



# 56 Avenue Utility Improvement Project

Name: \_\_\_\_\_

Business or Organization (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Would you like to receive project updates via email                      Yes                       No

Please indicate below the potential design components that are of most concern to you.

Potential Design Components	Comments
<input type="checkbox"/> Bike Lanes	
<input type="checkbox"/> Enhanced Sidewalks	
<input type="checkbox"/> Travel Lanes	
<input type="checkbox"/> Parking	

Please indicate below the potential construction impacts of most concern to you.

Potential Impacts	Comments
<input type="checkbox"/> Hours of Work	
<input type="checkbox"/> Noise	
<input type="checkbox"/> Street Parking	
<input type="checkbox"/> Driveway Access	
<input type="checkbox"/> Traffic Delays	
<input type="checkbox"/> Property Restoration	

Concerns or Questions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

