

**FY 2004 Annual Survey of MDOT Design Local Agency  
Programs Service to Local Agencies  
Rural/Enhancement Unit**

In an effort to better serve the local agencies of Michigan, it would be appreciated if you would take the time to answer the questions listed below. Please add any additional comments if your item of interest is not listed.

The results of the survey will be used to improve the level of service that the Michigan Department of Transportation's Local Agency Rural/Enhancement unit provides.

Thank you for taking the time to complete this questionnaire; your input is valuable.

This survey will be available until October 29, 2004. At that time I will tabulate the results and discuss with the Rural and Enhancement staff engineers.

Please send the form via email, fax, or U.S. mail to:

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Local Agency Programs  
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**Local Agency:**

**Name:**

**Number of projects administered through MDOT during FY 2004:**

**MDOT Staff Engineer:**

**On a scale of 1-5 what was your experience with MDOT Local Agency Programs**

**Rural/Enhancement Unit:**

1	2	3	4	5
Bad	Below Average	Average	Good	Very Good

**Was the service MDOT provided polite and courteous?  
(Yes/No) please explain**

**Was the service professional, valuable, and appropriate to the level of complexity  
for the project? (Yes/No) please explain**

**Was the initial contact made by MDOT in a timely manner after the GI package  
was submitted and was the GI conducted within 30 days? (Yes/No) please explain**

**Did you meet your desired letting date based on the plan submittal date according to  
the LAP Project Planning Guide? (Yes/No) please explain**

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**What positive comments/outcomes did you have?**

**What problems did you encounter? (offer a recommendation for correcting the problem in the future)**

**What would you recommend to improve the local agency programs preconstruction activities/process/service?**

**Do you use the LAP web site for reference? (Yes/No)  
([www.michigan.gov/mdotlap](http://www.michigan.gov/mdotlap))**

**Other comments.**

**Can we call for follow-up information if necessary? Yes/No  
Phone number: \_\_\_\_\_**

*Please attach additional sheets, if required*