



# Stratford Police Department

900 Longbrook Ave., Stratford, Connecticut 06614-5099

(203) 385-4100 FAX (203) 385-4019

Robert E. Mossman  
Chief of Police

Michael A. Imbro  
Deputy Chief

DATE: \_\_\_\_\_ CASE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

On \_\_\_\_\_ you required the services of the Stratford Police Department.

To assure that our services were delivered in a professional and timely manner, we are asking your participation in this survey to help us serve you better. Your response is very important to us and will only be used to determine better ways to serve you.

Many times our residents are reluctant to contact us when they feel the services have not been adequate. I would like to take this opportunity to advise you that we accept all complaints about service and personnel, and will work diligently to rectify any problems brought to our attention.

This survey will only be used to improve our service to you, our residents.

Sincerely,

Chief Robert E. Mossman

In returning the survey, please address it to:

Chief of Police

C/O Stratford Police Department

900 Longbrook Avenue

Stratford, CT 06614-5099

ATTN: SURVEY

## Stratford Police Survey

(Please circle one number only)

<b>Circle The Value Which Best Describes Officer(s) Performance on Each Factor</b>	<b>Weak</b>	<b>Satisfactory</b>	<b>Good</b>	<b>Very Good</b>	<b>Outstanding</b>
1. How would you rate the officer(s) response time to your complaint?	4 or 5	6 or 7	8	9 or 10	11 or 12
2. Please rate the overall appearance of the officer(s) responding to your call.	4 or 5	6 or 7	8	9 or 10	11 or 12
3. How would you rate the officer(s) handling of your investigation?	4 or 5	6 or 7	8	9 or 10	11 or 12
4. How would you rate the officer(s) overall attitude?	4 or 5	6 or 7	8	9 or 10	11 or 12
5. If you had contact with a Police Supervisor, would you please give an overall rating for him/her?	4 or 5	6 or 7	8	9 or 10	11 or 12
6. If you had contact with a Police Detective, would you please give an overall rating for him/her?	4 or 5	6 or 7	8	9 or 10	11 or 12
7. If you had contact with the Animal Control Officer, would you please give an overall rating for him/her?	4 or 5	6 or 7	8	9 or 10	11 or 12
8. If you had contact with a Police Dispatcher, how would you rate his/her demeanor?	4 or 5	6 or 7	8	9 or 10	11 or 12
the dispatcher was during your contact with him/her?	4 or 5	6 or 7	8	9 or 10	11 or 12
10. How would you rate your overall impression of the dispatcher?	4 or 5	6 or 7	8	9 or 10	11 or 12
11. When the Police Officer(s) completed the investigation and had left the scene, how would you rate your overall satisfaction with the action taken?	4 or 5	6 or 7	8	9 or 10	11 or 12
Personnel you had contact with, including dispatchers, what is your overall rating of the Police Services received?	4 or 5	6 or 7	8	9 or 10	11 or 12

### CRIME WATCH

1. Do you currently belong to your local Crime Watch Association?	YES _____ NO _____
2. Would you like to become involved with Crime Watch?	YES _____ NO _____
3. Are you interested in starting a Crime Watch Program?	YES _____ NO _____

Please note any suggestions that in your opinion could improve our services.

\_\_\_\_\_

\_\_\_\_\_

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*Thank you.*