

Regulatory Customer Service Survey

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The public reporting burden for this collection of information, OMB Control Number 0710-0012, is estimated to average 10 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. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

COMPLETED APPLICATION SHOULD BE SUBMITTED USING THE "SUBMIT" BUTTON AT THE BOTTOM OF THE SURVEY.

PRIVACY ACT STATEMENT

Authorities: The Government Performance and Results Act of 1993 and Executive Order (EO) 12862, "Setting Customer Service Standards", dated September 11, 1993. Purpose: To determine the quality of services our customers expect, as well as their satisfaction with USACE's existing services. Information provided on this form will be used in evaluating the performance of the Corps Regulatory Program. Routine Uses: This information may be shared with the Office of Management and Budget, members of Congress, and other federal, state, and local government agencies. Disclosure: Providing requested information is voluntary. Failure to provide this information will not result in an adverse action. System of Record Notice (SORN). The information received is entered into our permit tracking database and a SORN has been completed (SORN #A1145b) and may be accessed at the following website: <http://dpcl.d.defense.gov/Privacy/SORNSIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx>

CUSTOMER SERVICE SURVEY - REGULATORY PROGRAM, U.S. ARMY CORPS OF ENGINEERS

We at the U.S. Army Corps of Engineers Regulatory Branch are committed to improving service to our customers and would like to know how well we have been doing. Who are our customers? You are our customers if you submitted a permit application, requested a jurisdictional determination or wetland delineation, or scheduled a pre-application meeting with us. Other customers include those of you who receive our Public Notice and/or commented on a particular project or our work in general, because of your interest in the Regulatory Program. To identify how we can better serve you, we need your help. Please take the time to fill out this brief survey and submit it to us. Your honest opinions will help us determine areas in which we need to improve.

For each question, please indicate the level of service you received by marking the appropriate number on a scale from 0-5, with 0 being (dissatisfied) and 5 being high (very satisfied). If the question does not apply to you, simply mark N/A.

I. FOR APPLICANTS & OTHERS REQUIRING AUTHORIZATIONS	DISSATISFIED TO HIGHLY SATISFIED
1. Do you think you received your Corps decision in a reasonable amount of time?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
2. Did the Corps keep you informed about the status of your application?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
3. If we recommended/required project changes/modifications to reduce impacts, did we clearly explain the reasons why?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
4. Did the Corps staff provide complete information to you that was clear and understandable?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
5. Did the Corps representative act professionally or treat you with courtesy?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
6. Did the Corps respond to your letters and telephone calls in a reasonable amount of time?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
7. Did the Corps representative answer your questions clearly, giving you clear information about our Regulatory Program?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
8. My visit/call to the office was a pleasant one?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA
9. What is your OVERALL rating of the level of service provided by the Corps of Engineers Regulatory Program?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> NA

10. Additional Comments:

11. How can we improve our service?

NOTE: Data from this questionnaire will be used by the district to improve service. Also, information will be tabulated nationally by service area. Respondents will not be identified by name or organization for any report derived from the survey.

What Service(s) Did You Seek from the Corps? (if applicable, check more than one):

- General Information Jurisdictional/Wetland Determination
- Pre-application Consultation Resolution of Violation/Non-compliance
- Nationwide General Permit Regional or Programmatic Permit
- Standard Individual Permit Letter of Permission

Other (describe):

Which Corps office did you work with?

Project Title: _____ Project Location (City, County, State): _____

Do you have any comments or suggestions on the Regulatory Program?

Please indicate the nature of your business (if applicable, check more than one):

- Property Developer Flood/Water Control District Sand & Gravel
- Public Agency Applicant Consultant Law Office Public
- Federal/State/Local Mining Other _____

May we contact you? YES NO (If yes, please complete the section below)

Name/Title:
 Address:

Telephone (include area code): _____

Date Submitted: