

OAKWOOD FIVE POINTS INTERSECTION

Public Comment Form

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

Name:								
Mailing address (or r	nearest cross stre	ets):						
Email address:		Phone:						
Address of impacted	property (or nea	arest cross s	treets):				
Business/Organizatio	on Name (if applic	cable):						
Business/Organization	on Address:							
How did you hear ab □ Newspaper □ City website	☐ Mailed letter☐ Social media☐	□ TV or ra	adio	□ Word-o □ Other:	f-mouth			
What is your interes ☐ Area Resident ☐ Other:	☐ Area business	owner or er	nploye	e 🗆 Con	nmuter	y.)		
How often do you o ☐ Daily ☐ A fev ☐ Other:	v times a week	□ Weekly	\Box A	few times a	a month			
How do you or you	•	-		•		its intersection? (Select all that apply.)		
Questions/Commen	ts:							

(write additional Questions/Comments on back as needed)

Questions/Comments may be submitted:

- Verbally or in writing
- By email at fivepoints@oakwoodohio.gov
- By telephone at 937-298-0600
- Online at oakwoodohio.gov



COMMENTS DUE BY August 11, 2023

tional Ques	tions/Comme	ents:			