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|  <p>NEW HAMPSHIRE DEPARTMENT OF Environmental Services</p> | For DES Use: Record # _____ Date received _____ |
| | <p>PUBLIC RESPONSE COVER SHEET FORM</p> |

DATE: _____

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

ORGANIZATION: _____

Name of the TMDL you are responding to: _____

| HOW TO SUBMIT YOUR COMMENTS TO DES | | | |
|---|--|--|--------------|
| By Fax | By E-Mail | By Mail | Questions? |
| TMDL Program 603-271-7894 | TMDL@des.nh.gov . or visit our website at http://des.nh.gov/organization/divisions/water/wmb/tmdl/index.htm | TMDL Program New Hampshire Department of Environmental Services PO Box 95 Concord, NH 03302-0095 | 603-271-5448 |

PLEASE ATTACH THIS FORM AS THE COVER SHEET TO YOUR COMMENTS