

# Feedback Form

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Thank you for reading our Environmental, Health and Safety(EHS) Report 2004/05. Please take a moment to give us your valuable feedback and return to us via post or email before 30 September 2006.

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|-----------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. What is your overall view of the Report?               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                           | Very Good                | Good                     | Adequate                 | Poor                     | Very poor                |
| 2. Did you find the Report information/useful?            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                           | Very Useful              | Useful                   | Adequate                 | Partly                   | No                       |
| 3. Did you find the Report easy to understand?            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                           | Very Easy                | Easy                     | Adequate                 | Partly                   | No                       |
| 4. Did you think the presentation of the Report is clear? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                           | Very Clear               | Clear                    | Adequate                 | Partly                   | No                       |

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|                                                         | Major Aspects* | A                        | B                        | C                        | D                        | E                        | F                        | G                        | H                        | I                        |
| 5. Which aspect of the Report did you find most useful? |                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please specify \_\_\_\_\_

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| 6. Which aspect of the Report did you find least useful? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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|----------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 7. Which aspect(s) of the Report would you like more information on? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| 8. What improvement(s) would you recommend for our next Report? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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Please specify \_\_\_\_\_

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|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------------|
| *A. Supporting Sections (Messages from the Chairman and the Director, About this Report, Looking Ahead ) | *B. Business Overview, Vision, EHS Management Structure | *C. EHS Aspects, and Performance Highlights |
| *D. Environmental Performance Overview                                                                   | *E. Health, Safety and Social Performance Overview      | *F. Stakeholder Engagement                  |
| *G. 3 Case Studies                                                                                       | *H. Targets and Initiatives for 2005/06 & Beyond        | *I. Verification Statement and Feedback     |

## Feedback Form

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9. What group(s) do you belong to? (you can tick more than one box)

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|------------------------------------------------------|----------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Owner/Tenant in HA flat     | <input type="checkbox"/> Environmental Group       | <input type="checkbox"/> Education/Academic              |
| <input type="checkbox"/> Government Department       | <input type="checkbox"/> Other Public Organization | <input type="checkbox"/> Professional Engineer/Scientist |
| <input type="checkbox"/> Other, please specify _____ |                                                    |                                                          |

10. Would you like to receive HA future EHS Reports?  Yes  No

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

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