

Inspection Ref:



BUILDING CONTROL SERVICES

CUSTOMER SATISFACTION QUESTIONNAIRE **ON THE BUILDING REGULATION INSPECTION SERVICE**

In an effort to improve our service and to meet the needs of our customers, I would be obliged if you would take a few moments to complete the following questionnaire. It is related to the service provided by the Council's Building Control Division during the **inspection of works** recently completed under the Building Regulations.

If you were not the person who organised the works on site, please forward this to the person concerned.

Indicate whether you were the Applicant or Agent

Please tick the relevant box

	Excellent	Very Good	Good	Average	Poor	Very Poor
1. Ease of contact/availability of Building Control staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Time taken to respond to your request for inspection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Helpfulness of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Quality of advice/information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Your overall opinion of the service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Do you feel you have received value for money?					YES/NO	
7. Do you feel the Service could be improved? (please provide comments overleaf)					YES/NO	
8. As part of Best Value we have set up a Focus Group. Would you be interested in being a member of the Group? (please provide details overleaf)					YES/NO	

Comments (all comments will be treated confidentially)

If you require a reply to your comments please tick the box

<p><u>Focus Group Details</u></p> <p>Name: -----</p> <p>Address: -----</p> <p>-----</p> <p>-----</p> <p>Telephone: -----</p> <p>E-mail-----</p>

Thank you for taking the time to complete this questionnaire.