

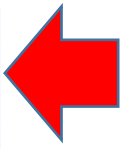
Printing Instructions

Comment Card Image Files:

The survey form is available in a two-page PDF format that can be opened and printed using the Adobe Acrobat® Reader®. It is important to customize the image files as per instructions below before printing them.

Instructions for Customizing Image Files:

- 1) On the AGENCY DISCLOSURE STATEMENT page, “Responses should be directed to:” your project. The default address is USACE – IWR because an address is required to obtain the OMB approval. “USACE – IWR, 7701 Telegraph RD, Alexandria VA 22315” should be replaced by your project name and project address as per instructions below.

AGENCY DISCLOSURE STATEMENT	OMB Control #:0710-0019, Exp: 02/28/2023						
The public reporting burden for this collection of information, 0710-0019, is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil . Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.							
PLEASE DO NOT RESPOND TO THE ABOVE ADDRESS Responses should be directed to:							
<table border="1"><tr><td>Natural Resources Support Program</td></tr><tr><td>USACE - IWR - Casey Building</td></tr><tr><td>7701 Telegraph RD</td></tr><tr><td>Alexandria VA 22315</td></tr></table>	Natural Resources Support Program	USACE - IWR - Casey Building	7701 Telegraph RD	Alexandria VA 22315		<table border="1"><tr><td>Replace with your Project Name Address City, State, ZIP Code</td></tr></table>	Replace with your Project Name Address City, State, ZIP Code
Natural Resources Support Program							
USACE - IWR - Casey Building							
7701 Telegraph RD							
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- 2) Please type in “Recreation Area” (or Visitor Center) name and “Project” name. You may select the survey protocol, and type in the date.

US Army Corps of Engineers

Visitor Comment Card

We would like to know about your visit. **Your response is voluntary and not required.** This information will be used to improve the quality of information, facilities, and services at this recreation area.

OMB Control #: 0710-0019 Exp: 02/28/2023

Scheduled Survey:
 Day-Use
 Camping
 All Visitors

Other Protocols:
 Solicited
 Self-Service
 Other

Today's Date: ___/___/___
(MM DD YYYY)

Please help us serve you better on future visits to:

Recreation Area: _____ **Project:** _____

Previous visits to this recreation area:
 1. Is this your first visit to this recreation area?
 (Choose one) Yes No
 2. If no, how many other times have you visited this area in the last 12 months? _____ (Enter number)

Use of park facilities at this area:
 Did you do any of the following *at this recreation area during your current visit?* (Check all that apply)
 Stay overnight in campground Use restrooms or showers
 Use swimming beach Use a recreational trail
 Use picnic facilities Use boat or facilities at a marina
 Launch a boat Other _____

How did you hear about this recreation area?
 (check all that apply)
 Family/Friend Map/brochure www.corpslakes.us
 www.recreation.gov www.reserveamerica.com
 Other website _____ Highway/Road Signs
 info/staff at local business Info/staff at local motel
 Newspaper/magazine article School class/program
 Welcome center/chamber of commerce

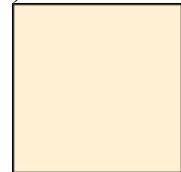
Visitor fees:
 1. Did you use a Senior Pass, Access Pass or Annual Day-Use Pass to offset the fees charged at this area?
 (Choose one) Yes No Does Not Apply
 2. Did you pay a fee to enter or use this area during your current visit? (Choose one) Yes No Not Sure

About yourself:
 1. Home postal or ZIP code: _____ (write in)
 (Choose one for each item below)
 2. You live in: U. S. Canada Mexico Other
 3. Age: Under 25 25-44 45-61 62+
 4. Gender: Female Male
 5. Are you Hispanic or Latino? Yes No
 6. What is your Race? (Mark one or more)
 American Indian or Alaska Native Asian
 Black or African American White
 Native Hawaiian or other Pacific Islander

Recommended Paper:

Each comment card will require one 8-½ by 11-in. sheet of paper or card stock. Card stock is recommended because it gives a professional look to the printed comment card, and its rigidity makes it more convenient for the ranger to administer and the visitor to fill out. Card stock is readily available at office supply and department stores.

