



## Comment Form

Name \_\_\_\_\_ Affiliation (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

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

Comments\*

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\*Any information provided on this form will become part of the Project file, which is a public record.  
 You may submit your comments by leaving this form in the comment box, by U.S. mail (see pre-addressed mailer on reverse side), by email at [Rt17MobilityAccess@dot.ny.gov](mailto:Rt17MobilityAccess@dot.ny.gov), or by visiting the Project website at [www.route17.dot.ny.gov/#/mobility-access-contact](http://www.route17.dot.ny.gov/#/mobility-access-contact).



# Your Feedback is Important!

Please use this form to submit comments. For more information about the Project and ways to get involved, please visit our website:  
[www.route17.dot.ny.gov/#/mobility-access](http://www.route17.dot.ny.gov/#/mobility-access)

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NYS Route 17 Mobility and Access Improvements Project Team  
NYSDOT Region 8  
4 Burnett Boulevard  
Poughkeepsie, NY 12603

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