



Steven L. Beshear Governor Frankfort, Kentucky 40622 www.kentucky.gov Michael W. Hancock, P.E. Secretary

July 11, 2011

«Owner First Name» «Owner Last Name»

«Property_ADDRESS»

«Property_ADDRESS_2», «Property_State» «Property_Zip»

RE: Community Survey

Brent Spence Bridge Replacement/Rehabilitation Project

KYTC Project Item No. 6-17 Property at «Property_ADDRESS»

The Kentucky Transportation Cabinet and Ohio Department of Transportation have proposed improvements to a 7.8-mile segment of I-75 within the Commonwealth of Kentucky and the State of Ohio. The project extends from its southern limit, 5,000 feet south of the Dixie Highway Interchange on I-71/I-75 in Fort Wright, Kentucky, and continues north through Covington, Kentucky and into Cincinnati, Ohio.

The purpose of this project is to improve the operational characteristics within the I-75 corridor for both local and through traffic. I-75 in the project area suffers from congestion and safety-related issues. Therefore, this project is being developed to improve traffic flow, improve safety, and correct geometric deficiencies, while maintaining connections to key regional and national transportation corridors. The Preferred Alternative I for the project is on existing I-71/I-75 with additional travel lanes north of Kyles Lane. Access from the interstate to Covington will be through a collector-distributor road at KY 12th, 9th, and 5th Streets. Access from Covington to the interstate will be at 4th Street and 12th Street.

You are being contacted to provide information about potential impacts that may result from the construction of this project. Because your residence may be acquired in order to construct the project, we ask you to provide information so that the project team can understand how this may affect you or persons who may rely upon you. Enclosed with this letter is a survey with questions about your household and means of transportation. This survey has been sent to all households that may be relocated by the project. Answering these questions is voluntary; your opinion is important to us and your responses will be used to develop the best project for the entire community. Please submit your responses to the following questions to Stacee Hans by July 26, 2011.

Also attached is additional information about the Brent Spence Bridge project that you may find useful in your consideration of this project. The information includes maps identifying the project study area, the project alignment, and potential displacements and relocations for the Preferred Alternative I. This letter and survey is being sent out in accordance with Executive Order 12898, Title IV of the Civil Rights Act.

Thank you for your time and patience in answering these questions. This information will help us to develop a project that will best serve the community and the region.



If you would like to receive or provide additional information regarding this matter, please contact:

Stacee Hans
Environmental Coordinator
Kentucky Transportation Cabinet, Department of Highways
District 6
421 Buttermilk Pike
Covington, KY 41017
859-341-2700, ext. 274
Stacee.Hans@KY.gov

We respectfully request your response be submitted no later than two weeks from the receipt of this request (July 26, 2011). Please use the attached self addressed stamped envelope to return the completed questionnaire at no expense to you or scan in your completed questionnaire and email to Stacee.Hans@KY.gov.

Thanks again, we look forward to hearing from you.

Sincerely,

Stacee Hans

District Environmental Coordinator Kentucky Transportation Cabinet

Stace Hans

Enclosures

(NAME from address on letter) (ADDRESS from address on letter) (ADDRESS from address on letter) The information is incorrect; please enter your name and address below. Name: Address: Please provide contact information: Telephone 1: Telephone 2: Email Address: What is your preferred method of contact? E-mail Face-to-face meeting __Flyer U.S. Mail Phone call Other: _____ 1. Approximately how long have you lived at this location? ______yrs _____months 2. Do you rent or own your home? Other (e.g. live rent free)? 3. What is your primary mode of transportation? (please check one of the following) ■ Walking Bus ___ Bicycle Carpool Car/Truck/Motorcycle Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	 ☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	☐ Yes ☐ No ☐ Undecided
8.	☐ I would like to receive additional information related to relocation assistance.

	eed for additional information that you may find useful. You may use the spaces below of tach additional pages as necessary.
a.	Please identify any benefits or improvements in your life that you may experience as result of the project.
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b.	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
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Robert Ruedebusch 822 Crescent Avenue Covington, KY 41011 The information is incorrect; please enter your name and address below. Name: Address: Please provide contact information: 859-261-3411 Telephone 1: Telephone 2: Email Address: What is your preferred method of contact? Face-to-face meeting ☐ Flyer E-mail U.S. Mail Phone call Other: 1. Approximately how long have you lived at this location? _____ yrs _____ months 2. Do you rent or own your home? Other (e.g. live rent free) 3. What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus

☐ Car/Truck/Motorcycle ☐ Other

Carpool

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Jeff & Lori Grefer 608 W 11TH Street Covington, KY 41011

7	The information is incorrect; please enter your name and address below.
	Name: DANNY ROBERTS
	Address: 608 West 11 St
	Name: DANNY ROBERTS Address: 608 West 11 St cov. NSton Ky 41011
Ple	ease provide contact information:
	Telephone 1: PANNY ROBERTS 859-835 3493
	Telephone 2: 359 - 801 - 9733
	Email Address: 835-7191
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	Face-to-face meeting Flyer E-mail
	☑U.S. Mail ☐Phone call
	Other:
1.	Approximately how long have you lived at this location?/yrs months
2.	Do you rent or own your home? Other (e.g. live rent free)?
3.	What is your primary mode of transportation? (please check one of the following)
	✓ Walking ☐ Bicycle ☐ Bus
	Carpool Car/Truck/Motorcycle Other

4.	Please identify any of the following that characterize your household:
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SAM Properties LLC 1971 Pieck Lane Ft Wright, KY 41011

Name:	SAM PROPERTIES	
Address:	1815 MM FERNON DR.	
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	FT. WRIGHT , Hy, 41011	
se provide contac	t information:	•
Telephone 1:	869- 331-6681	
Telephone 2:	859- 331-6681 859- 468-435	
Email Address:	<u></u>	
at is your preferred	d method of contact?	
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4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
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8.	☐ I would like to receive additional information related to relocation assistance.

