



CITY OF RANCHO CUCAMONGA  
CUSTOMER SERVICE QUESTIONNAIRE



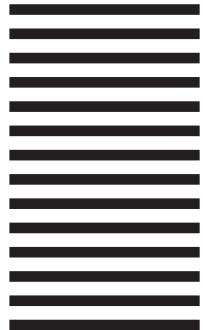
NO POSTAGE  
NECESSARY  
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IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

FIRST-CLASS PERMIT NO. 76 RANCHO CUCAMONGA

POSTAGE WILL BE PAID BY ADDRESSEE

**ATTN: CITY MANAGER  
CITY OF RANCHO CUCAMONGA  
PO BOX 807  
RANCHO CUCAMONGA, CA 91729-0807**



The City of Rancho Cucamonga wishes to provide you with the most effective and efficient service possible. We welcome your comments, questions, and suggestions. Please take a moment to let us know how we are doing by completing this questionnaire.

1. Which of our Departments provided service to you? \_\_\_\_\_  
\_\_\_\_\_

2. Were we helpful in meeting your needs?

Extremely Helpful     Helpful     Not Helpful

3. How would you rate our customer service and professionalism?

Excellent     Good     Fair     Needs Improvement

4. How would you rate the overall service you received today?

Excellent     Good     Fair     Needs Improvement

5. Do you have any comments, questions or suggestions that would help us improve our customer service? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you would like a response to your comments from the City Manager, please provide the following information:

Name: \_\_\_\_\_ Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

(Optional)

*Please deposit the completed customer service questionnaire in the box provided at the counter or mail to the address on the reverse side of this questionnaire. Postage will be paid by the City.*