

Please indicate how well we did in the acquisition of your property by circling the appropriate category or checking the "not applicable" box.

|   | Excellent | Good | Average | Below Average | Poor | Not Applicable                      |
|---|-----------|------|---------|---------------|------|-------------------------------------|
| 1. How well did we answer your questions about the proposed transportation project?                   | 5         | 4    | 3       | 2             | 1    | <input type="checkbox"/>            |
| 2. How well did we explain the need for your property and the process used to purchase your property? | 5         | 4    | 3       | 2             | 1    | <input type="checkbox"/>            |
| 3. Was the Right-of-Way Agent informed and responsive to your questions?                              | 5         | 4    | 3       | 2             | 1    | <input checked="" type="checkbox"/> |
| 4. Was the Right-of-Way Agent courteous and professional?   | 5         | 4    | 3       | 2             | 1    | <input checked="" type="checkbox"/> |
| 5. How would you rate the usefulness of the printed material provided by the Department?              | 5         | 4    | 3       | 2             | 1    | <input type="checkbox"/>            |

Comments: was wonderful, informative, and helpful.

If you would like to be contacted by telephone to give additional information or comments, please complete this portion.

Name: \_\_\_\_\_ Phone Number: (     ) \_\_\_\_\_

To be completed by NHDOT Right-of-Way Agent

Project Number: Rochester 106208 Parcel Number: \_\_\_\_\_