n	The following information will help us to understand your circumstances and identify your need for additional information that you may find useful. You may use the spaces below or attach additional pages as necessary.						
a.	Please identify any benefits or improvements in your life that you may experience result of the project.						
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b.	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.						
_	THIS PROPERTY IS INCOME TO ME						
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Susan & William Osterhage 45 Rivard Drive Ft Wright, KY 41011

	The information is incorrect; please enter your name and address below.
	Name:
	Address:
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Ple	ease provide contact information:
1	Telephone 1: 859-331-96043
	Telephone 2: 859-803-9537-08 859-653-0057
	Email Address: dogsledmometuse net
	J
V V 71	
W	hat is your preferred method of contact?
(1)	Face-to-face meeting
	U.S. Mail Phone call
	Other:
1.	Approximately how long have you lived at this location? 23 yrs 1 months
2.	Do you rent or wown your home? Other (e.g. live rent free)
3.	What is your primary mode of transportation? (please check one of the following)
	☐ Walking ☐ Bicycle ☐ Bus
	Carpool Car/Truck/Motorcycle Other

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9. The following information will help us to understand your circumstances and identify your need for additional information that you may find useful. You may use the spaces below or

En	invironmental Justice Ques	ionnaire	
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	The information is incor	rect; please enter your name ar	nd address below.
ĺ	Name: Time	thy Birmingham	
		Fairway Lane	
	OWNer Cin	innati Ohio 452	30
Ple	lease provide contact infor	mation:	
	Telephone 1: (513) Telephone 2:	678-6431 my	Cell Always ON.
	Email Address: Tim	Birmingham @ Fuse	e . Net
		J	
Wl	What is your preferred meth	od of contact?	
	Face-to-face meeting	☐ Flyer	E-mail
	☐U.S. Mail	∑ Phone call	
	Other:	(513) (078-6431 cell
1.	. Approximately how long	g have you lived at this locatio	n? yrs months
2.	. Do you 🗌 rent or 🛛 o	wn your home? Other 🗌 (e.g	g. live rent free) Rental home?
3.	What is your primary mo	ode of transportation? (please	e check one of the following)
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Brent Spence Bridge Replacement/Rehabilitation Project

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	MINORITY (If you marked this box, please mark all that apply below.)
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5.	How many people live in this household (including you)? 5 people live IN NOUS
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
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8.	☑ I would like to receive additional information related to relocation assistance.

attach additional pages as necessary.
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b. Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
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9. The following information will help us to understand your circumstances and identify your need for additional information that you may find useful. You may use the spaces below or

Jeff & Lori Grefer 605 W 11TH Street Covington, KY 41011

The information	is incorrect; please e	nter your name	and address bel	ow.
Name:				
Address:	CLIFF & Rit	» Vicke	 rS	
	CLIFF & Rit 605 Wilth S Covington k	5y 41011		
Please provide conta	act information:			
Trouse provide contr	det information.			
Telephone 1:	859-462-584			·
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3. What is your pri	mary mode of transpo	ortation? (pleas	se check one of	the following)
☐ Walking	☐ Bicycle	•	Bus	
Carpool	Car/Tri	uck/Motorcycle	Other	

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My total household income is approximately \$ 37.207.00.
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✓ Yes☐ No☐ Undecided
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David & Hazel Gray 507 Scenic Drive Park Hills, KY 41011

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Address:					
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Telephone 1:	859.261.7900				nistine is to the
Telephone 2:	513.406.4470			The state of the s	
Email Address:	davidgray@net	zero			
□U.S. Mail □Other:		□Phone call	*		
Approximately he	ow long have you lix	ved at this location	9 . 56	_y/s	months
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What is your prin	nary mode of transpo	reamonn (prease c	por mangana as pre vi ladi	. 113 - 12 - 12 - 12 - 12 - 12 - 12 - 12	S) -

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	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes I did not realize that there was a choice. It was my understanding that under eminent domain I have to sell, so why ask the question.
8.	I would like to receive additional information related to relocation assistance.

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	ach additional pages as necessary.
	Please identify any benefits or improvements in your life that you may experience as
	result of the project.
	None
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	Please identify any difficulties, hardships, problems or concerns that you may have if
	relocated by the project.
	Concerns: Over the last 10 years I have had a few notification of
PHILIPPAN I	ditterent companied detting in touch with up. This has never
	different companies getting in touch with us. This has never
	happened.
	happened. I have a four bedroom home with a spectacular view, and I don't
	happened. I have a four bedroom home with a spectacular view, and I don't
	happened. I have a four bedroom home with a spectacular view, and I don't have much confidence in getting a comparable home in the Park Hill area for the amount the State/Federal will pay for my home.
	happened. I have a four bedroom home with a spectacular view, and I don't have much confidence in getting a comparable home in the Park Hill area for the amount the State/Federal will pay for my home. This home has been in our family for over 57 years, it was the
	happened. I have a four bedroom home with a spectacular view, and I don't have much confidence in getting a comparable home in the Park Hill area for the amount the State/Federal will pay for my home.
	happened. I have a four bedroom home with a spectacular view, and I don't have much confidence in getting a comparable home in the Park Hill area for the amount the State/Federal will pay for my home. This home has been in our family for over 57 years, it was the home my husband grew up in, the home his father build, it has a lot of sentimental value, it is not just a piece of property.
	happened. I have a four bedroom home with a spectacular view, and I don't have much confidence in getting a comparable home in the Park Hill area for the amount the State/Federal will pay for my home. This home has been in our family for over 57 years, it was the home my husband grew up in, the home his father build, it has a

Amanda Mayhew

824 Crescent Avenue Covington, KY 41011 The information is incorrect; please enter your name and address below. Name: Address: Please provide contact information: Telephone 1: Telephone 2: Yanoo.com Email Address: | acmayhewa What is your preferred method of contact? Face-to-face meeting Flyer Phone call □U.S. Mail Other: 2. Do you rent or wown your home? Other (e.g. live rent free) 3. What is your primary mode of transportation? (please check one of the following) ☐ Walking Bicycle Bus Car/Truck/Motorcycle Carpool Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	 ☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000?
	My total household income is approximately \$
¹ 7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	I would like to receive additional information related to relocation assistance.

	lease identify any benefits or improvements in your life that you may experience
r	esult of the project.
	<u> </u>
	ease identify any difficulties hardships problems or concerns that you may have if
	lease identify any difficulties, hardships, problems or concerns that you may have if located by the project.

