

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

**SUGGESTIONS AND COMMENTS
PLANS PREPARATION MANUAL**

**NAME OF FIRM OR
FDOT DEPARTMENT:**

PHYSICAL ADDRESS:

**NAME OF PERSON
RESPONSIBLE FOR
SUGGESTIONS OR
COMMENTS:**

EMAIL ADDRESS:

TELEPHONE NO.:

FAX NO.:

**SUGGESTIONS
OR COMMENTS:**

(Comments or Suggestions may be attached as marked up copies of pages from the manual)

Please complete the requested information on a copy of this sheet and return to:

**FLORIDA DEPARTMENT OF TRANSPORTATION
ROADWAY DESIGN OFFICE
MAIL STATION 32
605 SUWANNEE STREET
TALLAHASSEE, FLORIDA 32399-0450
FAX NUMBER (850) 414-5261**

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