

IL Route 60/83 - IL Route 176 to IL Route 60 (Townline Road)

PROJECT SURVEY

Name (Please Print Clearly): _____

Mailing Address: _____

Phone: _____ Email: _____

1. Would you like to receive copies of the project newsletters? _____ YES _____ NO
2. How would you prefer to receive the newsletters? _____ MAIL _____ EMAIL (.pdf format)
3. How long have you lived at your current address? _____
4. If not currently living in the study area, was your previous address in the study area? _____
5. Do you work in the study area? YES _____ NO _____
If yes, Name of Employer? _____
6. How frequently do you drive on IL Route 60/83 through the project corridor, and for what purpose?

7. Please grade the following issues with respect to their importance in developing this project:

Alternatives (1=most important, 2=important, 3=somewhat important, 4=not important)

- | | | |
|---|------------------------------------|------------------------------|
| _____ Recreational Facilities
(Trails, Sidewalks, Bicycle
Access) | _____ Wetland/Wildlife Impacts | _____ Stormwater Runoff |
| _____ Recreational Facilities
(Parks & Golf Course) | _____ Traffic Congestion | _____ Other (describe below) |
| _____ Business Development | _____ Commercial/Business Impacts | |
| _____ Traffic Noise | _____ Air Quality | |
| _____ Project Schedule | _____ Residential Property Impacts | |
| | _____ Project Cost | |
| | _____ Roadway Safety | |
| | _____ Rail Crossing Alternatives | |

8. Please rank the conditions you have experienced traveling along the IL Route 60/83 corridor: (with 1 being the worst problem; please list N/A if you haven't experienced)

- | | | |
|----------------------------|--------------------------------------|---------------------------|
| _____ None | _____ Traffic Congestion | _____ Accidents |
| _____ Truck Traffic | _____ Pavement Condition | _____ Adverse Travel Time |
| _____ Rail Crossing Delays | _____ Other (please describe): _____ | |

9. Please add any additional information that you feel should be considered by the project study team:

Please return this questionnaire to the registration table this evening, or send to the Illinois Department of Transportation by April 17, 2009 at the address in the project handout. You may also email comments to Mr. Mir Mustafa at: Mir.Mustafa@illinois.gov

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Community Advisory Group Membership Interest

Name (Please Print Clearly): _____
Representing: _____
Mailing Address: _____
Phone: _____
Email: _____
Signature: _____



Illinois Department
of Transportation

Preference for Meetings: Day _____ Evening _____

I would like to be considered as a member of the IL Route 60/83 Community Advisory Group (CAG), to assist the IL Department of Transportation (IDOT) in the project development process for this project, as outlined and defined in the project Stakeholder Involvement Plan (SIP).

CAG Membership Commitment

I understand that I am making a commitment to attend all CAG meetings and complete all reviews requested of CAG members, and that this commitment extends until completion of the current Phase I Study which is anticipated to occur in the Fall of 2010. A total of five (5) CAG workshop meetings are anticipated throughout the length of the project. I agree to abide by the established SIP.

I understand that in order to meet the established project schedule and that if I cannot fulfill this commitment to the project, IDOT may remove or replace me on the CAG in order to ensure the project schedule is maintained. I understand that depending on the number of CAG membership requests, IDOT may limit CAG membership to one or two members from similar interests/entities to ensure good representation from the community with an effective group size.

Please note meeting preference above for day or nighttime. Meetings will be scheduled based on majority of CAG participants' availability.

Submit to IDOT by April 17, 2009

In order to be considered for membership on the IL Route 60/83 Community Advisory Group, this form must be received by IDOT on April 17, 2009

This form can be faxed to IDOT at 847/705-4159, folded and returned to IDOT at the address on the Project Handout, or scanned and emailed to mir.mustafa@illinois.gov.

