

State of New York
Lake Champlain (Crown Point) Bridge Closure
Impact Statement

Name of Individual / Organization / Entity

Point of Contact

Address _____

City/Town _____ **State** _____

Daytime Phone Number _____ **Mobile** _____

Email address _____

Impact indefinite closure of Lake Champlain Bridge (Please check appropriate area[s] of concern and provide explanation):

Agricultural

Explain

Commercial

Explain

Commute

Explain

Emergency Services

Explain

(over)

Employment

Explain

Financial

Explain

Medical

Explain

Other

Explain

Additional Comments:

Submit to: New York State Emergency Management Office
1220 Washington Avenue
Building 22, Suite 101
Albany, NY 12226-2251

Fax: 518.322.4978

Email: postmaster@semo.state.ny.us