William & Jane Beuttel 506 Scenic Drive Park Hills, KY 41011

Name:	JANE E BOUTTE!
Address:	506 Scenic Drive
	PARK Hills, Ky. 41011
••	
ease provide conta	act information:
Telephone 1:	859 431 7634
Telephone 2:	
Email Address:	bbeuttel@Insightbb.com
hat is your preferr	ed method of contact?
Face-to-face i	meeting Flyer E-mail
 □U.S. Mail	Phone call
Othon	
Approximately h	now long have you lived at this location?54yrs months
Do state and s	or a second house? Other (o a live ment free)
Do you rent o	or a own your home? Other (e.g. live rent free)?
e san e	
What is your prin	mary mode of transportation? (please check one of the following)
☐ Walking	☐ Bicycle ☐ Bus
_	
Carpool	Car/Truck/Motorcycle Other

4.	Please identify any of the following that characterize your household:				
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?				
	ELDERLY (Over 65) How many elderly people in the household?				
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)				
	How many people in the household have limited English proficiency?				
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)				
	MINORITY (If you marked this box, please mark all that apply below.)				
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander				
5.	How many people live in this household (including you)?				
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.				
	My total household income is approximately \$				
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?				
	☐ Yes ☐ No ☐ Undecided				
8	I would like to receive additional information related to relocation assistance.				

Robert Dickman 1132 Cedar Ridge Lane Park Hills, KY 41011

☐ The information is incorrect; please enter your name and address below.								
Name: Sharon Dideman Jowner Address: Office Address: 1198 Fartlills Dr. Park thirts ky 41011								
Please provide contact information:								
Telephone 1: 859 431 6999 Telephone 2: 859 801 7430 (Elizabeth Pickman) Email Address: EKAKMIN (O Yahoo Com								
What is your preferred method of contact?								
Face-to-face meeting								
U.S. Mail Phone call								
Other:								
1. Approximately how long have you lived at this location?								
Walking Bicycle Bus								
Carpool Car/Truck/Motorcycle Other								
Toman's use all of these								

a.								
	Please identify any benefits or improvements in your life that you may experience as a result of the project.							

1227/2001200 20								
	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project. This Pelcrahan would affect believe to be a targe impact on the community of the project.							
	people would be very difficult							
	property that is an income producing part of our business. This builder to over of our largest units.							

Robert Dickman 1132 Cedar Ridge Lane Park Hills, KY 41011

	×		1 11 11	
The information is	incorrect; please en		1	W.
Name: C	sharon L	Didema	m lowr	or
Address.	office Ada	ucss:1	198 Fart	lills by.
		7	are this	lills by.
				<i>I</i>
Please provide contact	information:	_		
Telephone 1:	359 431 6	999		Dictionaction
Telephone 2: Email Address: f	skakmn (930 C	o. COM	pickman)
What is your preferred	method of contact?	?		
Face-to-face me	eting	∏Flyer		E-mail
□U.S. Mail		Phone ca	all	Laurence
Other:		**************************************		
	A CONTRACTOR OF THE CONTRACTOR			
1 4				
1. Approximately how	v long have you live	ed at this locati	on?	in the 70's
BUIT 1	of conil		d 0-10-11	100 1000 10S
2. Do you rent or	Over your home	700000	J SIVUL	c repr
rioperi	9 1/2 1/6		produce	ing- it-Complex
3. What is your prima	ry mode of transpor	tation? (please	se check one of th	or Conquex
~ /		immore Aram		ic following)
Walking	Bicycle		Bus	
Carpool	Car/True	k/Motorcycle	Other	
Davo	00/0 1/	00 0111	of the	Se

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
1	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander Alaskan Native Tenants May ft In any of these
5.	How many people live in this household (including you)?
	40 unit Apt Complex
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
7.	My total household income is approximately \$
	☐ Yes ☐ No ☐ Undecided
8.	☐ I would like to receive additional information related to relocation assistance.

•

THOMAS C & DANINE B GIER 609 W 11TH STREET COVINGTON, KY 41011

X	The information	s incorrect; please enter your name and address below.	
	Name:		
	Address:	100G DIECK DR	
		1999 PIECK DR. COVINGTON, KY 41811	
		COVINGION, 17 4100	
Pl	ease provide conta	t information:	
	Telephone 1:	859-331-2769 HOME 859-630-5969 CELL- tomgierconst@insightbb.com	
	Telephone 2:	859-630-5969 CELL	
	Email Address:	tomgierconst@insightbb.com	
W	hat is your preferr	d method of contact?	
	Face-to-face r	eetingFlyerE-mail	
	⊠U.S. Mail	Phone call	
	Other:		
1.	Approximately h	w long have you lived at this location?	hs
		•	
_	-		
2.	Do you I rent o	own your home? Other [(e.g. live rent free) ?	
3.	What is your prin	ary mode of transportation? (please check one of the following)	
	Walking	☐ Bicycle ☐ Bus	
	Carpool	Car/Truck/Motorcycle Other	

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	☐ Yes ☐ No ☐ Undecided
8.	I would like to receive additional information related to relocation assistance.

