| TRANSPORTATION CABINET | |
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KENTUCKY TRANSPORTATION CABINET Department of Highways DIVISION OF RIGHT OF WAY & UTILITIES

RELOCATION ASSISTANCE OPINION SURVEY

| | 00 | | | ITEM NO. | PARCEL | P | ELOCATION AGENT'S NAME | | |
|---|--|----------|---|----------------|--------------|-------------------|---|--|--|
| COUNTY | | | | TIEMINO. | FARGEL | K | ELOCATION AGENT 5 NAME | | |
| | PROJ | ECT NO. | | FEDERAL NUMBER | | PROJECT | | | |
| | | | - | | | | | | |
| MAIL TO: 200 Mero Street, 4 th Floor East, Frankfort KY 40622 | | | | | | | | | |
| E-MAIL TO: KYTC.rowrelocations@ky.gov | | | | | | | | | |
| The Kentucky Department of Highways is conducting a survey to determine how well we are doing our job. Your opinion is important, so please take a few minutes to complete this survey and return it in the postage paid envelope or by e-mail. | | | | | | | | | |
| PLEASE ANSWER THE FOLLOWING QUESTIONS | | | | | | | | | |
| | YES | NO | | | | | | | |
| 1. | | | Were meetings between you and the relocation agent arranged at your convenience? | | | | | | |
| 2. | | | Did the agent you worked with clearly explain the relocation assistance program? | | | | | | |
| 3. | | | Were you given the booklet, <i>Relocation Assistance</i> ? | | | | | | |
| 4. | | | Did you receive a letter that described the relocation benefits available to you, and the requirements for you to be eligible for those benefits? | | | | | | |
| 5. | | | Did that letter also guarantee you at least 90 days in which to relocate? | | | | | | |
| 6. | | | Did the relocation assistance agent respond to your concerns and questions in a timely manner? | | | | | | |
| 7. | | | Was the agent courteous and helpful? | | | | | | |
| 8. | | | Do you feel the agent was knowledgeable of the relocation assistance program? | | | | | | |
| 9. | | | Did you receive a written, 30-day notice to vacate? (If you moved in less than 60 days, please leave blank) | | | | | | |
| 10. | | | Were relocation payment(s) made within the time period explained by the relocation agent? | | | | | | |
| Overall, how would you rate the way your relocation was handled? <i>(Check One</i>) | | | | | | | | | |
| | | | Po | oor | Fair | Good | Excellent | | |
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| Pleas | e feel f | ree to r | nake anv | comments about | vour relocat | ion or how we mig | ht improve our handling of the relocation | | |
| Please feel free to make any comments about your relocation, or how we might improve our handling of the relocation assistance program. (Use the back, if necessary, for additional comments) | | | | | | | | | |
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| W | We appreciate you taking time to give us your opinion. Your name <i>(optional)</i> | | | | | | | | |