

Customer Satisfaction Response

The Georgia Real Estate Commission is committed to maintaining a high quality of service to all who seek information and assistance from the Commission's staff and its electronic services. You can help the Commission maintain that goal by responding to this survey.

- In the last six months have you
- called or visited the Commission to obtain an answer to a question about license law, licensing, or education or to file a complaint?
 - visited our Web site?
 - renewed your license on line? or
 - had some other reason for contacting the Commission?

If you answered yes to any of these questions, we are interested in hearing about your experience.

Please answer all of the following questions that apply and help us identify and maintain areas in which our service is effective and take action in the areas needing improvement. When you have completed the survey, please return it to the following address:

Georgia Real Estate Commission
Suite 1000, International Tower
229 Peachtree Street, NE
Atlanta, Georgia 30303-1605

Person Completing Survey: (optional) _____

Staff Member Who Assisted You: (If applicable) _____

1. For what reason did you contact the Commission?

Please check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Application for License | <input type="checkbox"/> Laws, Rules, and Regulations |
| <input type="checkbox"/> Transfer | |
| <input type="checkbox"/> Continuing Education | <input type="checkbox"/> Request Packet (application, complaint, etc.) |
| <input type="checkbox"/> Renewal | |
| <input type="checkbox"/> Trust Account | <input type="checkbox"/> General Information |
| <input type="checkbox"/> Complaint | |
| <input type="checkbox"/> Other (please specify) _____ | |

2. How was your contact made?

- | | |
|------------------------------------|--|
| <input type="checkbox"/> In Person | <input type="checkbox"/> Regular Mail |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> E-Mail |
| <input type="checkbox"/> Web site | <input type="checkbox"/> On-line renewal |

3. Was your contact handled efficiently and in a professional manner?

- Yes No Comment: _____

4. If your contact was with a person, were you treated politely, with courtesy and respect?

- Yes No Comment: _____

5. Did staff seem knowledgeable, and assist you in a timely manner?

- Yes No Comment: _____

6. Overall, how would you rate your experience(s) with the Commission staff?

- Excellent Good Fair Poor

7. If your contact was through on-line renewal, how would you rate the experience?

- Excellent Good Fair Poor

8. What specific problems, if any, did you encounter with on-line renewal?

Comment: _____

9. If your contact was with the Web site, how would you rate the experience?

- Excellent Good Fair Poor

Comment: _____

10. Do you have any additional comments or suggestions? If so, please use the remaining space or additional pages as needed.