Please identify any benefits or improvements in your	life that you may experience as a
result of the project.	me that you may experience as t
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	concerns that you may have if
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relocated by the project.	
relocated by the project. TE OWN 609 W. 11te St. Covins	TON, KY AS AN
relocated by the project. TE OWN 609 W. 11te St. Covins	TON, KY AS AN
Please identify any difficulties, hardships, problems or relocated by the project. The sum 609 W. II to 54. Coving NUESTMENT PROPERTY. QUESTION STANDARD ST	TON, KY AS AN

9. The following information will help us to understand your circumstances and identify your

ERNA MCCALL 832 CRESCENT AVENUE COVINGTON, KY 41011

	The information is incorrect; please enter your name and address below.
	Name: ERNA V. MCCALL
	Address:
	832 CRESCENT AVE. COVINGTON KY 41011
Ple	ease provide contact information:
	Telephone 1: 859-291-6384
	Telephone 2: Email Address:
	Eman Address.
33 71	hat is your preferred method of contact?
VV	
	Face-to-face meeting
	U.S. Mail Phone call
	Other:
1.	Approximately how long have you lived at this location? 62 yrs 7 months
	The first state of the first sta
2	Do you rent or own your home? Other (e.g. live rent free) ?
۷.	for your first of grown your nome. Other [2] (e.g. live tent free)
3.	What is your primary mode of transportation? (please check one of the following)
	☐ Walking ☐ Bicycle ☐ Bus
	☐ Carpool ☐ Car/Truck/Motorcycle ☒ Other

	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	 ☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
	How many people live in this household (including you)?
ó.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ 12,444 ys.
'.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	☐ Yes ☐ No ☑ Undecided
•	□ No

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a.	Please identify any benefits or improvements in your life that you may experience a result of the project.
	Please identify any difficulties hardships problems or concerns that you may have if
•	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
•	Please identify any difficulties, hardships, problems or concerns that you may have if
•	Please identify any difficulties, hardships, problems or concerns that you may have if
•	Please identify any difficulties, hardships, problems or concerns that you may have if
	Please identify any difficulties, hardships, problems or concerns that you may have if
	Please identify any difficulties, hardships, problems or concerns that you may have if
-	Please identify any difficulties, hardships, problems or concerns that you may have if
•	Please identify any difficulties, hardships, problems or concerns that you may have if
•	Please identify any difficulties, hardships, problems or concerns that you may have if
•	Please identify any difficulties, hardships, problems or concerns that you may have if
•	Please identify any difficulties, hardships, problems or concerns that you may have if
-	Please identify any difficulties, hardships, problems or concerns that you may have if

REBECCA EUBANKS 610 W 12TH STREET COVINGTON, KY 41011

	The information is incorrect; please enter your name and address below.
	Name:
	Address:
	· · · · · · · · · · · · · · · · · · ·
Ple	ease provide contact information:
	Telephone 1: 859 581-3487 home
	Telephone 2: 859 391 - 0514 cell
	Email Address:
W	hat is your preferred method of contact?
	Face-to-face meeting Flyer E-mail
	☑U.S. Mail ☑Phone call
	Other:
1	Approximately how long have you lived at this location? yrs5months
1.	Approximately now long have you rived at this location:yis months
2.	Do you rent or own your home? Other (e.g. live rent free)?
3.	What is your primary mode of transportation? (please check one of the following)
	☐ Walking ☐ Bicycle ☐ Bus
	☐ Carpool

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?3
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	☐ I would like to receive additional information related to relocation assistance.

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MATTHEW CHASTAIN 904 BAKER STREET COVINGTON, KY 41011

	The information is incorrect; please enter your name and address below.
	Name:
	Address:
	·
Ple	ease provide contact information:
	Telephone 1: 859 - 814 - 9742
	Telephone 2: Email Address: MATT 732 @ ASL. COM
	Email Address: MATT 732 @ AOL. COM
W.	hat is your preferred method of contact?
	☐Face-to-face meeting ☐Flyer ☐E-mail
	U.S. Mail Phone call
	Other:
1.	Approximately how long have you lived at this location?
2.	Do you rent or wown your home? Other (e.g. live rent free)?
3.	What is your primary mode of transportation? (please check one of the following)
	☐ Walking ☐ Bicycle ☐ Bus
	☐ Carpool

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government? Yes No
8.	☐ Undecided I would like to receive additional information related to relocation assistance.

9.	The following information will help us to understand your circumstances and identify your need for additional information that you may find useful. You may use the spaces below or attach additional pages as necessary.
	a. Please identify any benefits or improvements in your life that you may experience as a result of the project.
	- AS THE FIRE CHIEF FOR THE CITY OF LUDLOW
	this would Provide ME with the chance
	to MOVE INTO LUDLOW CITY LIMITS.
-	- THERE IS NO ON-STREET PARKING ON BAKEN
	STREET. I SOMETIMES HAVE TO PARK OVER A
	BLOCK AWAY FROM MY VEHICLE/HOME.
	- PRESERTY IN MY AREA HAS UNDERGONE A MAJEN
	CHANGE FROM OWNER OCCUPISO to RENTAL.
	- THE QUALITY OF LIFE HAS CHANGED. VEHICLE
	BREAK-IND AND OTHER DRUG RELIATED CRIMBS
	THE 9TH & BAKOR INTERSECTION.
-	- BT WOULD BE A BLESSING TO MOVE.
	b. Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project. None
•	

THOMAS P MCMURRAY 622 WESTERN AVENUE COVINGTON, KY 41011

	is incorrect; please enter your name and address below.
Name:	THOMAS P MCMURRAY
Address:	622 WESTERN AVE
	THOMAS P MEMURRAY 622 WESTERN AVE COV. Ky. 41011
Please provide cont	act information:
	859-322-3445
Telephone 2: Email Address:	to 1.6.66 (00)
Eman Address:	tommacbass 60@gmail.com
What is your prefer	red method of contact?
Face-to-face	meeting Flyer E-mail
☐U.S. Mail	Phone call
Other:	
	how long have you lived at this location?
1. Approximately l	now long have you rived at this location:yisnionthis
	or \(\text{own your home?} \) Other \(\text{(e.g. live rent free)} \) ?
2. Do you ☐ rent o	
2. Do you ☐ rent	or X own your home? Other (e.g. live rent free)?

