



PLAINSBORO TOWNSHIP POLICE DEPARTMENT

CITIZEN RESPONSE QUESTIONNAIRE

MOTOR VEHICLE CONTACT

- | | YES | NO |
|---|--------------------------|--------------------------|
| 1. Was the officer courteous? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Did you ask the officer to identify himself/herself by name, department, or badge number, and if so, did he/she do so? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Did the officer speak clearly and were you able to understand him/her? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did the officer advise you of the violation you were stopped for? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Did the officer appear knowledgeable? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Were you advised of the court date and how to contact the Court Administrator? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Did the officer respond to your questions if you had any? | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered "NO" to any questions, please list the corresponding numbers and the specific problem.

Would you consent to any follow-up questions pertaining to this Questionnaire?

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If yes, please provide the following:

NAME:

DAY PHONE:

NIGHT PHONE:

Thank you for taking the time to complete and submit this survey.
Your opinion is valued by our organization.