Survey For Federal Firearms Licensees (FFLs)



The FBI's Criminal Justice Information Services (CJIS) Division's National Instant Criminal Background Check System (NICS) Section is conducting a voluntary survey of a random sampling of FFLS. The NICS Section would like to utilize the feedback you provide to improve the customer service that we provide to you, our customer.

Please take a few minutes to complete this survey. This survey may be handwritten or typewritten and may be faxed, mailed, or e-mailed to the NICS Section at the following address or contact numbers:

Federal Bureau of Investigation National Instant Criminal Background Check System Section Enhancement, Development, Analysis, and Strategy Team Module A-3 Post Office Box 4278 Clarksburg, WV 26302-4278 or Fax to 1-888-550-6427 or E-mail to nsnider@leo.gov

Thank you for participating in this survey.

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. The FBI NICS Section tries to create forms and instructions that are clear and accurate, can easily be understood, and which impose the least possible burden to you to provide us with information. The estimated average time to complete this survey is 45 minutes. If you have comments regarding the accuracy of this estimate or suggestions for making this survey simpler, you can write to the FBI NICS Section, Post Office Box 4278, Clarksburg, West Virginia 26302-4278.

General Questions about the NICS Section

1. How frequently does your business contact the NICS Section Customer Service? (*not* the Contracted Call Center for the *initiation of background checks*)

		Daily		Weekly
		Monthly		Every few months
		Semi-annually		
		Do not use (Skip to Questi	on	7)
2. How do you contact the NICS Section (<i>not the Contracted Call Center</i>)? (check all that apply)				
		Telephone E-mail Other (please specify)	7	S. Postal Service ax
-				

3. If you contact the NICS Section Customer Service, what was the purpose of your contact? (Check all that apply)

Status Checks	Questions
VAF Check	Enrollment
To make a complaint	
Initiate a background ch	neck when the
Contracted Call Center	is busy
Other (please specify)	
4. How would you rate your int	eractions with the NICS Section?

1 =Poor	2 =Fair	3 =Average	4 =Good	5=Excellent	6 =Not applicabl	e
1	2	2	3	4	5	6

General Questions about the NICS Section

5. If you encountered a positive experience, what made it positive?

6. If you encountered a negative experience, what made it negative?

FFL NICS Liaison Specialist

^{7.} How often has your business contacted the FFL NICS Liaison Specialist?

Daily	Every few months
Weekly	Semi-annually
Monthly	Never (If never, skip to Question 12)

- 8. In what areas did the FFL NICS Liaison Specialist assist you?
- 9. Please use the following rating system to rate your experience with the FFL NICS Liaison Specialist:

1 =Po	oor 2 =Faiı	3 =Average	4 =Good	5=Excellent	6 =Not applicable	
a. P	rofessiona	lism				
	1	2	3	4	5	6
b. L	J pdates re g	arding NICS	changes t	hat may affect	your business	
	1	2	3	4	5	6
с. Т	imeliness i	n resolving y	our concer	n		
	1	2	3	4	5	6
d. C	Courteousn	ess				
	1	2	3	4	5	6
e. C)verall sati	sfaction				
	1	2	3	4	5	6

FFL NICS Liaison Specialist

10. Are there any services the FFL NICS Liaison Specialist could assist you with that are not currently provided?

11. Do you have any comments or suggestions related to the FFL NICS Liaison Specialist?

NICS E-Check

12	12. Are you currently enrolled in the NICS E-Check?					
	YES NO (Skip to Question 19)					
13	. How would you enrollment pro	-	experience v	with the NICS	S E-Check	
	1 =Poor 2 =Fair	3 =Average	4 =Good	5 =Excellent	6 =Not applicable	
	a. Ease of enro	llment				
	1	2	3	4	5	6
	b. Length of ti	ne it takes t	o enroll			
	1	2	3	4	5	6
14	. How would you	u rate the av	vailability o	f the NICS E-	Check?	
	 1=Not reliable n 2=Reliable some 3=Reliable most 4=Reliable all of 5=Not applicable 	e of the time of the time f the time	me			
	1	2	3	4	5	
15	. How satisfied a	re you with	the user fr	iendliness of t	he NICS E-Check	?
	1 =Extremely di 4 =Satisfied	ssatisfied	2 =Dissatisf 5 =Extreme		ewhat dissatisfied	
	1	2	3	4	5	

NICS E-Check

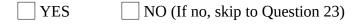
16. What features of the NICS E-Check do you find difficult to use and why?

17. What features of the NICS E-Check do you find easy to use and why?

18. What services would you like to see added to the NICS E-Check?

Fax on Demand

19. Have you ever used Fax on Demand?



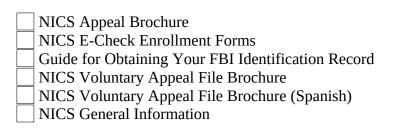
20. How would you rate your experience with Fax on Demand?

1=Poor **2**=Fair **3**=Average **4**=Good **5**=Excellent **6**=Not applicable

a. Ease of use

1	2	3	4	5	6
b. Timeline	255				
1	2	3	4	5	6

21. What documents did you obtain via the Fax on Demand? (check all that apply):



22. Are there any documents that are not currently located on Fax on Demand that you would like to be able to obtain through the Fax on Demand feature?

Requests

23. Would you like to receive information on any of the following?

(Check all that apply)

Fax on Demand
FFL NICS Liaison Specialist
Enrolling in the NICS E-Check
Other

24. How would you like us to send this information to you?

Telephone		
By Mail		
E-mail	Name E-mail	
Fax	Name Number	
Other		

I do not wish to be contacted.

General

25. When you are transferred to the NICS Section personnel from the Contracted Call Center for a delayed transaction, would you prefer:

To be placed on hold for up to a few minutes while we research the transaction in an attempt to gain a final status while you are on hold.
To be called back at a later time with the results.

Other (Please specify)

26. If you are willing to hold, how long would you be willing to wait on the phone while we conduct research to attempt reach a final status:

1 minute	2 minutes 3 minutes	4 minutes
5 minutes	Longer than 5 minutes	Other

27. Do you have any other comments that would allow us to provide improved customer service?

General

28. The NICS Section strives to give our customers exceptional service every day in all areas. If you have received service that was below or above your normal expectations, we would like to hear about it.

If you wish to comment on more than one employee, please provide their name, Brady Identification number, and describe the service they provided.

29. May we contact you regarding any of your concerns or answers?



30. If you answered yes to Question 29, how do you wish to be contacted?

Telephone	Name Number	
By Mail	Name Address	
E-mail	Name E-mail	
Fax	Name Number	
Other		

I do not wish to be contacted.

Please provide any additional comments:

Thank you for your participation in this survey.