## **City of Tracy** Development Services Customer Satisfaction Survey







1.	As our customer, what improvements could we make to serve you better?
2.	Was information on City policy and procedures easy to obtain and explained appropriately? If not, how do you think we can make it easier to obtain and understand?
3.	Did you encounter problems arranging to meet with appropriate City staff for service? What is your suggestion to improve this procedure?
4.	Is there anything, in your opinion, that would help us be more expeditious in the processing of your project/request?
5.	Please identify any unexpected snags/delays to your project or request you experienced.
6.	Overall, how would you rate our processing / response time?  □ = Excellent □ = Good □ = Fair □ = Poor
7.	Overall, how would you rate our services? $\Box$ = Excellent $\Box$ = Good $\Box$ = Fair $\Box$ = Poor
8.	Which Division(s) and/or Employee(s) assisted you during your visit?
	□Planning □Building □Engineering □Code Enforcement
	Employee(s):
	Do you have any additional comments?
impro	you for your cooperation as these survey results will be evaluated in an effort to ve our processes and ultimately provide our customers with better service. Press the it Survey Button to return to the City of Tracy Development Services
(Option	f Service: nal) Name: nal) Telephone Number: nal) Email Address: