



CUSTOMER SERVICE QUESTIONNAIRE

U.S. Department of Transportation
Maritime Administration

A Maritime System that Serves America
With American Ships and American Labor

OMB No. 2133-0528
Expiration Date: 03/31/02

Dear Customer:

We value your feedback and would like to know how well we are meeting your needs with respect to the _____ program activity. Please take a few moments to complete the following questions that apply and return this postage paid mailer to us or fax it to (202) 366-9206. For your convenience, you may respond electronically through MARAD's Home Page (<http://www.marad.dot.gov>). This survey takes approximately 2 minutes to complete.

	Yes	No	Not Applicable	Unsatisfactory	Satisfactory	Excellent
1. TELEPHONE CONTACT						
a. Did you call a specific MARAD staff member?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b. Were you assisted or correctly redirected by (respond to all that apply):						
Staff Member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Answerer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Voice Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c. Was call returned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Length of time to reply _____						
d. Did you use a toll free number?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
If so, did you receive assistance or direction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. ELECTRONIC CONTACT						
a. Did you use E-mail or facsimile rather than telephone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b. Did you receive a response?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c. Have you visited MARAD's web site at http://www.marad.dot.gov	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
d. Was the web site helpful in:						
Finding the material you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Finding an appropriate contact?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
(For suggestions or changes, see our comment section.)						
3. MATERIAL PROVIDED						
a. Did you receive the information/items you requested?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b. Was the information current?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c. Which format did you receive?	<input type="checkbox"/> Paper	<input type="checkbox"/> Electronic				
d. Which format is preferred?	<input type="checkbox"/> Paper	<input type="checkbox"/> Electronic				
4. RESPONSE						
a. Response Time						
Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Electronic Contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b. Completeness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
If not complete, did we explain why?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c. Courteous Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. SERVICE						
a. Did someone at this agency provide you exceptional service? (please circle)				Yes	No	
b. If yes, who? (Name and Phone Number)	_____					
6. PLAIN LANGUAGE						
Is MARAD's information organized, clear, and easy to understand? (please circle)				Yes	No	
7. COMMENTS						
Please suggest specific improvements or benchmarks for comparable service: _____						

Would you like a MARAD employee to call to discuss comments?						
					Yes	No
If yes, please provide Name/Phone Number - If no, optional						

On behalf of the Maritime Administration, thank you for evaluating our customer service. We look forward to serving you again.						
(For Office Use Only)						
Organizational Code						
Program Activity Code						
Date of Response						
Item(s) were Mailed/Faxed/E-mailed						
External or Internal						

TAPE (Do Not Staple)

FOLD HERE

U.S. Department
of Transportation

**Maritime
Administration**

400 Seventh St. SW
Washington, DC 20590-0001



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO. 12706 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY MARITIME ADMINISTRATION

Maritime Administration
400 7th Street, SW, Room 7210
Washington, DC 20590-0001

