Neighborhood Street Reconstruction No. 446A

SPECIAL NEEDS FORM

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Emergency Contact Name: _____

Email Address: _____

How Many People in Your Home: _____

Describe Special Needs: _____

_____

_____

_____

_____

_____

_____

This information will be given to Fred Kappel who is the Senior Project Manager for the project and he will inform contractors of residents with specific needs.

Please complete this information if you or a neighbor is homebound, Disabled, requires dialysis treatments, or have other critical concerns.

Please complete this form, mail/fax it to the following:

Fred Kappel, P.E., Senior Project Engineer
City of Houston c/o Ratnala & Bahl, Inc.
11767 Katy Freeway, Ste. 510
Houston, TX 77079
Office: 281-759-6400
Fax 281-759-6466

fkappel@ratnala-bahl.com