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ 30,000 - 32,000
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	I would like to receive additional information related to relocation assistance.

n	the following information will help us to understand your circumstances and identify your eed for additional information that you may find useful. You may use the spaces below or
at	ttach additional pages as necessary.
a. 	Please identify any benefits or improvements in your life that you may experience as a result of the project. Mot Durk - Durks on month, timb from and wat Curcumstances.
_	
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b.	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
_	not sent same as about.
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-	

Brent Spence Bridge Replacement/Rehabilitation Project Environmental Justice Questionnaire
TAMMY (RABE) 607 WATKINS STREET COVINGTON, KY 41011
The information is incorrect; please enter your name and address below.
Name: Tammy O. Vercheak Address:
Please provide contact information:
Telephone 1: 859-760-8078 Telephone 2: 859-341-7062 Email Address: tammy. Vercheak@Kenton. Kyschools. US
What is your preferred method of contact?
Face-to-face meeting Flyer E-mail
U.S. Mail Phone call
Other:
1. Approximately how long have you lived at this location? $\frac{2}{2}$ yrs $\frac{7}{2}$ months $\frac{(a)607}{2}$ and $\frac{8}{2}$ yrs $\frac{7}{2}$ months $\frac{(a)607}{2}$ Watkins St
2. Do you rent or vown your home? Other (e.g. live rent free)?
2. What is your primary made of transportation? (places check one of the following)
3. What is your primary mode of transportation? (please check one of the following)
☐ Walking ☐ Bicycle ☐ Bus —
☐ Carpool ☐ Car/Truck/Motorcycle ☐ Other

4% 49: 81: 4 18:

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ 3444.00 \mo. (net)
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Tyes No Depends on amt. of financial Undecided Compensation
8.	I would like to receive additional information related to relocation assistance.

nee	following information will help us to understand your circumstances and identify your d for additional information that you may find useful. You may use the spaces below or ch additional pages as necessary.
	Please identify any benefits or improvements in your life that you may experience as a result of the project.
	It may allow for myself and my husband to purchase a new home
	for our children to play in peacefully without the noise and
	Doce again I here vacables are
	Once again these variables are completely dependent on the amount of compensation for our home, the inconvenience, moving expenses, time
	and money that I have invested to make this home what it is today.
	Please identify any difficulties, hardships, problems or concerns that you may have if elocated by the project.
	Please see attached.
	· · · · · · · · · · · · · · · · · · ·

How this Relocation will Negatively Impact Myself and My Family

- My primary reason for purchasing in Covington was to purchase cheaply, renovate and live well. I cannot and will not be able to rehab another home in Covington for a purchase price compared to 609 or 607 Watkins, mentally, emotionally or financially.
- Moving to 609 Watkins Street in 2003, I moved into my ex-husband's childhood home.
 We rehabbed it completely including an \$85,000 kitchen, bath, laundry and half-bath renovation...three months after total completion (December, 2007) he wanted a divorce.
- We opted to proceed with the divorce and agreed that I would take the unfinished, untouched property which was intended to be rental property for us (607 Watkins). However, I started all over again creating mounds of debt to have it completed quickly in order for it to be livable and for a SECOND TIME create a home for myself. Because my debt to income was so high I had to borrow money again to even refinance and complete a guit claim deed to remove my ex-husband's name as he did the same.
- In April 2009 my home was appraised for \$120,000 and my ex-husband's home was appraised at \$125,000 by National City (PNC Bank).
- I have rehabbed my home to meet my personal tastes and needs. Some examples are as follows: Granite countertops, tiered eat-in kitchen, cherry cabinets/chocolate finish, high-end Jenn-Air appliances and wine cooler, every window replaced with high-end energy-efficient double paned glass replacements (\$15,000), all interior walls down to the studs to incorporate all new electric including cable and wall mount television hookups and new panel in basement to street, all new drywall/paint, lighting fixtures, entire replacement of plumbing throughout (\$7,000), tankless water heater (\$2,000), added 2 bedrooms, added ½ bath upstairs, new heating and air system (\$15,000), custom woodwork to replicate original throughout the house, refinishing of original wood flooring throughout the house, travertine tile in bathroom, glass tile in bath/kitchen, etc. just to name a few. After final inspections were complete, I was able to move in February, 2009.
- I recently remarried and my husband was laid off for 8 consecutive months. Started a new job working second shift, in late Aug. 2011.
- I am the primary financial means within our family.
- Emotionally, financially and mentally to start over again with a 1 year old is extremely stressful.
- My husband has a 5 year old son from a previous relationship and this home (607
 Watkins) is his only stable existence. We are going through custody battles currently due
 to extreme changes that have occurred in his life which are negatively affecting him and
 his behavior. My step-son has endured in 3 years: two new step-parents, two new baby

brothers, moving to Hawaii because his step-father re-enlisted into the ARMY, starting kindergarten, traveling to KY 4 times a year for visitations with my husband and our family, behavior issues at home and at school due to all of the changes, remain persistent. This would be an additional change that would adversely affect his life and stability within our home and the possible decisions that the court may take into account.

The overall mental letdown that I have worked on two homes, managed workers, created designs, worked several jobs to pay for the amenities that I wanted in my homes, the countless hours to complete two projects and the end result to be the same – losing both properties. This weighs on my mind and deeply affects my day-to-day life and what I have tried to create for myself and now my current family.

Lammy O. Vercheak (859) 760 - 8078

Brent Spence Bridge Replacement/Rehabilitation Project **Environmental Justice Questionnaire** MICHAEL L & DEBORAH MCQUEARY 632-34 WESTERN AVENUE COVINGTON, KY 41011 The information is incorrect; please enter your name and address below. Name: Address: Please provide contact information: 859-491-8461 859-6 859-750-6098 Telephone 1: Telephone 2: Email Address: What is your preferred method of contact? Face-to-face meeting ☐Flyer E-mail U.S. Mail

	Other:
1.	Approximately how long have you lived at this location?
2.	Do you rent or wown your home? Other (e.g. live rent free)?
3.	What is your primary mode of transportation? (please check one of the following)
	☐ Walking ☐ Bicycle ☐ Bus
	□ Walking □ Bicycle □ Bus □ Carpool □ Car/Truck/Motorcycle □ Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ 64,500.
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	☐ Yes ☐ No ☑ Undecided
8.	I would like to receive additional information related to relocation assistance.

