

City Clerk's Office

500 East Third St., Ste. 230

Loveland, CO 80537

Website: cityofloveland.org

How can we help you better?

Please take a moment to help us improve your experience with the City Clerk's Office and Liquor Licensing Team. When you're done, please send or email it to our office.

NEW LICENSE LICENSE RENEWAL SPECIAL EVENT PERMIT OTHER

Timeliness, Service and Environment

How did you obtain your application forms?

- City Clerk Dept. Website
- State of Colorado Website
- City Clerk's Office
- Other _____

Was your application handled efficiently?

- Yes
- No
- Explain: _____

Circle the items you were notified of below:

- Submittal Deadlines: 45 days before meetings
- Documents missing from application/15 day deadline
- Hearing date
- Boundaries for neighborhood survey/petitioning
- Findings of fact
- State License received by the Local Authority
- Manager Registration/Modification of Premises/Trade Name Change

Renewal: Was your item placed on the Consent Agenda?

- Yes

If so, do you consider this an improvement to being required to attend the meeting?

- Yes
- No

Were you able to obtain copies of the following items on the Website?

- Fee Schedules and submittal deadlines
- Current Agenda/Minutes
- Rules of Procedure for LLA
- Forms/State Liquor Code

Was the information you were given timely and correct?

- Yes
- No

Did you know that the Police Department conducts quarterly Alcohol Server Training Classes and you can sign up with the City Clerk's Office?

Please rate our customer service? 5=Superior 4=Excellent 3=Good 2=Poor 1=Bad

- | | | | | | |
|--------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| Courteous Attitude | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| Responsiveness | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| Knowledgeable | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| Overall Rating | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |

Additional Comments or Suggestions for Improvements:

About You (optional)

Establishment: _____ E-mail: _____
 Address: _____ Phone: _____
 City, State, ZIP Code: _____

Thank you for your participation!

Email to: Clerk@cityofloveland.org or FAX to: 970-962-2901