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| **Paperwork Reduction Act Notice**  The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of the Paperwork Reduction Act. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a currently valid OMB control number. This includes the time it will take for reviewing instructions. The OMB control number for this collection is 2132­0572 and the expiration date is 11/30/2024. The time required to complete this information collection is estimated to average 25 minutes per response, including the time to review the instructions and complete and review the information collection. The information will be used by FTA to assess customer needs, determine how well FTA is responding to those needs and improve service, if needed. Response to this request is voluntary. |
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| 1. **What was your level of satisfaction with the customer service you received in your most recent Contact Us submission?**   Very Satisfied  Satisfied  Neither Satisfied nor Dissatisfied  Dissatisfied  Very Dissatisfied   1. **Was your submission resolved to your satisfaction?**   Yes  Neither Satisfied nor Dissatisfied  No   1. **How satisfied were you with the timeliness of the response to your question or comment?**   Very Satisfied  Satisfied  Neither Satisfied nor Dissatisfied  Dissatisfied  Very Dissatisfied |

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| **4. What is your affiliation?**  General Public  Government Agency  International  Student  Transit Agency (Grantee)  Transit Industry (Contractor, Manufacture, Supplier)  Other (please specify) |

**. Are there any other comments or suggestions that you would like to add?**

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**If you were**

**not satisfied, please provide suggestions for improvement.**

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