



# CUSTOMER SATISFACTION SURVEY

467 E Jackson, Lake Orion, MI 48362  
 (248) 693-7100 fax (248) 693-7270

DATE: \_\_\_\_\_

Please evaluate the service you received from NOTA's transportation service.

**\*If an area is poor please explain below for us to serve you better.**

## DISPATCH

	Excellent	Good	Poor*
1. Please rate your experience with Dispatch staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A. The staff was helpful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. My call was answered promptly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Available services were explained clearly to me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. I was treated with respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Every effort was made to accommodate my transportation need.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. The staff seemed knowledgeable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## DRIVERS

2. Please rate your experience with NOTA drivers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A. My driver was helpful and provided assistance if necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. My driver was on time for my pick-up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. My driver was courteous.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. My driver drove safely and observed all traffic rules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. My driver made sure that all seat belts were fastened.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. I was notified promptly of any changes in pick-up time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I waited longer than 15 minutes to be picked up past my pick up time			
<input type="checkbox"/> Yes <input type="checkbox"/> No			

## EQUIPMENT

4. Please evaluate the vehicles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A. The equipment was working and met my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. The vehicle was comfortable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. There were sufficient vehicles available to meet my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. The vehicle was accessible and met my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. The vehicle was clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## OVERALL

5. How many times have you used NOTA's services?	
A. more than 50 times	<input type="checkbox"/>
B. 25 – 50 times	<input type="checkbox"/>
C. 10 – 24 times	<input type="checkbox"/>
D. 2 – 10 times	<input type="checkbox"/>
E. never before – first time	<input type="checkbox"/>

- 6. I was able to go where I needed to go  
 Yes       No please state where you wanted to go: \_\_\_\_\_
  
- 7. I was able to go the time that I wanted.  
 Yes       No please state time and day of week we couldn't accommodate: \_\_\_\_\_
  
- 8. Based on your experiences with NOTA, how likely is it that you would recommend this service to someone else? (please check one)  
 Definitely       Probably       Maybe       Probably Not       Definitely Not
  
- 9. If you needed transportation services in the future, would you contact us again?  
 Definitely       Probably       Maybe       Probably Not       Definitely Not
  
- 10. Based on your experience(s) with us, how would you rate us overall?  
 Excellent       Above Average       Average       Below Average       Poor
  
- 11. How did you learn about our services?
  
- 12. How many years have you used NOTA?

Thank you for helping us to improve our services to better meet the needs of our customers. If you have comments or suggestions, please use the space provided below. We would really appreciate your input.

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Name (optional): \_\_\_\_\_

You can give survey to driver, mail it in or fax it. Thank you for using NOTA and for your input!