



MT. GARFIELD CULVERT STUDY
VIRTUAL PUBLIC ENGAGEMENT PRESENTATION
COMMENT SHEET
NOVEMBER, 2020



Name: _____ Representing: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

- 1. Are you a (check all that apply):
o Property Owner in the Project Area
o Renter/Lessee in the Project Area
o Business Owner in the Project Area
o Trailhead User
o Business Owner in Palisade
o Property Owner on the Frontage Road
o Renter/Lessee on the Frontage Road
o Other _____

- 2. Of the following community issues, please mark the two most important to you.
o Safety
o Mt. Garfield Trailhead Access
o Frontage Road Use
o Driveway Access
o Local Circulation
o Future Land Use Opportunities
o Property Impacts

- 3. What are some of your concerns regarding the existing box culvert access? (check all that apply)
o Accessing my property/business
o Accessing the Mt. Garfield Trailhead
o Modification of access onto the Frontage Road
o Drainage through the existing box culvert
o Modification/relocation of access to the Mt. Garfield Trailhead

- 4. Overall, how do you feel about the proposed options to address the structurally deficient box culvert?
o Support the proposed options
o Understand the need to address the structurally deficient box culvert, but have concerns about the proposed options. Please note concerns: _____
o Do not support the addressing the structurally deficient box culvert with the proposed options.

- 5. How did you hear about the project?
o Mail
o Newspaper
o Neighbor
o Palisade or Mesa County
o Social Media
o Other: _____

6. Do you have any other comments, questions, or concerns?

Please mail, fax or email by November 20th to:
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