

**DCS' Natural Gas Exploration and Production (NGE&P) Health and Community Impacts Survey
Multi-Household Member Sheet**

TO: DCS P.O. Box 147, Milanville, PA 18443 TODAY'S DATE _____ Page # ___ of total ___ pages

Multi-Household Group - ID _____

Coordinator's Name _____

Phone(s) _____ Best email _____

Address _____

Town _____ State _____ Zip _____

Member Households of your Multi-household Group - Please list at least one contact person per household. If there are more than 5, please use another sheet and number the pages.

Are these Households adding into an existing Multi-Household Group? Yes ___ No ___

1- Household ID _____

Name _____

Phone(s) _____ Best email _____

Address _____

Town _____ State _____ Zip _____

2 - Household ID _____

Name _____

Phone(s) _____ Best email _____

Address _____

Town _____ State _____ Zip _____

3 - Household ID _____

Name _____

Phone(s) _____ Best email _____

Address _____

Town _____ State _____ Zip _____

4 - Household ID _____

Name _____

Phone(s) _____ Best email _____

Address _____

Town _____ State _____ Zip _____

5 - Household ID _____

Name _____

Phone(s) _____ Best email _____

Address _____

Town _____ State _____ Zip _____

For all Survey instructions see DamascusCitizensATSDR.org You can always call 845-252-6677
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