



# CITY OF ST. MARYS, GEORGIA

## PERFORMANCE QUESTIONNAIRE

FORM **Q**

IN AN EFFORT TO IMPROVE SERVICES TO OUR CITIZENS, THE CITY RESPECTFULLY REQUESTS THAT YOU COMPLETE THE FOLLOWING BRIEF QUESTIONNAIRE.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
PROJECT ADDRESS: \_\_\_\_\_ OWNER PHONE # \_\_\_\_\_  
PROJECT TYPE: \_\_\_\_\_

HOW WOULD YOU RATE YOUR **OVERALL** EXPERIENCE WITH THE PLANNING AND BUILDING DEPARTMENT

Poor Avg. Excellent  
1 2 3 4 5 →

PLEASE RATE YOUR EXPERIENCE SPECIFIC TO:

**BUILDING PERMITS**

Poor Avg. Excellent  
1 2 3 4 5 →

**SPECIAL USE PERMITS**

1 2 3 4 5

**OCCUPATION TAX LICENSES**

1 2 3 4 5

**VARIANCES**

1 2 3 4 5

**SIGN PERMITS**

1 2 3 4 5

**SUBDIVISION REVIEW AND APPROVAL**

1 2 3 4 5

**HISTORIC PRESERVATION COMMISSION**

1 2 3 4 5

**PLANNING COMMISSION**

1 2 3 4 5

**OTH-**  **ER** (LIST \_\_\_\_\_) 1 2 3 4 5

**TREE BOARD**

1 2 3 4 5

3. FOR THE ITEMS OF PART 2 CHECKED ABOVE:

a. WAS CITY STAFF HELPFUL AND COURTEOUS? \_\_\_\_\_ YES \_\_\_\_\_ NO

b. WAS THE PROCESS CLEARLY DEFINED? \_\_\_\_\_ YES \_\_\_\_\_ NO

c. WAS THE ORDINANCE AND OTHER RULES CLEARLY DEFINED AND/OR EXPLAINED? \_\_\_\_\_ YES \_\_\_\_\_ NO

(If no was checked, please list comments below or on the back of this evaluation form)

4. **ANY COMMENTS:** (please be objective) \_\_\_\_\_

\_\_\_\_\_ (use back of sheet if necessary)

5. ANY **SUGGESTIONS** ON HOW THE PLANNING AND BUILDING DEPARTMENTS CAN MAKE OUR CITY MORE BUSINESS AND/OR RESIDENT FRIENDLY? \_\_\_\_\_

\_\_\_\_\_ (use back of sheet if necessary)

6. WOULD YOU LIKE TO REQUEST A MEETING WITH EITHER THE CITY MANAGER OR THE DEPARTMENT DIRECTOR TO DISCUSS YOUR EXPERIENCE? \_\_\_\_\_ YES \_\_\_\_\_ NO IF YES, PLEASE ENTER YOUR TELEPHONE NUMBER ABOVE .

**THANK YOU FOR YOUR ASSISTANCE IN MAKING THE PLANNING AND BUILDING DEPARTMENT THE BEST!!**