

# Transportation Survey

Name: \_\_\_\_\_

Home address: \_\_\_\_\_

City, State \_\_\_\_\_ Home ZIP: \_\_\_\_\_

Work address (building/mailstop): \_\_\_\_\_

City, State \_\_\_\_\_ Work ZIP: \_\_\_\_\_

**1. How many miles do you travel to work? (one way)**

**2. On average, how many minutes does it take to:**

Get to work? \_\_\_\_\_

Get home? \_\_\_\_\_

**3. When do you typically:**

Arrive at work? \_\_\_\_\_

Depart work? \_\_\_\_\_

**4. How many days a week do you arrive and depart at the same time?**

**5. Do you pick up or drop off children/family members on your commute?**

**6. Do you work:**

Full time

Part time

Compressed work week

**7. How did you travel to work each day?** (pick a typical week)

*Pick the number that matches the Commute Solution/mode, or why you did not commute for each day of the week and enter the numbers in the boxes below. If you used more than Commute Solution/mode for the trip to work, choose the number that was the largest segment of your trip.*

	<u>Commute Solution or Mode</u>	<u>Reasons for not commuting to work</u>
<input type="checkbox"/> Monday	1. Driving alone	10. Teleworked
<input type="checkbox"/> Tuesday	2. Public transit	11. Commuted to another location
<input type="checkbox"/> Wednesday	3. vanpool (# members ____)	12. Traveling on business
<input type="checkbox"/> Thursday	4. carpool (# members ____)	13. Day off
<input type="checkbox"/> Friday	5. Bicycle	14. Compressed work week day off
<input type="checkbox"/> Saturday	6. Walk	15. Other day off (vacation, sick)
<input type="checkbox"/> Sunday	7. Bike/Bus	
	8. Motorcycle	
	9. Special transit services for the disabled	

**8. If you normally use a Commute Solution, what motivated you to do so?** (check up to three choices)

- |   |   |
|---|---|
| <input type="checkbox"/> Cost savings                 | <input type="checkbox"/> Save wear and tear on personal vehicle |
| <input type="checkbox"/> Stress reduction             | <input type="checkbox"/> Parking cash out                       |
| <input type="checkbox"/> Guaranteed Ride Home program | <input type="checkbox"/> Preferential parking spaces            |
| <input type="checkbox"/> Time savings                 | <input type="checkbox"/> Flextime program                       |
| <input type="checkbox"/> Convenience                  | <input type="checkbox"/> Showers and clothing lockers           |
| <input type="checkbox"/> Prize drawings               | <input type="checkbox"/> Other cash incentives                  |
| <input type="checkbox"/> Improve air quality          | <input type="checkbox"/> Other                                  |
- 

**9. Before you used a Commute Solution, how did you get to work?**

(Pick the numbers from question 7 that matches your previous commute mode and enter it in the space provided)

\_\_\_\_\_

**Answer #10, #11, #12, #13, and #14 only if you drive alone to work.**

**10. What is your main reason for driving alone to work?** (check one)

- |  |   |
|--|---|
| <input type="checkbox"/> Need my car at work for company business  | <input type="checkbox"/> Cannot get home in an emergency    |
| <input type="checkbox"/> Need my car at work for personal business | <input type="checkbox"/> Live close to work                 |
| <input type="checkbox"/> Parking is free or inexpensive            | <input type="checkbox"/> Don't have anyone to ride with     |
| <input type="checkbox"/> Need to run errands before or after work  | <input type="checkbox"/> Don't like to depend on others     |
| <input type="checkbox"/> Prefer to drive my own car                | <input type="checkbox"/> Irregular work schedule            |
| <input type="checkbox"/> Need to transport my children             | <input type="checkbox"/> Anything else takes too much time  |
| <input type="checkbox"/> No reasonable transit option              | <input type="checkbox"/> Poor bicycle and pedestrian access |
| <input type="checkbox"/> Need a specially equipped vehicle         | <input type="checkbox"/> Other _____                        |
| <input type="checkbox"/> Safety concerns                           | _____   |

**11. What would encourage you to share a ride to work in a carpool?** (check up to four choices)

- |  |  |
|--|--|
| <input type="checkbox"/> Lower parking rates for carpools                  | <input type="checkbox"/> Prizes, drawings, contests, etc. for carpoolers |
| <input type="checkbox"/> Higher parking rates for those driving alone      | <input type="checkbox"/> More flexible work hours                        |
| <input type="checkbox"/> Reserved parking close to the building            | <input type="checkbox"/> More fixed work hours                           |
| <input type="checkbox"/> Free parking for carpools                         | <input type="checkbox"/> Use of company car during work day              |
| <input type="checkbox"/> Company subsidy for carpoolers                    | <input type="checkbox"/> Child care facilities at or near the work site  |
| <input type="checkbox"/> Help finding people with whom to carpool          | <input type="checkbox"/> Other _____                                     |
| <input type="checkbox"/> Change of work shift                              | <input type="checkbox"/> I do not want to carpool to work at this time   |
| <input type="checkbox"/> Guaranteed Ride Home in the event of an emergency |  |

**12. What would encourage you to ride a vanpool to work?** (check up to four choices)

- |  |  |
|--|--|
| <input type="checkbox"/> Lower parking rates for vanpools                  | <input type="checkbox"/> Prizes, drawings, contests, etc. for vanpoolers |
| <input type="checkbox"/> Higher parking rates for those driving alone      | <input type="checkbox"/> More flexible work hours                        |
| <input type="checkbox"/> Reserved parking close to the building            | <input type="checkbox"/> More fixed work hours                           |
| <input type="checkbox"/> Free parking for vanpoolers                       | <input type="checkbox"/> Use of van when needed during work day          |
| <input type="checkbox"/> Company subsidy for vanpoolers                    | <input type="checkbox"/> Child care facilities at or near the work site  |
| <input type="checkbox"/> Help finding people with whom to vanpool          | <input type="checkbox"/> Other _____                                     |
| <input type="checkbox"/> Change of work shift                              | <input type="checkbox"/> I do not want to vanpool to work at this time   |
| <input type="checkbox"/> Guaranteed Ride Home in the event of an emergency |  |

**13. What would encourage you to ride a bus to work?** (check up to four choices)

- Bus stop located close to work site
- Sale of bus passes at work
- Company subsidy for bus riders
- Change of work shift
- Guaranteed Ride Home in the event of an emergency
- Prizes, drawings, contests, etc. for bus riders
- More flexible work hours
- More fixed work hours
- Bus route and scheduling information
- Child care facilities at or near the work site
- Use of company car during work day
- Other \_\_\_\_\_
- I do not want to ride a bus to work at this time

**14. What would encourage you to ride a bicycle to work?** (check up to four choices)

- Secure, convenient bicycle parking racks
- Bicycle lockers
- Showers and clothing lockers
- Company subsidy for bicycle riders
- Seminars on riding safely in traffic
- Guaranteed Ride Home in the event of an emergency
- Prizes, drawings, contests, etc. for bus riders
- Bicycle route maps
- Other \_\_\_\_\_
- I do not want to ride a bicycle to work at this time

**15. If you normally drive alone, would you consider using a Commute Solution on an occasional basis?**     Yes     No

If yes, what modes?

- Carpool driver
- Carpool rider
- Vanpool driver/rider
- Transit
- Walk
- Bicycle
- Telework
- Other \_\_\_\_\_

**Additional Comments:**

