



ASSEMBLY MEMBER Khaleel M. Anderson

Fall 2025



Constituent End-of-Year Survey

131- 15 Rockaway Boulevard, South Ozone Park, NY 11420
19-31 Mott Avenue, Far Rockaway, NY 11691

CONTACT INFORMATION

First and Last Name _____

Address _____

Apt. No. _____

City _____

Zip Code _____

Phone number _____

Primary Language _____

Please fill out our Community Member End-of-Year survey below. If you want to remain anonymous, fill out the survey ONLY and mail it back. Your feedback will help inform my legislative priorities in Albany for 2026.

Section 1: Utility

Utility payment issues are common concerns received by my office.

1. Do you think there are enough utility payment programs available to support low- and middle-income families?

- ☐ Yes, there are enough programs
- ☐ Somewhat, but more programs are needed
- ☐ No, there are not enough programs
- ☐ I'm not sure

2. Did you receive a utility shut off notice this year?

- ☐ Yes
- ☐ No

3. Do you think that utility companies give enough notice before shutting off service?

- ☐ Yes, they give sufficient notice
- ☐ Sometimes
- ☐ No, they do not give enough notice
- ☐ I'm not sure

4. Please explain what kind of help would make a difference in your utility bills:
Please describe:

5. What utility company do you have? (Select all that apply)

- ☐ Con Edison
- ☐ National Grid
- ☐ PSEG

6. Do you know what resources are available regarding utility assistance (including payment plans)?

- ☐ Yes
- ☐ No

Section 2: Quality of Life

Quality of life issues are common concerns received by my office.

7. How satisfied are you with the City's efforts to repair potholes and sidewalks in your neighborhood?

- ☐ Very satisfied
- ☐ Somewhat satisfied
- ☐ Neutral
- ☐ Somewhat dissatisfied
- ☐ Very dissatisfied

8. Do you feel there are enough stop signs in your neighborhood to ensure safe traffic flow?

- ☐ Yes, there are enough stop signs
- ☐ Somewhat
- ☐ No
- ☐ I'm not sure.

9. How has your experience been with the NYC Human Resources Administration (HRA)?

- ☐ Very positive
 - ☐ Somewhat positive
 - ☐ Neutral
 - ☐ Somewhat negative
 - ☐ Very negative
 - ☐ I have not interacted with NYC HRA
- Please describe:

10. Are you on any HRA benefits? (Check all that apply)

- ☐ Cash Assistance
- ☐ SNAP
- ☐ One Shot Deal
- ☐ Housing

11. If you have experienced delays with the HRA application process, please describe your experience:
Please describe:

12. Are you on a fixed income?

- ☐ Yes
- ☐ No

13. What was your biggest challenge this year? (Check all that apply)

- ☐ Housing
- ☐ Grocery Cost
- ☐ Utility Bills
- ☐ Health
- ☐ Employment
- ☐ Childcare

14. Do you believe your neighborhood is adequately serviced by the Department of Sanitation (DSNY)?

- ☐ Yes
- ☐ Somewhat
- ☐ No, the service is insufficient
- ☐ I'm not sure

15. Is trash pickup regularly in your area?

- ☐ Yes
- ☐ No

16. Is there flooding in your area? If so, where?

Please explain:

17. Do you think there needs to be more initiatives to reduce flooding in your neighborhood?

- ☐ Yes
- ☐ Somewhat
- ☐ No
- ☐ I'm not sure
- ☐ Prefer not to say

18. Which issues most concern you? (Check all that apply)

- ☐ Noise
- ☐ Parking
- ☐ Sanitation
- ☐ Public Safety
- ☐ Mental Illness
- ☐ Gun Violence
- ☐ All of the above

19. Are you satisfied with the new Metropolitan Transportation Authority (MTA) changes in your neighborhood?

- ☐ Yes
- ☐ No
- ☐ Somewhat

Other (please specify):

Section 3: Housing

Every person in our community deserves access to a safe, decent, and affordable place to live.

