



### [Customer Feedback and Service Survey](#)

1. What are the major priorities for your community?
2. What are your major regulatory challenges?
3. How often do you communicate with DEQ? Which programs?
4. Have you received technical assistance from DEQ? What kind?
5. What can DEQ do for you to make your job easier?

Contact Information:

Name:

Town/Business Entity/District:

Phone:

**[Click to Submit](#)**