

## DEPARTMENT OF VETERANS AFFAIRS Regional Office and Insurance Center Wissahickon Avenue and Manheim Street P. O. Box 7208 Philadelphia PA 19101

XXXXXXXXX XXXXXXXXXX XXXXXXXXXX In Reply Refer To 310/295-S CXXXXXXXXXX

## Dear XXXXXXXXX :

We recently processed a request concerning Veterans' Mortgage Life Insurance (VMLI). Now we would like to know if we did the best possible job. You can help us by doing the following:

- 1. Fill out the enclosed survey.
- 2. Send it to us in the enclosed envelope. (We've paid for the postage.)

This survey is voluntary; however completing it will help us improve our service.

Thank you for taking your time to help us. Please return your survey as soon as possible to make sure we can include your responses in the results.

If you have any questions about your insurance policy, then please feel free to contact us.

Sincerely yours,

JOE TOMASELLI Chief, Insurance Claims Division

Enclosures Survey Postage Paid Envelope

## VA GOVERNMENT LIFE INSURANCE VETERANS' MORTGAGE LIFE INSURANCE (VMLI) SURVEY

1. I contacted the VA Insurance Center to: [ ] apply for VMLI. [ ] request information on this account.						
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not Applicabl
2. It was easy to apply for VMLI.	[ ]	[ ]	[ ]	[]	[]	[]
3. Instructions on the VMLI application were understandable.	[ ]	[]	[]	[ ]	[ ]	[]
4. Contacting us with your request was easy	. []	[ ]	[ ]	[]	[ ]	[]
5. We took the action as requested.	[ ]	[ ]	[ ]	[]	[]	[]
We completed your request in a timely manner.	[ ]	[]	[]	[]	[]	[]
7. Our communications were understandable	e. []	[ ]	[ ]	[ ]	[ ]	[]
8. Our communications were courteous.	[ ]	[ ]	[ ]	[]	[]	[]
9. The overall quality of our service was goo	od [ ]	[ ]	[ ]	[]	[]	[]
10. How can we improve our service?						
-						

MMMMYYYY

(survey #)

**Public Reporting Burden Statement:** VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 6 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000. (OMB Approval No. 2900-0569)