



Contact information is not required but will ensure you receive a response, should one be required.

Name: _____

Mailing address (or nearest cross streets): _____

Email address: _____ Phone: _____

Address of impacted property (or nearest cross streets): _____

Business/Organization Name: _____

Business/Organization Address: _____

How did you hear about this project? (Select all that apply.)

- ☐ Newspaper ☐ Mailed letter ☐ TV or radio ☐ Church ☐ Word-of-mouth
☐ ODOT website ☐ Social media ☐ Email ☐ Other:

What is your interest in the proposed project? (Select all that apply.)

- ☐ Area Resident ☐ Area business owner or employee ☐ Commuter
☐ Other: _____

How often do you travel in the project area?

- ☐ Daily ☐ A few times a week ☐ Weekly ☐ A few times a month ☐ Monthly
☐ Other: _____

How do you usually travel through the project area? (Select all that apply)

- ☐ Automobile ☐ Bicycle ☐ Walk ☐ Other: _____

Project-specific question #1:

Project-specific question #2 or general comments:

COMMENTS DUE BY
March 10, 2024

Comments may be submitted:

- Verbally or in writing
- By email at apitts@massillonohio.gov
- By telephone at 330-830-1722
- By mail using address on back



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PLACE
POSTAGE
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City of Massillon
Engineering Department
ATTN: Alex Pitts
151 Lincoln Way Easy
Massillon, Ohio 44646

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