



Oakland Housing  
Authority

# visitor satisfaction survey

We value your opinion! Let us know about your OHA experience by answering the following questions. Please circle the number that best describes your reaction and return by mail or place in the collection box in our lobby. **All respondents will be eligible to win a free gift card each month.**

## Were you greeted quickly and kindly by the Oakland Housing Authority representative?

|                                   |         |          |               |                |
|-----------------------------------|---------|----------|---------------|----------------|
| 1<br>IGNORED OR<br>TALKED DOWN TO | 2<br>NO | 3<br>YES | 4<br>GOOD JOB | 5<br>FANTASTIC |
|-----------------------------------|---------|----------|---------------|----------------|

## Was the environment comfortable?

|                    |                          |         |                  |              |
|--------------------|--------------------------|---------|------------------|--------------|
| 1<br>UNCOMFORTABLE | 2<br>TOO HOT OR TOO COLD | 3<br>OK | 4<br>COMFORTABLE | 5<br>PERFECT |
|--------------------|--------------------------|---------|------------------|--------------|

## Was your privacy respected?

|  |                               |          |                   |   |
|--|-------------------------------|----------|-------------------|---|
| 1<br>MY BUSINESS WAS DISCUSSED<br>IN FRONT OF OTHERS | 2<br>OTHERS COULD<br>OVERHEAR | 3<br>YES | 4<br>VERY PRIVATE | 5<br>I FELT LIKE I WAS THE ONLY<br>PERSON IN THE OFFICE |
|--|-------------------------------|----------|-------------------|---|

## Were you assisted in a reasonable amount of time?

|                                     |                                       |                                      |                                      |                                |
|-------------------------------------|---------------------------------------|--------------------------------------|--------------------------------------|--------------------------------|
| 1<br>WAITED MORE THAN<br>15 MINUTES | 2<br>WAITED BETWEEN<br>5 - 15 MINUTES | 3<br>WAITED BETWEEN<br>1 - 5 MINUTES | 4<br>WAS HELPED<br>WITHIN ONE MINUTE | 5<br>WAS HELPED<br>IMMEDIATELY |
|-------------------------------------|---------------------------------------|--------------------------------------|--------------------------------------|--------------------------------|

## Was your appointment conducted at its scheduled time?

|                                     |                                       |                                      |                                      |                                |
|-------------------------------------|---------------------------------------|--------------------------------------|--------------------------------------|--------------------------------|
| 1<br>WAITED MORE THAN<br>15 MINUTES | 2<br>WAITED BETWEEN<br>5 - 15 MINUTES | 3<br>WAITED BETWEEN<br>1 - 5 MINUTES | 4<br>WAS HELPED<br>WITHIN ONE MINUTE | 5<br>WAS HELPED<br>IMMEDIATELY |
|-------------------------------------|---------------------------------------|--------------------------------------|--------------------------------------|--------------------------------|

## Was the issue that you came in for today completed to your satisfaction?

|                                      |                                 |   |          |   |
|--------------------------------------|---------------------------------|---|----------|---|
| 1<br>NO: STAFF WAS<br>RUDE AND SHORT | 2<br>NO: I HAVE TO<br>COME BACK | 3<br>NO: I HAVE TO COME BACK<br>WITH MORE INFORMATION | 4<br>YES | 5<br>STAFF WAS KIND AND EFFICIENT<br>AND GOT THE JOB DONE |
|--------------------------------------|---------------------------------|---|----------|---|

## How would you rate today's experience at OHA?

|                |                 |              |                  |                |
|----------------|-----------------|--------------|------------------|----------------|
| 1<br>THE WORST | 2<br>PRETTY BAD | 3<br>AVERAGE | 4<br>PRETTY GOOD | 5<br>FANTASTIC |
|----------------|-----------------|--------------|------------------|----------------|

## Which OHA office did you visit today?

|               |               |              |               |               |
|---------------|---------------|--------------|---------------|---------------|
| 1619 HARRISON | 1805 HARRISON | 935 UNION ST | 1327 65TH AVE | 1180 25TH AVE |
|---------------|---------------|--------------|---------------|---------------|

Name \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

*Please comment on the other side.*

