



ADA PUBLIC ENGAGEMENT SURVEY

What do you like about the draft ADA Transition Plan?

What do you think was missing from the draft ADA Transition Plan?

Do you have any other comments or concerns about the draft ADA Transition Plan?

Would you like someone from the City to contact you to provide additional feedback?

Yes

No

If yes, please provide your name and contact information:

NAME

First

Last

ADDRESS

Street Address

Address Line 2

City

State

Zip Code

Telephone