



*Defining a Clear Vision*

**3-Day Charette  
February 6 - 8, 2012  
Spring Lake Municipal Building  
Spring Lake, NC 28390**

\_\_\_\_\_  
Last Name | First Name | Middle Initial

\_\_\_\_\_  
Street

\_\_\_\_\_  
City | State | Zip

\_\_\_\_\_  
Phone | Fax

\_\_\_\_\_  
E-mail

1. Do you plan on attending any portion of the charette?

yes  no

2. Do you plan on attending the Wednesday portion of the charette?

yes  no

3. Do you support the initiative of development and revitalization within the Town?

yes  no

4. What areas or projects do you think need the most attention?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Top three (3) items you would like to see happen with Main Street/downtown

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Top three (3) items you think are critical by the year 2020

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\_\_\_\_\_  
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