**Please fill out this form to receive your free "do it yourself" filter fan.**

Puget Sound Clean Air Agency will use information collected on this form to evaluate the filter fan program and our community work. It will not be shared with anyone outside the Puget Sound Clean Air Agency.

**What neighborhood do you live in?**

**What is your age?**

18-34

35-54

55-70

70+

**Were you able to receive filter fan instructions in your native language?**

Yes

No

**If no, what is your native language?**

**We are always reviewing the filter fan program and your feedback can help us improve. May we contact you later to see if the filter fan helped your family?**

Yes

No

**If yes, please provide this additional information:**

Name:

**What is the best way to contact you?**

Email:

Phone:

Mail:

Thank you for your help. We appreciate you evaluating the filter fan program and helping improve it for others in our community.

If you have any questions please contact us at [communications@pscleanair.gov](mailto:communications@pscleanair.gov).

Language interpretation services are available when calling 206-343-8800.