

Your satisfaction is important to us!

Please take a moment to complete this comment card and drop it in the box or complete it online at www.bonnerso.org.

Date of Visit: ____ - ____ - ____ **Office Visited:** Priest River ____ Sandpoint ____

Who assisted you? _____

What was the purpose of your visit? (Check all that apply)

Regular Driver License Commercial Driver License I.D. Card Other _____

What was the nature of your transaction?

First time license Renewal Other _____

Rate the following categories:

| | Excellent | Above Avg. | Average | Below Avg | Poor |
|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Courtesy and attitude of staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overall quality of service received | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Where you able to complete your business in one Yes No

visit? If no, why?

Approximately how long did you have to wait?

____ hours ____ minutes. Was the waiting time acceptable? Yes No

Do you have any comments or suggestions on ways to improve our services?

Name and daytime telephone number (Optional) _____

[Email this Form to The Records Division: records@bonnercountyid.gov](mailto:records@bonnercountyid.gov)
