

**CLERKS DEPARTMENT  
CUSTOMER SERVICE FEEDBACK  
FORM-CLK-106**



**Application Process**

King Township is committed to providing exceptional customer service to all of our residents and stakeholders. We value all of our customers and strive to meet everyone’s needs. We welcome your comments to help us monitor and improve our services and the quality of your experience. Please submit the completed form marked Attention: Chief Administrative Officer.

Forms may be delivered in person or by mail to the Township of King at 2585 King Road, King City, ON L7B 1A1 by Email to [clerks@king.ca](mailto:clerks@king.ca) or by Fax: (905) 833-2300.

**1. Which King Township department did you visit? (Please check one ✓)**

<input type="checkbox"/> Administration	<input type="checkbox"/> Fire and Emergency Services
<input type="checkbox"/> Building	<input type="checkbox"/> Human Resources
<input type="checkbox"/> By-law Enforcement Services	<input type="checkbox"/> Information Technology (I.T.)
<input type="checkbox"/> Clerks	<input type="checkbox"/> Parks, Recreation and Culture
<input type="checkbox"/> Engineering and Public Works	<input type="checkbox"/> Planning
<input type="checkbox"/> Finance	

**2. What was the purpose of your visit?**

**3. Time and Date of visit/service**

Time of Day	Date

**4. Rate your satisfaction with the staff member(s) and the service(s) you received.**

**1 = Very Dissatisfied      2 = Dissatisfied      3 = Neutral      4 = Satisfied      5 = Very Satisfied**

**Staff:**

a) Helpful	
b) Courteous	
c) Knowledgeable	
d) Well-informed with current information	

**Service:**

a) Timely	
b) Provided in a fair and consistent manner	

**5. Overall, did the service...**

Meet your expectations?  Yes  No

Exceed your expectations?  Yes  No

Not meet your expectations?  Yes  No

**6. Did you have any problems accessing our services?**

Yes  No

**7. Can you suggest methods of enhancing our service delivery to you?**

**8. Did any member of our staff provide exceptional customer service delivery? If yes, please provide any names and details.**

**Thank you for your input!**

**If you would like a response to your comments, please complete the following:**

Name:

Address:

Phone:

Email:

Personal information (PI) is collected on this form under the authority of the Municipal Act, s. 11. The purpose of this collection is to administer the customer service feedback program. The personal information provided on this form is protected in accordance with the *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA). Should you have any questions or concerns regarding the collection of personal information (PI), please contact the Clerks Department, Township of King, 2585 King Road, King City, L7B1A1 (905) 833-5321.