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9.	The following information will help us to understand your circumstances and identify your need for additional information that you may find useful. You may use the spaces below or attach additional pages as necessary.
	a. Please identify any benefits or improvements in your life that you may experience as a result of the project.
	Vam) 61, my husband is 63. We also have his 86 year old
	methor. 10 to be rate of my 82 was old metho. She lives begin
	Close, at 521 Western. RI Stay with her everyday from 7 pm - 12 AM
	Myhudrand is disabled, he uses a walker and is on oxygen.
	We just poured a concrete kamp to make it easier for mobility. We also just built a new deck and put in a new kitchen
	in the basement. Place a bothroom. Ewe will need to
	find a kanch style home that is wholehow accessable.
	Abstrace is on SS disability since 2005 with broathing
	Loquis and conjustive heart jailure
	b. Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project. We live in an area that is close to everything, including my family have being our home of to years.
	Two hall need to be able to be close to a kospitar.
	morng expenses would be an essue
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ANN FINDLEY 858 CRESCENT AVENUE COVINGTON, KY 41011

	The information is incorrect; please enter	er your name ar	nd address below	•	
	Name:				
	Address:		·		
	Address.				
Ple	ease provide contact information:				
	Telephone 1: \$59 48 63	11.0			
		71)			
	Email Address:	<i>A.I.I.</i>			
	Linaii / tuuress.				
	,				
XX/1	agt is very professed mathed of contact?				
77]	nat is your preferred method of contact?				
	Face-to-face meeting	∏Flyer		☐E-mail	
		Штуст			
	☑U.S. Mail	Phone call			
	Other:				
1.	Approximately how long have you lived	d at this locatio	n? <u>39</u> y	rs <u>(</u>	months
2.	Do you rent or wown your home?	Other [] (e.g	g. live rent free)_		?
3.	What is your primary mode of transport	ation? (please	check one of the	e following)	
	Walking Bicycle		Bus		
	☐ Carpool ☐ Car/Truck	k/Motorcycle	Other		

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are stil learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ _35,000
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	✓ Yes☐ No☐ Undecided

n	the following information will help us to understand your circumstances and identify your eed for additional information that you may find useful. You may use the spaces below or trach additional pages as necessary.
a.	Please identify any benefits or improvements in your life that you may experience as a result of the project.
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b.	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
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DENISE MARY LANSKY 860 CRESCENT AVENUE COVINGTON, KY 41011

	The information is incorrect; please enter your name and address below.
Г	Name:
	Address:
-	
L	
Ple	ase provide contact information:
Γ	Telephone 1: 859-261-8863 - HOME
	Telephone 2: 513-263-4202- OFFICE
L	Email Address:
Wh	Tace-to-face meeting Flyer E-mail
	U.S. Mail Phone call
	Other:
1	
1.	Approximately how long have you lived at this location?yrsmonths
2.	Do you rent or own your home? Other (e.g. live rent free)?
3.	What is your primary mode of transportation? (please check one of the following)
	☐ Walking ☐ Bicycle ☐ Bus
	☐ Carpool ☐ Car/Truck/Motorcycle ☐ Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No. If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	I would like to receive additional information related to relocation assistance.

	tach additional pages as necessary.
a.	Please identify any benefits or improvements in your life that you may experience as result of the project.
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 	Please identify any difficulties, hardships, problems or concerns that you may have if
).	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project. Lam amanual L will not receive
	relocated by the project.
	Lam concerned & will not pecive

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PAUL D JOHNSON & KAREN MEDORAH 850 CRESCENT AVENUE COVINGTON, KY 41011

	The information is incorrect; please enter your name and address below.
	Name:
	Address:
P1	ease provide contact information:
	Telephone 1: 859-261-8051
	Telephone 2:
	Email Address:
W	hat is your preferred method of contact?
	▼Face-to-face meeting
	U.S. Mail Phone call
	Other:
1.	Approximately how long have you lived at this location? Z 6 yrs 9 months
2.	Do you rent or wown your home? Other (e.g. live rent free)?
3.	What is your primary mode of transportation? (please check one of the following)
	☐ Walking ☐ Bicycle ☐ Bus
	☐ Carpool ☐ Car/Truck/Motorcycle ☐ Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? X Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ 50, 169.
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	I would like to receive additional information related to relocation assistance.

	identify af the proj		its or imp	rovements	in your li	fe that yo	ou may ex	sperience a
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			ities, hards					y have if

KIMBERLY A LIMLE 862 CRESCENT AVENUE COVINGTON, KY 41011

Address: Carpool Carp	Name:	
Telephone 1: 513 225 tellale Telephone 2: Email Address: **Circlinale** amail.com** hat is your preferred method of contact? Face-to-face meeting	Address:	
Telephone 1: 513 225 tellale Telephone 2: Email Address: **Circlinale** amail.com** hat is your preferred method of contact? Face-to-face meeting		
Telephone 1: 513 225 tellale Telephone 2: Email Address: **Circlinale** amail.com** hat is your preferred method of contact? Face-to-face meeting		
Telephone 1: 513 225 tellale Telephone 2: Email Address: **Circlinale** amail.com** hat is your preferred method of contact? Face-to-face meeting		
hat is your preferred method of contact? Prace-to-face meeting	ease provide cont	act information:
hat is your preferred method of contact? Prace-to-face meeting	Telephone 1:	E12 08E tall (a
hat is your preferred method of contact? Face-to-face meeting	Talanhana 2.	
hat is your preferred method of contact? Face-to-face meeting	Email Address:	Kimlimle@amail.com
Face-to-face meeting		
Face-to-face meeting	h at : a reason man fam	and mostly of a surfacet?
U.S. Mail. Other: Approximately how long have you lived at this location?	nat is your prefer	red method of contact?
Other: Approximately how long have you lived at this location?	Face-to-face	meeting
Other: Approximately how long have you lived at this location?	□U.S. Mail.	Phone call
Approximately how long have you lived at this location? yrs months Do you	j.	
Do you rent or own your home? Other (e.g. live rent free)? What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus		
Do you rent or own your home? Other (e.g. live rent free)? What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus		
Do you rent or own your home? Other (e.g. live rent free)? What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus	Approximately l	now long have you lived at this location?
What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus	ripproximately i	iow long have you have at this location
What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus		
☐ Walking ☐ Bicycle ☐ Bus	Do you rent	or own your home? Other (e.g. live rent free) ?
☐ Walking ☐ Bicycle ☐ Bus		
☐ Walking ☐ Bicycle ☐ Bus		
☐ Walking ☐ Bicycle ☐ Bus	See a Comment of the comment	
	What is your pri	mary mode of transportation? (please check one of the following)
	☐ Walking	☐ Bicycle ☐ Bus
	<u> </u>	Car/Truck/Motorcycle Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ 45,000.
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	Would like to receive additional information related to relocation assistance.

