

# District 4 Public Meeting Comment Form

Luzerne County

Old Forge Borough & Moosic Borough

SR 3015/270 over Lackawanna River



## **Feedback** *(Please take a few minutes to fill out the comment form so we may better understand your concerns.)*

Scope of Work - PennDOT plans to \_\_\_\_\_

1. Do you favor the proposed project?

- Strongly Favor    Favor    Neutral    Somewhat Object    Strongly Object

2. Do you have questions about the project?    Yes    No

*If yes, please list your questions and the project team will get back to you. (Please be sure to fill out your contact information below.)*

---

---

---

3. Do you have any concerns with the planned Traffic Control Method?    Yes    No

*If yes, please list your concerns and the project team will get back to you. (Please be sure to fill out your contact information below.)*

---

---

---

4. Are the plans informative?

- Very Informative    Somewhat Informative    Not Informative

*Please provide comments:*

---

---

---

5. What can be done to improve the presentation?

---

---

---

6. Do you have other specific comments or concerns? Please list them and the project team will get back to you. (Please be sure to fill out your contact information below.)

---

---

---

7. What is your interest in the project?

Property Owner  Business Owner  Resident  Commuter  Stakeholder  Other

If other, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

.....  
**Contact Information:**

Please provide the following information in the event we wish to contact you for follow up information.

Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

*Thank you for taking the time to give us your comments and suggestions.*

.....  
**Voluntary Information Survey (Optional)**

As a recipient of federal funds, PennDOT strives to involve all groups relevant to its projects in its public involvement activities. The following information will assist PennDOT in planning outreach to communities during the course of the project. Thank you for your participation.

**Zip Code:** \_\_\_\_\_

**County:** \_\_\_\_\_

**Gender:**

Male  Female  Non-Binary

**Race/Ethnicity:**

Hispanic or Latino  Asian  
 Black or African American  White  
 American Indian or Alaskan Native  Other  
 Hawaiian Native or Pacific Islander

**Disability**

Yes  No

**Household Income**

\$0-\$12,000  \$13,000-\$24,000  
 \$25,000-\$36,000  \$37,000-\$48,000  
 \$49,000-\$60,000  \$61,000+

**First Language**

English  Spanish  
 French  German  
 Vietnamese  Korean  
 Chinese  Russian  
 Tagalog  Other

**Second Language**

English  Spanish  
 French  German  
 Vietnamese  Korean  
 Chinese  Russian  
 Tagalog  Other

.....  
**Please return by mail or email to:**

Project Manager Name: Lou Spaciano

Address: 613 Baltimore Drive, Suite 300, Wilkes-Barre, PA 18702-7903

Email: c-lspacian@pa.gov

Phone: 570-221-4924