

COMMENT FORM



I give permission to either City of Brookings or SDDOT staff to email or call me to discuss comments provided below.

Comment: _____

Contact Information

First Name: _____
Last Name: _____
Address: _____
Phone Number: _____
Email: _____

VIA EMAIL: Marie.Johnson@hdrinc.com

VIA MAIL:
Brookings Area Transportation Plan
c/o HDR
101 S. Phillips Ave. Ste 401
Sioux Falls, SD 57104



Comments will be accepted through March 7, 2025.
All written comments received for this public meeting (during the advertised timeframe) will be summarized and publicly shared.

Names and addresses will not be released nor shared throughout this process. The summary document of written comments received will be located on the public meeting website page following the conclusion of the written comment period.

Disclaimer: Email addresses and phone numbers collected through this comment form will only be used for project related information and will never be sold or used in any other way.

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