- o **Size:** 8-½ by 11-in.
- o **Weight:** 90-to-110 lb card stock (standard printer paper is typically 20-lb wt)
- o **Color:** Readability may vary with the background color of the card stock. Ivory or cream-colored card stock provides excellent contrast against the black text, making it easy to read.




Printing Procedure:

- o Open the customized comment card image file using Adobe Acrobat® Reader®.
- o Load 8-½ by 11-in. card stock into the printer supply tray.
- o The first page of the image file contains a message of thanks to the visitor and a required OMB survey notice. Print this page on one side of the card stock. **TIP:** The survey form is formatted to print to within ¼ inch of the edge of the card stock. When printing, ensure

that the “Page Scaling” option is set to “none”. Choosing any other value will cause the document to be reformatted for printing. This may result in a less desirable printed form.

- Remove the printed card stock, flip it end-for-end (top to bottom) and reinsert into printer supply tray.
- Then print the second page of the PDF file, then check to ensure that the two sides are oriented correctly relative to each other.

TIP: Test print both sides of one card to ensure that the front and back sides of the card are correctly oriented relative to each other as pictured below. To confirm, fold the card in half so that the survey side is hidden from view inside the fold. Orient so the thank you message is visible and readable. You should now be able to open the card so that the survey is readable without having to rotate the card 180°.




Thank You!

US Army Corps of Engineers

Your thoughtful feedback today will help make future visits here more enjoyable and worthwhile for everyone.

Are you interested in learning more about recreation opportunities on Corps of Engineers lakes?

Visit our website at www.Corpslakes.us



Visitor Comment Card

We would like to know about your visit. Your response is voluntary and not required. This information will be used to improve the quality of information, facilities, and services at this recreation area.

OMB Control #: 0710-0019 Exp: 02/28/2023

Scheduled Survey:

 Day-Use
 Camping
 All Visitors

Other Protocols:

 Solicited
 Self-Service
 Other

Today's Date: (MM DD YYYY)

Recreation Area: _____

Project: _____

Previous visits to this recreation area:

1. Is this your first visit to this recreation area? (Choose one) Yes No

2. If no, how many other times have you visited this area in the last 12 months? _____ (Enter number)

Use of park facilities at this area:

Did you do any of the following at this recreation area during your current visit? (Check all that apply)

Stay overnight in campground Use restrooms or showers

Use swimming beach Use a recreational trail

Use picnic facilities Use boat or facilities at a marina

Launch a boat Other _____

How did you hear about this recreation area?

(check all that apply)

Family/Friend Map/brochure www.corpslakes.us

www.recreation.gov www.reserveamerica.com

Other website Highway/Road Signs

Info/staff at local business Info/staff at local motel

Newspaper/magazine article School class/program

Welcome center/chamber of commerce

Visitor fees:

1. Did you use a Senior Pass, Access Pass or Annual Day-Use Pass to offset the fees charged at this area? (Choose one) Yes No Does Not Apply

2. Did you pay a fee to enter or use this area during your current visit? (Choose one) Yes No Not Sure

About yourself:

1. Home postal or ZIP code: _____ (write in)

(Choose one for each item below)

2. You live in: U. S. Canada Mexico Other

3. Age: Under 25 25-44 45-61 62+

4. Gender: Female Male

5. Are you Hispanic or Latino? Yes No

6. What is your Race? (Mark one or more)

American Indian or Alaska Native Asian

Black or African American White

Native Hawaiian or other Pacific Islander

For your current visit, please rate each of the following: (Check one box for each item)

Item	Very Good	Good	Not Good Not Poor	Poor	Very Poor	Does Not Apply
Facilities:						
Suitability of park facilities for my recreational equipment and activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restroom cleanliness and availability of conveniences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appearance of park grounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequacy of signs providing directions and information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking space availability during this visit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition of roads and parking areas in the park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees:						
Availability of park rangers and staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Helpfulness of park rangers and staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Setting:						
Attractiveness of surrounding scenery and landscape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of land and water resources for my activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall:						
Waiting times needed to access park facilities and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling of safety and security in the park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Value received for any visitor fees paid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall satisfaction with your visit to this area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What **improvements** would you like to see in this area? (Describe. **Do not provide personally identifiable information (PII)**)

What did you **like most** about this area? (Describe. **Do not provide personally identifiable information (PII)**)

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