



KINSTON BYPASS PROJECT

STIP Project Number R-2553



COMMENT FORM—AUGUST 2014—PUBLIC MEETING ROUND 4

Contact Information (Please Print)

Name: _____ Email Address: _____

Mailing Address: _____

Please check if you would like to be added to the project mailing list. Yes No

How did you hear of tonight's workshop?

Newsletter Flyer Newspaper Radio Friend/Family Other

Please provide any comments that you have on the project below. If needed, additional space is available on the reverse side.

You can drop your comment form in the comment box or send it to the contact information provided below by September 12, 2014.

**North Carolina Department of Transportation
 C/O URS Corporation
 ATTN: Chris Werner
 1600 Perimeter Park Drive, Suite 400
 Morrisville, NC 27560
 christopher.werner@urs.com**

Toll-Free Hotline: 1-800-233-6315

Website: www.ncdot.gov/projects/kinstonbypass/

TITLE VI PUBLIC INVOLVEMENT FORM

Completing this form is **completely** voluntary. You are not required to provide the information requested in order to participate in this meeting.

Meeting Type: Public Meeting	Date:
Location:	
STIP No.: R-2553	
Project Description: Kinston Bypass Project	

In accordance with Title VI of the Civil Rights Act of 1964 and related authorities, the North Carolina Department of Transportation (NCDOT) assures that no person(s) shall be excluded from participation in, denied the benefits of, or subjected to discrimination under any of the Department's programs, policies, or activities, based on their race, color, national origin, disability, age, income, or gender.

Completing this form helps meet our data collection and public involvement obligations under Title VI and NEPA, and will improve how we serve the public. Please place the completed form in the designated box on the sign-in table, hand it to an NCDOT official or mail it to the PDEA-Human Environment Section, 1598 Mail Service Center, Raleigh, NC 27699-1598.

All forms will remain on file at the NCDOT as part of the public record.

Zip Code: _____	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Street Name: (i.e. Main Street) _____	Age: <input type="checkbox"/> Less than 18 <input type="checkbox"/> 45-64 <input type="checkbox"/> 18-29 <input type="checkbox"/> 65 and older <input type="checkbox"/> 30-44
Total Household Income: <input type="checkbox"/> Less than \$12,000 <input type="checkbox"/> \$47,000 – \$69,999 <input type="checkbox"/> \$12,000 – \$19,999 <input type="checkbox"/> \$70,000 – \$93,999 <input type="checkbox"/> \$20,000 – \$30,999 <input type="checkbox"/> \$94,000 – \$117,999 <input type="checkbox"/> \$31,000 – \$46,999 <input type="checkbox"/> \$118,000 or greater	Have a Disability: <input type="checkbox"/> Yes <input type="checkbox"/> No
Race/Ethnicity: <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Other (please specify): _____	National Origin: (if born outside the U.S.) <input type="checkbox"/> Mexican <input type="checkbox"/> Central American: _____ <input type="checkbox"/> South American: _____ <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Chinese <input type="checkbox"/> Vietnamese <input type="checkbox"/> Korean <input type="checkbox"/> Other (please specify): _____

How did you hear about this meeting? (newspaper advertisement, flyer, and/or mailing) _____

For more information regarding Title VI or this request, please contact the NCDOT Title VI Section at (919) 508-1808 or toll free at 1-800-522-0453, or by email at slipscomb@ncdot.gov.

Thank you for your participation!