visits, number of sign-ups, key-words used for finding your site? Yes No

Database Management

How many clients are on your database?

Total: _____ Active: _____% In-Active: _____%

How much have you spent to build your database?

(annual overhead + annual advertising and marketing) x years in business = total spent

Is your database on your computer?

Yes No

Do you use Customer Relationship Management (CRM) software to track the relationship/business dealings?

Yes No

Are you actively categorising and profiling members of your database?

Yes No

How often do you update your database to ensure all details are current?

Can your customers update their details via the internet?

Yes No

Do you record every enquiry on your database even if it is not a sale?

Yes No

Staff

How many staff do you employ? _____

Describe your company structure and staff positions? _____

Do you have job descriptions for your staff? Yes No

Do you set performance objectives/goals for your staff? Yes No

How do you measure staff performance?

How do you manage staff performance?

Do you have weekly staff training? If so please explain... Yes No

How do you motivate your staff?

Have you ever introduced an incentive program?

Yes No

RECRUITMENT

Do you have a structured recruiting process?

Yes No

How do you advertise available positions? Do you consider these to be effective?

What challenges do you face in recruiting the right staff?

How would you want to improve this process?

Do you have a standard staff questionnaire to track staff satisfaction and receive feedback/ideas for business improvement?

Yes No

Time Management

Do you create structured 'To Do' lists for yourself?

Yes No

Do you create 'To Do' lists for your staff?

Yes No

Do you prioritise your tasks and do them in order of priority?

Yes No

Have you identified the time of day when you are the most productive?

Yes No

Do you allocate 5-10 minutes first thing in the morning to confirm and clarify your daily schedule?

About You

Do you have written goals?

Yes No

Would you call yourself an entrepreneur?

Yes No

Have you ever worked with a consultant before?

Yes No

What are the 3 most important results you want to get from talking to us?

1.

2.

3.

Marketing Audit Action Points

| Action Point | Important | Very Important | Urgent |
|--------------|-----------|----------------|--------|
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| Action Point | Important | Very Important | Urgent |
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Referrals

1. Company: _____

Name: _____

Job Title: _____

Address: _____

Suburb: _____ **Prov. State:** _____ **Post Code:** _____

Phone: _____ **Mobile:** _____

E-mail: _____

2. Company: _____

Name: _____

Job Title: _____

Address: _____

Suburb: _____ **Prov. State:** _____ **Post Code:** _____

Phone: _____ **Mobile:** _____

E-mail: _____

3. Company: _____

Name: _____

Job Title: _____

Address: _____

Suburb: _____ **Prov. State:** _____ **Post Code:** _____

Phone: _____ **Mobile:** _____

E-mail: _____