

City of Yucaipa
Customer Service Questionnaire

We hope that we have provided you with satisfactory service during your recent visit/transaction. In an effort to provide better service to our customers we are seeking your comments about the quality of assistance you received. It would be sincerely appreciated if you would take a few moments to fill out this questionnaire and return it to us. Thank you.

Type of visit/transaction conducted: _____

Date of Visit/Transaction: _____ Department: _____

Please rate the quality of service you received:

- Excellent
- Satisfactory
- Poor
- Other: _____

Please rate the performance of the personnel you dealt with:

- Very Courteous and Helpful
- Average
- Poor
- Other: _____

In your opinion, was the transaction completed in a timely manner?

- Yes
- No
- Other: _____

Would you like to offer any further comments that would help us provide our customers with better service?

Please return this form to:

City of Yucaipa
34272 Yucaipa Blvd.
Yucaipa, CA 92399
Attn: Sherry Washburn OR Click the Submit Button

