RESIDENT RELOCATION FEEDBACK SURVEY

Date: Unit #: (Optional)
Property Name:
Property Address:

Dear Resident:

You are being asked to be a part of a survey about your experience during this rehabilitation period. The Georgia Dept of Community Affairs (DCA) wants to make sure you received the help you needed and that your rights as a tenant were respected. Your responses will help to improve relocations that are planned for the future. Please answer the questions below and drop it in the mail to the address listed below.

Please check the box for your response

1. Management informed me in a timely manner that my home would be renovated.

   ☐ strongly agree ☐ somewhat disagree
   ☐ agree ☐ strongly disagree

2. I was invited to a meeting to find out what changes would be taking place at my apartment complex /unit and was given the opportunity to ask questions.

   ☐ strongly agree ☐ somewhat disagree
   ☐ agree ☐ strongly disagree

3. I was given accurate dates regarding the construction in my building and how the construction would affect my day to day living.

   ☐ strongly agree ☐ somewhat disagree
   ☐ agree ☐ strongly disagree

4. The improvements that have been done to my unit were completed without too much disruption to my normal routine.

   ☐ strongly agree ☐ somewhat disagree
   ☐ agree ☐ strongly disagree

5. The improvements that have been done in my unit will or has improved the quality of my life.

   ☐ strongly agree ☐ somewhat disagree
   ☐ agree ☐ strongly disagree

6. The improvements that have been done in common areas (community room, laundry room, etc) at the property have improved the quality of my life.

   ☐ strongly agree ☐ somewhat disagree
   ☐ agree ☐ strongly disagree

7. The construction people who entered my unit were courteous, polite and respectful while working in my unit.

   ☐ strongly agree ☐ somewhat disagree
   ☐ agree ☐ strongly disagree

8.

Comments and suggestions:

Thank you for your participation

Please email responses to RelocationReview@dca.ga.gov