

Water Quality Partnership Program survey

Thank you for taking time to fill out this short, nine question survey. It should only take you about 10 minutes to finish, and your answers will help us make sure that your expectations are being met. Your answers will be shared with program staff, but your name will not be shared.

If you have questions or concerns, please contact the health department at 614-525-3160 and ask for the Water Quality Program.

1. How did you hear about the Water Quality Partnership Program? (Please select all that apply)

- Letter from the Franklin County Engineers
- Letter from the Franklin County Public Health department
- Postcard
- Phone call
- Newspaper
- Website
- Other (please specify)

2. What part of the Water Quality Partnership Program loan process was the least frustrating?

- Loan paperwork
- Community meeting
- Phone contact with Health Department
- Email contact with health department
- Interactions with contractor

3. What part of the Water Quality Partnership Program was the most frustrating?

- Loan paperwork
- Community meeting
- Phone contact with Health Department
- Email contact with health department
- Interactions with contractor

4. Did the contractor who connected your house to the sewer treat you with respect?

- Yes
- No

5. Did the contractor who connected your house to the sewer treat your property with respect?

- Yes
- No

6. Did you have a chance to ask questions about the work done to your property, before the work happened?

- Yes
- No

7. Did you have a chance to ask questions about the work done to your property, after the work happened?

- Yes
- No

8. Overall, how do you feel about the Water Quality Partnership Program experience?

- Good
- Neutral
- Bad

Why?

9. Is there anything else you'd like to share about your experience with the Water Quality Partnership Program?

Thank you for taking our survey! If you have questions or comments, please call the Franklin County Public Health department at 614-525-3160 and ask for the Water Quality Partnership Program.

10. Reviewers only: What feedback do you have?

Please consider these questions as you answer:

- 1. Do the questions makes sense?**
- 2. Are they easy to understand?**
- 3. Did it take less than 5 or 10 minutes to complete the survey?**
- 4. What's one thing you would change?**
- 5. What's one thing you really like?**
- 6. Other thoughts?**