



Customer Advisory Panel Questionnaire

Thank you for your interest in serving on a SUEZ Customer Advisory Panel (CAP). Please complete and return the questionnaire promptly to: SUEZ, Attention: Communications Dept., 200 Lake Shore Drive, Haworth, NJ 07641 or fax it to 201-599-6009. If you have any questions please contact the New Jersey Communications Dept. at 201-767-2873.

Q1. What is your name? _____

Q2. What is your home address? _____

Q3. What is the phone number at which we can reach you during the day? _____

b) What is the best time to reach you at that number? _____

Q4. What is the phone number at which we can reach you during the evening? _____

b) What is the best time to reach you at that number? _____

Q5. If you have e-mail, please provide us with the e-mail address you check most frequently during the day. _____

Q6. If you have an alternate e-mail address other than one listed above please list it.

Q7. Please check the box for the CAP on which you are interested in serving.

Bergen County New Rochelle Hudson County Toms River Rockland County

Q8. Do you drink tap water?

Yes No

b) If not, why don't you drink tap water? _____

Q9. How long have you been a SUEZ customer?

Less than 1 year 1-2 years 2-3 years
 3-5 years 5-10 years More than 10 years

Q10. How did you hear about the CAP?

- | | | |
|---|---|--|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Bill insert | <input type="checkbox"/> Website |
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Water Quality Report | <input type="checkbox"/> Friend/Referral |
| <input type="checkbox"/> Town/city official | <input type="checkbox"/> Newsletter | <input type="checkbox"/> Other _____ |

Q11. Please tell us why you would like to become a member of the CAP.

Q12. Please provide a brief biographical sketch, telling us about yourself.

The following questions are for demographic purposes and for diversifying the panel.

Q13. What ethnic background do you associate yourself with?

- Caucasian African American Asian Hispanic Other _____

Q14. What group does your age fall between?

- 18-25 26-35 36-45 46-55 56-65 66 and over

Q15. What is your gender?

- Male Female

Q16. What is your most recent occupation?

- | | | | |
|-----------------------------------|---|---|--------------------------------------|
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Doctor/Nurse | <input type="checkbox"/> Professional | <input type="checkbox"/> Technical |
| <input type="checkbox"/> Laborer | <input type="checkbox"/> Teacher/Educator | <input type="checkbox"/> Administrative | <input type="checkbox"/> Other _____ |

Thank you for your time. A representative from SUEZ will contact you upon consideration. Surveys are kept on file in the event of an opening or vacancy. We appreciate your interest in our Customer Advisory Panel.