



Town of Kill Devil Hills

Fire Department: 1634 N. Croatan Hwy.
P. O. Box 1719
Kill Devil Hills, NC 27948

How can we improve?

Fire Department

To better meet the needs of the people we serve, the Town of Kill Devil Hills is conducting this confidential survey to gain insight into customer satisfaction with the various functions of the Fire Department. As a user/customer of the department, your observations, opinion and recommendations are important to us and may help guide us as we strive to improve the operation of the department.

We thank you for your participation in completing this customer service survey. Your answers and additional comments will be of great value and will be treated in complete confidence. Therefore, we are requesting that you forward the completed questionnaire to the **Town of Kill Devil Hills, Attn: Shawn R. Murphy, P O Box 1719, 102 Town Hall Drive, Kill Devil Hills, NC 27948** or by fax: **252-441-7946**.

Sincerely,

Sincerely,

Shawn R. Murphy
Assistant Town Manager

Troy Tilley
Fire Chief

1) Are you a:

- Kill Devil Hills' resident or property owner
- Dare County resident
- Visitor
- Business Owner

2) How much interaction have you had with the Fire Department or Ocean Rescue, in the past 12 months:

- 1 – 2 contacts
- 3 – 5 contacts
- 5 – 10 contacts
- More than 10 contacts

3) What was your reason for contacting the Fire Department or Ocean Rescue?

- Fire
- Motor Vehicle Accident
- Water Rescue
- Emergency Medical Help
- Fire Inspection/Fire Code Issue
- Child Safety Seat Installation
- Service Request
- Other: _____

4) How did you contact the Fire Department or Ocean Rescue?

- 911 Dispatch
- Telephone call to the Fire Station
- E-mail
- Walk-In Visit
- Fax
- Other: _____

5) When making contact with the Fire Department or Ocean Rescue, have our members been responsive and helpful?

- Yes
- No
- Could be better

Comments: _____

6) Was the Department's response to your emergency call prompt?

- Yes
- No
- Could be better

Comments: _____

7) Were your needs met by the emergency service you received from the Department?

- Yes
- No
- Could be better

Comments: _____

8) Were your needs met by the non-emergency service you received from the Department?

- Yes
- No
- Could be better

Comments: _____

9) Were your needs met by the fire inspector/fire code service you received from the Department?

- Yes
- No
- Could be better

Comments: _____

10) Were the Department members who responded to your call for services courteous and helpful?

- Yes
- No
- Could be better

Comments: _____

11) How satisfied are you with the service you received from the Fire Department and/or Ocean Rescue?

- Very Satisfied
- Satisfied
- Could be better
- Not satisfied

Comments: _____

12) Please share any comments you may have concerning the delivery of services by the Kill Devil Hills Fire Department and Ocean Rescue.

Additional Comments:
Do you have any suggestions on how we might improve our service to you?

Thank you for your participation!