IL 173 at Keystone Road Study Community Advisory Group (CAG) Membership Application



Please Print		
Name:		
Affiliation:		
Address:		
City:	State:	Zip:
Phone No.:		
E-Mail Address:		
If selected, I would be representing (s	select one):	
	,	
Business (please describ	be)	
Group or Organization	(please describe)	
Other (please describe)		
Please describe your main reason for	r seeking membership on the Co	mmunity Advisory Group.
I am submitting this request to become a magnetic Road study. I understand that as a CAG magnetic representative). I am aware that this community study process. IDOT is operating under a souther study activities. (2) to assist IDOT in the Road intersection (3) to be willing to step downk can proceed in a timely manner.	ember it is my responsibility: (1) to atte nitment will require attendance at three schedule for this study and CAG meetin the planning and design efforts related	end all CAG meetings (or send weekday meetings held throughout the ngs will be scheduled to coincide with to improving the IL 173 at Keystone
I understand that in order to function effectivariety of interests in the community and munderstand, therefore, that my submittal of	nay limit the number of members who r	represent similar interests/entities. I
Signature:		Date:
Please complete this form either online, by and emailing it to LL173KeystoneProject@g	mailing it to the address provided on the	ne back of this form, or by scanning

IL173Keystone.com

IDOT on or before July 1, 2024.

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www.IL173Keystone.com

fold here	
	place stam here
Illinois Department of Transportation Bureau of Programming Attn: Valentina DeFex, PE	
201 Center Court Schaumburg, IL 60196	
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