

[Confidentiality Statement](#)

OMB Control No. 0910-0360

Participation/non-participation is completely voluntary and responses will not have an effect on a respondent's eligibility for receipt of any FDA services. All respondents, identification, and information are confidential and will be anonymous, unless otherwise indicated. In instances where respondent identity is needed, this information collection fully complies with all aspects of the Privacy Act.

Continue

Cancel

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Basic Information

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1. Identify the User Fee that you will be evaluating in this survey:

	User Fee
Establishment Registration User Fee	<input checked="" type="checkbox"/>
Animal Drug User Fee	<input type="checkbox"/>
Animal Generic Drug User Fee	<input type="checkbox"/>
Biosimilar User Fee	<input type="checkbox"/>
Generic Drug User Fee	<input type="checkbox"/>
Medical Device User Fee	<input type="checkbox"/>
Prescription Drug User Fee	<input type="checkbox"/>

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[Exit this survey](#)

Overall Satisfaction with the User Fee Website

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2. During your last visit to the User Fee Website, how satisfied were you with:

	Not at all satisfied	Mostly satisfied	Completely satisfied	N/A
Navigating to the User Fee Website	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Creating a new customer account	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Selecting your User Fee and creating a cover sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Paying online	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Retrieving your forgotten password	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Is there anything else you would like to tell us regarding your visit to the User Fee Website?

This is a test.

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User Fee Helpdesk

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3. If you contacted the User Fee Helpdesk within the last year, how satisfied were you with:

	Not at all satisfied	Mostly satisfied	Completely satisfied	N/A
Resolution of problem	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Timeliness of response	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Availability of the Helpdesk	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Your overall Helpdesk experience	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

Do you have any suggestions or comments about the User Fee Helpdesk?

This is a test.

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User Fee Frequently Asked Questions (FAQs)

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4. If you have used the FAQ in the past year, how satisfied were you with:

	Not at all satisfied	Mostly satisfied	Completely satisfied	N/A
Their ease of use	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Their helpfulness	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

Do you have any suggestions or comments about the FAQ section?

This is a test.

5. If you would like us to follow-up on your responses, please provide your organization name, name, email address and/or phone number.

Organization Name

Name

Email Address

Phone Number

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Thank you for completing our survey.

Please contact the User Fee Helpdesk if you have any questions:
userfees@fda.gov or (301) 796-7200

Prev Done