PROJECT NUMBER: HSIP-0001 (635) Access Management Along AL-1 (US-431) from CR-249 to CR-179 Lee County

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Name:		Date:		
Address:				
Telephone Number:	Email:			<u> </u>
	Interest in Pro	<u>oject</u>		
Area Resident:	Work Commuter:	Pe	ersonal or Leisure Traveler:	
<u>Hc</u>	w often do you use th	is section o	f roadway?	
Daily (Weekdays):	Weekends:	– Occa	asionally:	
	OPINION OF PROJEC	<u>T</u>		
Do you support the concept of the project? Are you in favor of the project as presented? Are you an area resident along the project? Are you a property owner in area of the project? Are you a business owner in area of the project? Are you an elected official?		YES YES YES YES YES	NO NO NO NO NO	
Comments or Suggestions:				<u> </u>
				<u> </u>
Please complete and return c	omment sheet to the followin	g address by S	September 22,2023.	
Alabama Department of Trans Southeast Regional Office 100 Capitol Commerce Blvd., Montgomery, AL 36117				

You may also submit your comments by voicemail (334)-353-6937

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