

## Wastewater

### REQUEST FOR INFORMATION (Please PRINT your response)

#### Property Information

Property Owner Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Property: Rented or Owned? \_\_\_\_\_

#### Contact Person Information

Name of Person to Contact to Discuss Project: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Future Correspondence Preference: Email or Direct Mail? \_\_\_\_\_

#### Comments

Please provide any information you would like for us to know about your property that you think might assist us during the survey and design phase of this project. Note that as the design progresses, those properties that will be directly affected by construction will be identified and the owners of those properties will receive additional correspondence that identifies the work to be performed on their property. You will have the opportunity to provide additional information and comments at that time.

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**Please return form** *via mail:*  
Burns & McDonnell  
Attn: W. Margheim  
9400 Ward Parkway  
Kansas City, MO 64114

*via email:*  
[wamargheim@burnsmcd.com](mailto:wamargheim@burnsmcd.com)

*via fax:*  
816-822-3414