

Lockhart Fire Rescue – Call for Assistance Performance Evaluation

As public servants, Lockhart Fire Rescue is interested in **YOUR** evaluation of the performance of our personnel. We value your opinion so that improvements may be made where necessary. Your complete satisfaction is our essential mission and number one priority. Please rate the **QUALITY** of service you received on a scale of Zero (Poor) to Five (Excellent). Also feel free to make any additional comments in the space provided. Thank you for your time in completing this evaluation.

On a scale of Zero (Poor) to Five (Excellent), how would you rate the **OVERALL** service delivery?

ZERO ONE TWO THREE FOUR FIVE

NON-EMERGENCY INCIDENTS (Inspections, code Enforcement, Plan Review, Public Assists, etc.):

1. Was Fire Rescue's response? Yes No

If no, please explain: _____

2. Did the Firefighters perform in a professional manner: Yes No

If no, please explain: _____

3. Did the Firefighters offer further information in order to assist you with this incident?: Yes No

If no, please explain: _____

4. Were the Firefighters courteous and were explanations offered for actions taken during this incident?

Yes No

If no, please explain: _____

5. Upon completion of service, did the Fire Department help to restore the area back to or as near to normal as possible? Yes No

If no, please explain: _____

6. Do you feel the department did everything necessary to provide assistance to you? Yes No

If no, please explain: _____

Name: _____ Address: _____

Telephone: _____

Date of Service: _____ Type of Service Rendered: _____

Please complete and return this survey to:

Joseph A. Gorman, Fire Chief
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