

PLEASE HELP US IMPROVE OUR SERVICE BY PROVIDING FOLLOWING INFORMATION

**CITY OF SALEM BUILDING &
SAFETY DIVISION'S GROUP**

- PERMIT APPLICATION CENTER
- PLANS EXAMINERS
- INSPECTORS

STAFF PERSON(S) NAME(S):

DATE OF SERVICE:

PLEASE CHECK THE APPROPRIATE LEVEL OF SATISFACTION CORRESPONDING TO SERVICES LISTED BELOW

	<u>EXCELLENT (5)</u>	<u>GOOD(4)</u>	<u>AVERAGE(3)</u>	<u>BELOW-AVERAGE(2)</u>	<u>POOR(1)</u>
TIMELINESS/ PROMPTNESS	<input type="checkbox"/>				
COURTEOUSNESS	<input type="checkbox"/>				
COMPETENCY	<input type="checkbox"/>				
HELPFULNESS	<input type="checkbox"/>				
PROFESSIONALISM	<input type="checkbox"/>				
OVERALL SATISFACTION	<input type="checkbox"/>				

RECOMMENDATIONS FOR IMPROVEMENT/SUPPLEMENTARY COMMENTS:

**Please send the completed survey form to bldgsafety@cityofsalem.net
or mail to Building Codes Division, 555 Liberty St. SE, Room 320, Salem, OR 97301**