20. Which of the following solutions do you believe would be most effective in reducing evictions and addressing landlord-tenant issues in District 31? (Select all that apply)

- ☐ Rental assistance programs
- ☐ Legal assistance
- ☐ Tenant education programs
- ☐ Stricter enforcement of housing regulations

Other (please specify):

21. Are you experiencing any housing-related issues? Please describe which housing issues affect you and your families?

Please explain:

22. How difficult is it for you to afford your monthly housing payments/mortgage?

- ☐ Very difficult
- ☐ Somewhat difficult
- ☐ Manageable
- ☐ Easy

23. Did you apply for the following? Please check all that apply.

- ☐ One Shot Deal
- ☐ Fheps/City Fheps Voucher
- ☐ Housing Court Assistance
- ☐ Assistance from Community Organizations

24. Do you have trouble in finding resources for home repairs?

- ☐ Yes
- ☐ No

If yes, what type of difficulties do you face? (check all that apply)

- ☐ Finding reliable repair services
- ☐ High cost of materials or services
- ☐ Lack of information on how to fix issues

Any suggestions or comments to improve access to home repair resources:

25. Have you had trouble in finding housing?

- ☐ Yes
- ☐ No

26. What are the main challenges you face when looking for housing? (Check all that apply)

- ☐ High rental or purchase costs
 - ☐ Limited availability of housing
 - ☐ Difficulty with landlords
 - ☐ Lack of information about available housing
- Other (please specify)

Section 4: Food Insecurity

Every person in our community deserves access to healthy food.

27. Have you ever missed a meal because of your inability to pay for groceries?

- ☐ Yes
- ☐ No
- ☐ Prefer not to answer

28. Where do you usually get your food?

Please explain:

29. In your neighborhood, do you have access to affordable, healthy food?

- ☐ Yes, always
- ☐ Sometimes
- ☐ Rarely
- ☐ No, never
- ☐ Not sure

30. Are you currently receiving SNAP benefits?

- ☐ Yes
- ☐ No

31. If yes, how helpful are SNAP benefits in meeting your household food needs?

- ☐ Very helpful
- ☐ Helpful
- ☐ Neutral
- ☐ Not very helpful
- ☐ Not helpful at all

32. What difficulties have you experienced applying for SNAP?

- ☐ Complicated application process
- ☐ Unable to find someone to help with the application.
- ☐ Long processing time
- ☐ Limited benefits amount
- ☐ Difficulty using the EBT card
- ☐ Lack of information about eligibility or renewals

Other:

33. What are your biggest challenges when it comes to supplying food for your household?

- ☐ Transportation
 - ☐ Affordability
 - ☐ Long Pantry Lines
- Other (please specify)

District 31 Questions:

34. What kind of events would you like to see from our office?

Please explain:

35. Would you like to be a part of our Office ambassador program?

Please explain:

36. How would you prefer to hear about community events or resources?

Please explain:

37. What programs would improve the conditions of your neighborhood?

Please explain:

38. If you have interacted with either two of my offices, please leave a rating of the responsiveness of my office in writing.

Please explain:

19-31 Mott Avenue, Suite 301
Far Rockaway, NY 11691

PRSRT STD.
U.S. POSTAGE
PAID
ALBANY, NEW YORK
PERMIT NO. 75



Assembly Member
**Khaleel M.
Anderson**

Constituent End-of-Year Survey

Would you also like to subscribe to our eNewsletter? ☐ Yes ☐ No

If yes, please check the box and write your email:

Your name:

Address:

Cell Phone Number:

THERE ARE TWO WAYS THAT YOU CAN SUBMIT THE SURVEY:

By returning the enclosed survey by mail to our District Office:

Assembly Member Khaleel M. Anderson, 19-31 Mott Avenue, Suite 301, Far Rockaway, NY 11691