

Openers Library

5 channel openers · 10 sector symptom hooks · cultural adaptations for Arab/Emirati, Indian/Pakistani, and Western expat patients. Use this to earn the first two minutes of any conversation.

"We do not sell software. We diagnose operational disease and prescribe treatment."

DOCUMENT

1 of 3 · Openers

ALIGNED TO

Script 2026.05-R (Defensible)

AUDIENCE

SDR / TCES (L1-L2)

OWNER

SGC Founder & CEO

REVIEW CYCLE

Every 6 months

COMPANION DOCUMENTS IN THIS SERIES

1. **Openers Library** (this file) — 5 channel openers + 10 sector symptom hooks + re-engagement openers
2. **Objection Library** (separate file) — 16 objections with patient says / physician responds / principle / forbidden trap
3. **Question Library** (separate file) — 7 stages of diagnostic questions, 40+ questions total, quick-reference card of the 8 that matter most

Tone rules (non-negotiable)

- Calm, evidence-led. Never urgent, never pushy.
- Use "**Sir**" consistently for Arab/Emirati and Indian/Pakistani audiences; drop it for Western expats.
- Pause after any question longer than a sentence. Silence is a diagnostic tool.
- Never argue. Surface the real concern, then answer it.

Forbidden vocabulary → clinical replacement

| NEVER SAY | SAY INSTEAD |
|----------------------------|---|
| Prospect / lead / customer | Patient / business |
| Pitch / demo | Diagnostic / assessment |
| Close the deal | Authorize treatment |
| Buy / purchase | Proceed with treatment |
| Subscribe | Begin the care plan |
| ROI % | Recovery rate / outcome we will track together |
| Cheaper / discount | Genuine value-add (extra training, support hours) |
| Limited time / act now | We keep implementation capacity limited to protect delivery quality |
| Trust me | [Show the artefact — published pricing, SLA, audit scope] |

1.1 · Cold call opener (0–30 sec) — default for UAE mid-market

Goal: Earn two minutes. Establish credibility honestly. No unverifiable claims.

SPOKEN SCRIPT

"Mr./Ms. [Name], this is [Your Name] from SGC Tech in Dubai. We're an Odoo and AI implementation firm – our team is finance practitioners, CMAs and CPAs who've actually run the books and filed UAE VAT, not just developers. We've configured Odoo for more than fifty businesses here in the UAE.

I'll be direct and keep this to two minutes. Is that fair?"

Why it works: Three honest claims (practitioner-led, 50+ instances, UAE-based). Two-minute cap creates permission. The "is that fair?" question hands control back and surfaces objection #1 instantly.

ADAPTATION BY AUDIENCE

| AUDIENCE | ADJUSTMENT |
|--------------------|---|
| Arab / Emirati | Light pleasantries first ("Good morning, hope you're well"). Use "Sir" consistently. |
| Indian / Pakistani | "Mr. [Name]" — formal. State you've worked with similar-sized groups in their sector. |
| Western expat | Skip pleasantries. Lead with the two-minute cap. Be punctual. |

1.2 · WhatsApp / Telegram cold opener

Goal: One symptom hook, one question, one link. No paragraph walls.

SPOKEN SCRIPT

Hi [Name] 🙋

Quick question – are you still running [order-to-cash / commissions / inventory / VAT reporting] across Excel + WhatsApp + Tally?

At SGC we diagnose operational disease and prescribe treatment – not a sales pitch, a diagnostic. We do a paid Rescue Audit from AED 5,000 (50% credited back if you proceed).

Worth a 15-minute look? [Calendly / WhatsApp-to-call]

Why it works: The symptom is the hook — true observation of UAE mid-market, not invented pain. The "not a sales pitch, a diagnostic" line does the doctrine in one sentence. Rescue Audit is the real, low-commitment first step.

1.3 · LinkedIn (connection + post-accept)

Connection request (≤300 chars):

SPOKEN SCRIPT

Hi [Name], I work with finance-led UAE businesses on Odoo + AI implementations. Your work at [Company] in [Sector] caught my eye – would love to connect.
– [Your Name], SGC Tech

Post-accept message (≤80 words):

SPOKEN SCRIPT

Thanks for connecting, [Name].

We don't sell software at SGC – we diagnose operational disease and prescribe treatment.

Most [sector] businesses we see have manual admin costing them AED 100K-250K/year that a system could absorb. Happy to share a one-page sector diagnostic for [Sector] if useful – or we can run a free 15-minute Operational Health Check.

Worth a look?

1.4 • Email cold opener

Subject: [Sector] Operational Health – Diagnostic for [Company]

SPOKEN SCRIPT

Dear [Name],

We've been studying operational patterns in the [Sector] sector across the UAE. Most mid-market businesses in this space show the same symptoms:

- [Symptom 1 – e.g., manual approval workflows across 3+ systems]
- [Symptom 2 – e.g., financial reporting taking 10+ days at month-end]
- [Symptom 3 – e.g., commissions recalculated by hand every cycle]

At SGC, we do not sell software. We diagnose operational disease and prescribe treatment.

Our paid Rescue Audit (from AED 5,000, 50% credited back if you proceed within 90 days) gives you a written findings report and a top-10 fix list. No obligation to continue.

Worth 30 minutes this week?

[Calendly link]

– SGC Diagnostic Team

SECTOR SYMPTOM LIBRARY (SWAP ONE OF THE THREE BULLETS)

| SECTOR | SYMPTOM LINE |
|------------------------|--|
| Construction | Project cost overruns tracked across disconnected spreadsheets |
| Manufacturing | Production hours lost weekly to manual scheduling |
| Real Estate | Property data split across multiple systems with no single source of truth |
| Healthcare | Patient record delays impacting your compliance posture |
| Logistics | Shipment updates requiring manual reconciliation across carriers |
| Retail | POS data not integrated with inventory or finance |
| Professional Services | Billable hours logged manually across multiple tools |
| Trading / Distribution | Multi-warehouse stock counted by hand before every order cycle |
| Education | Fee collection, attendance, and parent comms on separate systems |
| F&B | Recipe costing and inventory variance reconciled only at month-end |

1.5 · Re-engagement opener (30 / 60 / 90 day)

| DAY | CHANNEL | OPENER |
|-----|----------|---|
| 30 | Email | "Hi [Name] — I closed my notes on our last conversation. We don't push, but I did want to share a one-page diagnostic we ran for a [Sector] patient of similar size. Useful?" |
| 60 | WhatsApp | "Hi [Name] — quick check-in. Anything changed on the operational side, or shall I follow up in Q[X]?" |
| 90 | Call | "Mr./Ms. [Name], [Your Name] from SGC Tech. Last time we spoke you were wrestling with [symptom]. Has that improved, or is it still eating the week?" |

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