

Comments form

Gender:				
Title:				
Name: <i>(Please do not fill this field if you would like to remain anonymous)</i>				
Please mark how you wish to be contacted	<input type="checkbox"/> Post	<input type="checkbox"/> Telephone	<input type="checkbox"/> E-mail	<input type="checkbox"/> Others
	Address:	Contact number:	E-mail address:	Please specify:
Preferred language for communication	<input type="checkbox"/> Armenian	<input type="checkbox"/> Russian	<input type="checkbox"/> English	<input type="checkbox"/> Others
				Please specify:
Comments to the Draft Final ESIA Report				
<input type="checkbox"/> I request you not to disclose my identity to third parties without my previous written consent				
Signature: <i>(Please do not fill this field if you would like to remain anonymous)</i>				
Local:				
Date:				