

COMMUNITY DEVELOPMENT DEPARTMENT

CUSTOMER SATISFACTION SURVEY

The City of Novato values your feedback, and we want to hear from you!

To better serve you, please share your thoughts about your recent experience with our Community Development Department. Whether you were satisfied or believe there are areas we could improve, your input is important to us. The City is committed to enhancing services and improving your experience.

This survey is expected to take less than five minutes.

*1. Which of the following most accurately identifies you as a customer of the City of Novato Community Development Department? (Check all that apply)

- Novato Resident (including renters)
- Property Owner
- Business Owner
- Design Professional
- Land Developer
- Contractor
- Other: _____

*2. What was the purpose of your recent interaction with the City? (Check all that apply)

- Building Permit / Inspection
- Building Plan Check
- Planning
- Code Enforcement
- Public Works/Encroachment Permit
- Fire Plan Check / Fire Field Inspection
- Sanitation
- Water
- Records
- General Inquiry
- Other: _____

*3. When did you last interact with the City of Novato Community Development Department?

- Just now (within the week)
- This month
- Within the last 6 months
- More than 6 months ago

*4. How do you prefer to receive information from the City of Novato Community Development Department? (Check all that apply)

- Email
- In Person
- Phone
- City website/on-line
- Mail

*5. How would you rate the overall quality of your recent interaction with the City of Novato Community Development Department?

- 5 – Excellent
- 4 – Good
- 3 – Satisfactory
- 2 – Fair
- 1 – Needs Improvement

Please rate your satisfaction in each of the following areas.

*6. Staff availability / accessibility

- 5 – Very satisfied
- 4 – Satisfied
- 3 – Neutral
- 2 – Dissatisfied
- 1 – Very dissatisfied

*7. Staff was courteous and professional

- 5 – Very satisfied
- 4 – Satisfied
- 3 – Neutral
- 2 – Dissatisfied
- 1 – Very dissatisfied

*8. Staff was knowledgeable and clearly answered your questions

- 5 – Very satisfied
- 4 – Satisfied
- 3 – Neutral
- 2 – Dissatisfied
- 1 – Very dissatisfied

*9. Information / guidance provided was helpful

- 5 – Very satisfied
- 4 – Satisfied
- 3 – Neutral
- 2 – Dissatisfied
- 1 – Very dissatisfied

*10. Staff explained the steps in the process well

- 5 – Very satisfied
- 4 – Satisfied
- 3 – Neutral
- 2 – Dissatisfied
- 1 – Very dissatisfied

*11. Review times as stated by the City were met

- 5 – Very satisfied
- 4 – Satisfied
- 3 – Neutral
- 2 – Dissatisfied
- 1 – Very dissatisfied

*12. Were resources provided by City staff useful? (i.e. - handouts, pamphlets, brochures, checklists, videos and/or the City website)

- Yes
- No
- Not applicable

13. Are there any handouts or information that are not currently available that you believe would be helpful. If so, please tell us below.

14. Thinking about your most recent experience, what suggestions would you make to improve service quality?

15. If you would like to be contacted regarding your comments, please provide your information below.

Name: _____

Email Address: _____

Phone Number: _____