

# We Value Your Opinion

\_\_\_\_\_ Association

As President of *CoastManagement.net*, it is very important for me to determine your level of satisfaction with our services. By evaluating your comments, we will be in a better position to take any steps necessary to improve our company and its services. This is our goal. Likewise, the results of this survey can help your Board of Directors improve and make decisions.

## ***CoastManagement.net***

Area of Evaluation	Excellent	Good	Satisfaction	Poor	Very Poor	No Opinion
Receptionist	5	4	3	2	1	0
Accounting Department	5	4	3	2	1	0
Timeliness – Returning Calls	5	4	3	2	1	0
Timeliness – Solving Problems	5	4	3	2	1	0
Competence – Property Supervisor	5	4	3	2	1	0
Competence – Overall Management	5	4	3	2	1	0
Objectivity/Fairness	5	4	3	2	1	0
Friendliness/Sincerity	5	4	3	2	1	0

Would you recommend *CoastManagement.net*       Yes       No

## **Your Board of Directors**

Area of Evaluation	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
I have confidence in the Board’s decisions	5	4	3	2	1
The CC&Rs and Rules are enforced fairly	5	4	3	2	1
The Board has been helpful to me	5	4	3	2	1
Landscaping maintenance is good at our community	5	4	3	2	1
Our community is kept clean	5	4	3	2	1
Our association should spend more money on maintenance and repairs	5	4	3	2	1
Our community is a nice place to live	5	4	3	2	1

## **Optional- Required for Response**

Your name: \_\_\_\_\_ Your email: \_\_\_\_\_

Your contact information: \_\_\_\_\_

\_\_\_\_\_

How long at your current address? \_\_\_\_\_ years

**Please fax, email or mail this completed form to me.  
Please don't include with monthly dues.**

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*CoastManagement.net*  
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Comments: \_\_\_\_\_

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**Thank you**