



CUSTOMER Survey

John A. Carey
Inspector General

Our Goal is to provide our customers with the best service possible. Your feedback is important to us in order that we may strive to serve with excellence and identify any areas that we may need to improve.

***Must fill out identifying information in order to complete survey**

IF YOU WERE GRANTED WHISTLE-BLOWER STATUS, PLEASE CHECK HERE

*What is the correspondence/complaint number

*Name:

*Address:

*City, State, Zip:

Email Address:

Phone Number:

Were you satisfied with the way your ccffYgdcbXYbW was handled? Yes No
If no, please explain

If you were not satisfied with the outcome, did you re-contact the office to speak with staff about your concerns? Yes No

If yes, did our response address your concern? Yes No
If no, please explain

Were you satisfied with the professionalism of our staff? Yes No
If no, please explain

Please add any additional comments or explanations below

Print and then fax, scan or mail completed form with any supporting documentation to:

Office of Inspector General
PO Box 16568
West Palm Beach, FL 33416

Fax: (561) 233-2375

Email: Inspector@pbcgov.org