



WAYNESVILLE RURAL FIRE PROTECTION DISTRICT



RESPONSE SURVEY

Recently, we responded to a call for assistance at your location. We are interested to know how well you feel we performed our duties.

Your Name – *Optional*

Date of Incident – *Required*

Address or Incident Location – *Required*

Type of Incident

- | | |
|--|--|
| <input type="checkbox"/> Fire (<i>Structure</i>)
<input type="checkbox"/> Vehicle Accident (<i>Injury</i>)
<input type="checkbox"/> Medical (<i>WRFPD only assists PCAD and Dixon Ambulance</i>) | <input type="checkbox"/> Fire (<i>Brush</i>)
<input type="checkbox"/> Vehicle Accident (<i>Noninjury</i>)
<input type="checkbox"/> Other |
|--|--|
- For medical incidents, please **check** if you understand that Waynesville Fire Protection District and Pulaski County Ambulance District are separate entities that are not affiliated.*

Please rate the following	Excellent	Good	Average	Poor	Unacceptable
911 Dispatch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timely Arrival	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Firefighter Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge and Competence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Firefighter Effectiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treatment of Property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Firefighter Courtesy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Satisfaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments
