

First Capital Trolley

We need your input!!!

Circle as many as needed

Date of Survey: _____

- Did you schedule through our office or a contractor? CONTRACTOR OFFICE
- Did you understand the correct extension needed to schedule a ride? YES or NO
- Was driver helpful? YES or NO
- How long was your wait time in minutes? 15 30 45 60 60+
- What time of day did you ride with the wait time mentioned above?
6am-10am 10am-2pm 2pm-6pm 6pm-10pm
- How many times a month do you use our services? 0-5 6-15 16-25 26+

Comments: This section is for you our customers to tell us how well we are doing or what type of changes you would like to see in the future. If you would like a response to your comment, please include your contact info.

If you really enjoy riding with a driver because they are safe and friendly, please put their name below so we can let them know they are doing a good job.
