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

- ☐ Fire (*Structure*)
- ☐ Fire (*Brush*)
- ☐ Vehicle Accident (*Injury*)
- ☐ Vehicle Accident (*Noninjury*)
- ☐ Medical (*WRFPD only assists PCAD and Dixon Ambulance*)
- ☐ 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	☐	☐	☐	☐	☐
Timely Arrival	☐	☐	☐	☐	☐
Firefighter Professionalism	☐	☐	☐	☐	☐
Knowledge and Competence	☐	☐	☐	☐	☐
Firefighter Effectiveness	☐	☐	☐	☐	☐
Treatment of Property	☐	☐	☐	☐	☐
Firefighter Courtesy	☐	☐	☐	☐	☐
Overall Satisfaction	☐	☐	☐	☐	☐

Comments