



New Castle County 911 Center
3601 N. DuPont Hy
New Castle, DE 19720
302-395-8210

How Are We Doing?

Please take a few minutes to fill out this survey on the timeliness and quality of the service you received. New Castle County 911 welcomes your feedback and your answers will be kept confidential. Thank you for your participation.

General Caller Information

Location of Incident: _____

Phone Number Called from ____ - ____ - ____

Date Called (if known) _____

In general, what is the reason for your 911 call?

- Police
- Fire
- Ambulance
- Other

How would you rate our concern for your situation?

- Outstanding
- Good
- Adequate
- Needs improvement
- Poor
- N/A

How often have you called 911 within the past year?

- First Call
- 2-5 Calls
- More than 5

Calling 911

Did you use a cell phone or land line?

- Cell Phone
- Land Line

Were you put on hold at any time?

- Yes
- No

How many times do you think the phone rang before being answered?

- 1 Ring
- 2
- 3
- 4
- 5
- 6
- More than 6



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Dispatcher Continued

Were the questions the dispatcher asked appropriate to the problem you were reporting?

- Yes No N/A

Did you feel the dispatcher explained their actions?

- Yes No N/A

Mark the boxes that characterize the demeanor of the dispatcher:

- Attentive Concerned Friendly Distracted Rushed Inconsiderate

Additional Feedback

Please list any areas in which our service could be improved.

Please share any additional comments.



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Personal Information

Providing the following information is optional.

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: _____ Gender: _____ Age: _____

Would you like someone to contact you regarding your responses on this survey?

- Yes No

Thank you for taking the time to fill out our survey. We rely on your feedback to help us improve our services. Your input is greatly appreciated.