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	☐
2. How well did we explain the need for your property and the process used to purchase your property?	5	4	3	2	1	☐
3. Was the Right-of-Way Agent informed and responsive to your questions?	5	4	3	2	1	☐
4. Was the Right-of-Way Agent courteous and professional?	5	4	3	2	1	☐
5. How would you rate the usefulness of the printed material provided by the Department?	5	4	3	2	1	☐

Comments: _____

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: SAL-MANC, 10418C	Parcel Number:

t:\misc\2003\wpj\letters\propertyownersurvey0603.doc