



Tell Us How We Are Doing

City of Vernon
Community Services & Water Department
Customer Evaluation

Please check which Community Services section you were working with

Building Plumbing & Mechanical Electrical Public Works Engineering
 Water General Information

1. How pleased were you with the courteousness of the City employee who initially took your request?

Very Pleased Pleased Neither Pleased nor Displeased Displeased Very Displeased
 1 2 3 4 5

2. How pleased were you with the helpfulness of Vernon City staff?

Very Pleased Pleased Neither Pleased nor Displeased Displeased Very Displeased
 1 2 3 4 5

3. Compared to other cities, how pleased were you with services provided by the City of Vernon?

Very Pleased Pleased Neither Pleased nor Displeased Displeased Very Displeased
 1 2 3 4 5

Comments/Suggestions

Do you have any suggestions about the department that could help us respond to your needs better in the future?

Optional: Are you a: Property Owner Business in Vernon Realtor Contractor Other

Name _____ Business Representing _____ Phone # _____

Optional: - If you wish to nominate a City representative or a City crew for an exceptional service award please state the individuals name and reason why he or she is deserving of recognition.

Mail to: City of Vernon, 4305 Santa Fe Avenue, Vernon, California 90058, Attn: Kevin Wilson
 or email to kwilson@ci.vernon.ca.us.