need for additional information that you may find useful. You may use the spaces below or attach additional pages as necessary.
a. Please identify any benefits or improvements in your life that you may experience as a result of the project. Currently with the pending decision to be made on the two bridge alternates. E equiring my home and I not agriring my home, I am stuck between a rock and a hard place. This work I began working with a realtor, to sell my home and he pools it will be nearly impossible because the pending alternates of the Bridge Project. I purchased my home 5 years ago and since I've had major changes in my life. I years ago it was just my dog and myself occupying my 2 bedward, I both home but mow it is my husband, 2 step auginters, my II month old som (the dog still) and myself. I am trying to sell because of this, we need a larger place. Another factor that further complicates this situation is the lot time home buyer grant I received from the city of Covington. This grant was a blessing 5 years ago but now it inhibits me from renting my home, because I would have to reput the city 5,000 that I do not have leaving me at this situation that I am whable to rent or sell my home. b. Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project. Zero. Please a quire my property ASAP III
Do with it what you would like, just let me know when and its all yours! Please let me know what is decided ASAP so I can got movin on!

9. The following information will help us to understand your circumstances and identify your

Project Name; Item number County Page 1

KYTC Small Project Relocation Questionnaire

(NAME from address on letter) (ADDRESS from address on letter) (ADDRESS from address on letter) The information is incorrect; please of	KARL SCOTT WISSMANN を対し CRES CRIT AVE COV. Ky 41011 enter your name and address below.
Name:	
Address:	
Please provide contact information:	
Telephone 1: 559 380	7437
Telephone 2: \$59 331	1983
Email Address: WISSMANA	- 854 @ Insight BB. com
	et? If (be sure to provide email address above) If call (be sure to provide number(s) above) above)
Approximately how long have you liv	red at this location? <u>\$</u> 8 yrs <u> </u>
2. Do you: rent your home Other (e.g. live rent f	own your home?
3. What is your primary mode of transp Walking Bicyc	ortation? (please check one of the following)
☐ Carpool ☐ Car/	Truck/Motorcycle

Pa	ge 2
4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
 	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	□ Alaskan Native □ American Indian □ Asian American □ Black/African-American □ Hispanic □ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8	New ould like to receive additional information related to relocation assistance

Project Name; Item number

County

Project Name; Item number County Page 3

9.	ad	e following information will help us to understand your circumstances and identify your need for ditional information that you may find useful. You may use the spaces below or attach additional ges as necessary.
,	а.	Please identify any benefits or improvements in your life that you may experience as a result of the project.
	_	
-	o.	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
-		
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(NAME from address (ADDRESS from address) (ADDRESS from address)	dress on letter)
☐ The information i	is incorrect; please enter your name and address below.
Name:	MA++ Planck
Address:	MA++ Planck 818 crecent
Please provide contact	
Telephone 1:	859-982-5969
Telephone 2:	859-957-3113
Email Address:	Mplanck 44 @ GMail, com
What is your preferre	ed method of contact?
Face-to-face m	neeting
☐U.S. Mail	Phone call
Other:	
Approximately ho	ow long have you lived at this location?yrsmonths
2. Do you ⊠rent on	own your home? Other [(e.g. live rent free)?
3. What is your prim	ary mode of transportation? (please check one of the following)
☐ Walking	☐ Bicycle ☐ Bus
	Car/Truck/Motorcycle Other

4	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5	How many people live in this household (including you)?
6	Is your total household income before taxes more than \$40,000? Yes Your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$ 30,000.
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	would like to receive additional information related to relocation assistance.

	9.	ne	the following information will help us to understand your circumstances and identify your eed for additional information that you may find useful. You may use the spaces below or trach additional pages as necessary.
		a.	Please identify any benefits or improvements in your life that you may experience as a result of the project.
			Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project
			relocated by the project.
دم۸	Affor		we Finally Found a Home that is big enough and
C&~	Affor		relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it all might be taken From us. We
Ca~	Affor	 rd 	relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it with might be taken from us, we have our home and we are very happy there.
C&~!	Affor	 rd 	relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it all might be taken From us. We
C&~	Affor	 rd 	relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it wight be taken from us. We Love our home and we are very happy there,
Ca~1	Affor	 rd 	relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it wight be taken from us. We Love our home and we are very happy there,
C&~	Affor	 rd 	relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it wight be taken from us. We Love our home and we are very happy there,
Ca~	Affor	 rd 	relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it with might be taken from us, we have our home and we are very happy there.
Ca~	Affor	 rd 	relocated by the project. We Finally Found a Home that is big enough and For our Family. 3 months in and we get told that it with might be taken from us, we have our home and we are very happy there.

(NAME from address on letter) (ADDRESS from address on letter) (ADDRESS from address on letter) The information is incorrect; please enter your name and address below. Name: 636 Wedern Que Corregion Ky 41011 Address: Please provide contact information: Telephone 1: Telephone 2: Email Address: What is your preferred method of contact? Face-to-face meeting E-mail ☑U.S. Mail Thone call Other: ____ 1. Approximately how long have you lived at this location? 50 2. Do you rent or vown your home? Other (e.g. live rent free)? 3. What is your primary mode of transportation? (please check one of the following) Walking Bus Carpool Car/Truck/Motorcycle Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	VELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	☐ Yes ☐ No ☐ Undecided
8.	I would like to receive additional information related to relocation assistance.

a. Please ide	entify any bene	fits or impro	vements in y	our life that	you may experi
result of t	he project.	•	Ž		J J 1
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b. Please idea	ntify any difficu	ilties, hardshi	ps, problems	or concerns	that you may hav
	ntify any difficu	ılties, hardshi	ips, problems	or concerns	that you may hav
			ps, problems	or concerns	that you may hav
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my h	wolsana	8 P C		or concerns	

