

## Surveyor Agreement Form

Community: \_\_\_\_\_

County: **Clermont County**

Benefit Area: \_\_\_\_\_

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I, the undersigned, when conducting a survey of the above-listed benefit area, agree to:

- Use the following standard language –

My name is \_\_\_\_\_. I am working with \_\_\_\_\_ to collect data needed to complete an application for a community development grant. To do this, we must conduct a survey of the area. The information gathered by the survey will be confidential and only will be viewed by the local program administrator and the funding agency. The survey only requires you to indicate your approximate total household annual income (before taxes) for the current year and the number of persons residing in your household. Are you willing to participate in the survey?

- Use the applicant's prescribed survey methodology to randomly and evenly sample the entire benefit area;
- Use the ***Confidential Income Survey*** form and keep the information collected confidential; and
- Report information collected exactly as the respondents indicated.

Name

Signature

Date

\_\_\_\_\_

\_\_\_\_\_

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