

**GEORGETOWN ATC
TOWER User Satisfaction
Survey**

We are very interested in providing you our user the best possible service. To assist us in this ongoing endeavor will you please at your earliest convenience complete and return this form to Georgetown Tower. Your name is not necessary but the requested information will assist us in the evaluation of our services.

Type Rating: Private/Student: _____ Instrument: _____ Commercial: _____ ATP: _____ Military: _____

Type Aircraft Normally Flown:

Single Engine: _____ Multi Engine: _____ Turbo-Prop: _____ Turbo-Jet: _____ Helicopter: _____

Normal Purpose for Flying:

Pleasure: _____ Business: _____ Instruction: _____ Military: _____

Home Airport

How Often Do you Use Our Services: Daily: _____ Weekly: _____ Monthly: _____

Please rate our performance on a scale of 1 to 5, with 5 being the best and provide comments on any item rated less than a 4. (Circle the number)

- 1. Controllers are courteous, helpful. 1 2 3 4 5
- 2. Controllers are professional. 1 2 3 4 5
- 3. Communications clear and understandable. 1 2 3 4 5
- 4. Rate of speech. 1 2 3 4 5
- 5. Timely departure instructions issued. 1 2 3 4 5
- 6. Timely control instructions. 1 2 3 4 5
- 7. Timely traffic advisories. 1 2 3 4 5
- 8. Timely weather information. 1 2 3 4 5
- 9. Additional advisories provided to pilots in a timely manner. 1 2 3 4 5
- 10. Overall service received from Georgetown Tower. 1 2 3 4 5

PLACE COMMENTS OR SUGGESTIONS ON REVERSE SIDE

PLEASE RETURN WITHIN 30 DAYS TO:

Georgetown ATC Tower
408 Terminal Dr
Georgetown, TX 78628

DATE: _____