

Pittsfield Fire Department

33 Catamount Road, Pittsfield, NH 03263 (603)435-6807 fax: (603)435-6983

	<u>Customer Satisfaction Survey</u>														
	Rating System														
4 = Excellent				Date of Event:											
B = Good			-	Address:											
2 = Fair								lationahin to Dation/Online 1							
1 = Poc					_	Name/Relationship to Patient(Option					nal)				
N/A = I	A = Not Applicable					Phon	ie: (Optional)							
					E-Mail: (Optional)										
	The Pittsfield Fire Department is initiating a customer satisfaction survey to evaluate and improve the quality of the services provided to the community. Please take 5 minutes and provide an honest evaluation of the service provided and participate in shaping the fire department in the future.														
	What Type of Emergency Did You Have														
	FIRE	EM	IS NON-EMERGENCY ASSISTANCE									_			
	Emergency Response/Personnel				nel			Emergency Response/Equipment							
•	Circle One											_			
ſ	Appearance of Personnel	4	3	2	1	N //	4	Respon	se Time		4	3	2	1	N/A
	Skill Level	4	3	2	1	N/A	_	_	ent Appe	arance	4	3	2	1	N/A
	Courtesy	4	3	2	1	N/A	_	·							
	Responsive to my needs	4	3	2	1	N/A	_								
l	Communications	4	3	2	1	N/A	1								
	Overall Satisfaction														
	Would you recommend the service to other			thers	?			Ye	Yes			No			
	Is there any employee you wish to recognize? If so, list the names and reason for the recognition:														
					J	~	-,					<i>B</i>			
	Would you like and Officer to contact you								Ye	es		No			
	·														
Γ	Any other comments to be	tter s	ervic	e yo	ou?										

Thank you for participating in our survey to improve the services offered to the community of Pittsfield