



Orange County Vector Control District

13001 Garden Grove Blvd., Garden Grove, CA 92843

(949) 654-2421 • (714) 971-2421 • Fax (714) 971-3940

The Orange County Vector Control District takes great pride in serving our public. Since 1947, the District has worked to protect the citizens of Orange County from the threats of vectors and vector-borne diseases. Feedback from the citizens we serve is essential to providing the best service possible to you. I hope you will take a minute to share with the District your opinion of the service we provided to you.

Your response is anonymous and will be very helpful as we strive to provide the highest level of protection to the citizens of Orange County. Please fill in your zip code, and if you would like to be contacted for any reason, provide a phone number or email address in the optional "Contact" section.

Thank you for your feedback. Please feel free to contact the District if we can be of further assistance to you.

Sincerely,

A handwritten signature in cursive script, appearing to read "Gerard Goedhart".

Gerard Goedhart
District Manager

Detach Reply Card and Drop Survey in the Mail



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO 661 GARDEN GROVE CA

POSTAGE WILL BE PAID BY ADDRESSEE



**ORANGE COUNTY
VECTOR CONTROL DISTRICT
13001 GARDEN GROVE BLVD
GARDEN GROVE CA 92843-9924**





13001 Garden Grove Blvd.
Garden Grove, CA 92843



Please help Orange County Vector Control District make sure you receive the finest service possible by filling in the appropriate numeric score, 1 through 5, with 5 being the highest. Thank you for taking the time to help.

| Much less than expected | | About as expected | Much better than expected | |
|--|--|-------------------|---------------------------|---|
| 1 | 2 | 3 | 4 | 5 |
| Service Attributes | | Score | Comments or Suggestions | |
| Were your phone calls returned promptly? | | | | |
| Was staff responsive and helpful? | | | | |
| Was staff friendly and courteous? | | | | |
| Was staff competent and informative? | | | | |
| Was the problem resolved? | | | | |
| Zip Code _____ | Contact: (Optional) Phone: _____ Email: _____ | | | |
| Comments: | | | | |
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