(A	AME from addrest DDRESS from addrest DDRESS from add	dress on letter)
V	The information	s incorrect; please enter your name and address below.
	Name:	STANLEY CHIN
	Address:	622 LEWIS STREET
		COVINGTON, KY 41011
Ple	ease provide conta	ct information:
	Telephone 1:	646-643-0511
	Telephone 2:	513-455-5628 doublechins@earthlink.net
	Email Address:	doublechins @ earthlink . net
WI	hat is your preferre	ed method of contact? Description of contact? Description of contact?
	U.S. Mail	Phone call
	Other:	<u> </u>
1.		ow long have you lived at this location? yrs months
		r own your home? Other (e.g. live rent free)?
3.	What is your prin	nary mode of transportation? (please check one of the following)
		☐ Bicycle ☐ Bus
	Carpool	Car/Truck/Motorcycle Other

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government? Yes No Undecided
8.	I would like to receive additional information related to relocation assistance.

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Environmental Justice Questionnaire (NAME from address on letter) Riverenter Select (ADDRESS from address on letter) 669 W. THIRD ST (ADDRESS from address on letter) The information is incorrect; please enter your name and address below. Name: Address: Please provide contact information: 859-547-5350 Telephone 1: Telephone 2: KSHEWAK @ MLDEVCO. COM Email Address: What is your preferred method of contact? NE-mail Face-to-face meeting □Flyer U.S. Mail Phone call Other: 2. Do you rent or wown your home? Other (e.g. live rent free)? 3. What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus Carpool

Brent Spence Bridge Replacement/Rehabilitation Project

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Resident 505 St Joseph Lane Apt 74 Park Hills, KY 41011

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Please provide con	tact information:		
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Telephone 2:	******		
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What is your pr	imary mode of transpo	ortation? (please check	one of the following)

	Carpool Car/Truck/Motorcycle Other
4	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	I would like to receive additional information related to relocation assistance.

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	The information	is incorrect; please ente	er your name an	nd address below.	
Γ	Name:	Caorgio Posav			
-	Address:	Georgia Posey 619 Crescent Avenue			
Ple	ease provide conta	ect information:			
	Telephone 1:	859-307-0531			
	Telephone 2:				
Ĺ	Email Address:				
Wł	nat is your preferr	red method of contact?			
	Face-to-face r	neeting	☐ Flyer	☐E-mail	
	⊠U.S. Mail		Phone call		
	Other:				
1.	Approximately h	now long have you lived	d at this location	n?3yrs7m	onths
2.	Do you rent o	or own your home?	Other [] (e.g	g. live rent free)	?
3.	What is your prin	mary mode of transport	ation? (please	check one of the following)	
- •			4	_	
	Walking	Bicycle		∐ Bus	
	☐ Carpool		k/Motorcycle	Other	

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	 ☐ Alaskan Native ☐ American Indian ☐ Asian American ☐ Black/African-American ☐ Hispanic ☐ Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?3
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below.
	My total household income is approximately \$11,568
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	YesNoUndecided
8.	✓ I would like to receive additional information related to relocation assistance.

ne	ne following information will help us to understand your circumstances and identify your sed for additional information that you may find useful. You may use the spaces below or tach additional pages as necessary.
a.	Please identify any benefits or improvements in your life that you may experience as a result of the project.
	aybe move to a better neighborhood, especially with a young child. I also might be able to locate somewhere with a yard that would be better suited for a young toddler and a dog.
_	
_	
b.	Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
Ιw	yould want to be able to give my landlord enough of a warning so that I could receive the
ini	tial deposit from the property. I would also be concerned about having enough money for a posit on a new place and any of the additional expenses that come from relocating. My
	ild, who is 3 now, will be in school at the time and I would be concerned about moving and
up	rooting during the middle of a school year. That would be another adjustment to think
<u>ab</u>	out when making moving plans.

(NAME from address on letter) (ADDRESS from address on letter) (ADDRESS from address on letter) The information is incorrect; please enter your name and address below. Name: Address: Please provide contact information: Telephone 1: 814-8524 Telephone 2: Email Address: What is your preferred method of contact? XFace-to-face meeting Flyer E-mail U.S. Mail Phone call Since 2. Do you rent or wown your home? Other (e.g. live rent free) 3. What is your primary mode of transportation? (please check one of the following) Walking Bicycle Bus ☐ Car/Truck/Motorcycle ☐ Other LKLP transportation Carpool

4.	Please identify any of the following that characterize your household:
	DISABLED (a person that has a physical or mental impairment that substantially limits one or more major life activities) How many disabled people in the household?
	ELDERLY (Over 65) How many elderly people in the household?
	LIMITED ENGLISH PROFICIENCY (English is not your first language and you are still learning)
	How many people in the household have limited English proficiency?
	ZERO-CAR HOUSEHOLD (No one living in home has access to a vehicle)
	MINORITY (If you marked this box, please mark all that apply below.)
	Alaskan Native American Indian Asian American Black/African-American Hispanic Hawaiian/Pacific Islander
5.	How many people live in this household (including you)?
6.	Is your total household income before taxes more than \$40,000? Yes No If your answer is no, please write your total household income before taxes in the space below. # 7764 My total household income is approximately \$ 674 mo. 551
7.	If it is determined that your home must be acquired for this project to be constructed, would you be willing to relocate with financial compensation from the government?
	Yes No Undecided
8.	☐ I would like to receive additional information related to relocation assistance.

1	The following information will help us to understand your circumstances and identify your need for additional information that you may find useful. You may use the spaces below or attach additional pages as necessary.
a	. Please identify any benefits or improvements in your life that you may experience as a result of the project.
-	Feel project is needed
	Covington is had due to crime
-	
-	
-	
-	
b	. Please identify any difficulties, hardships, problems or concerns that you may have if relocated by the project.
_	Pharmacy delivers medication, money orders
_	Relies on Jamily members within Covington
_	Makes sure justly
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