## Cranbury Road Area Bicycle and Pedestrian Mobility Alternatives Study Public Comment Survey

This survey asks you questions about how you get around for your daily travel, with a focus on how often you bicycle and walk. Even if you never walk or bicycle, we are still very interested in your responses. Please be sure to fill out your name, street address, and contact information at the end of the survey.

| GE  | NERAL TRAVEL   |     |   |
|-----|--|-----|---|
| 1.  | Which categories best describe you? (check all that apply)   | C   | What modes of transportation do you typically use for your  |
|     | ☐ Working for pay OUTSIDE the home   |     | commute? (please choose no more than three)   |
|     | ☐ Working for pay INSIDE the home  |     | ☐ Bike ☐ Bike & Transit   |
|     | ☐ A homemaker  |     | □Walk □Drive □Carpool □Transit  |
|     | ☐ Going to school  |     | ·   |
|     | ☐ Looking for work   |     | Other (please specify)  |
|     | ☐ Retired ☐ Other (please specify)   |     |   |
| W   | ALKING   |     |   |
| 3.  | In the last year, how often did you walk (for commuting,   | 4.  | Why do you walk? (check all that apply)   |
|     | recreation, errands, etc.)?  |     | ☐ For exercise/health reasons ☐ For shopping/errands  |
|     | <ul><li>□ Never</li><li>□ Less than once a month □ Less than once a week</li></ul>                 |     | ☐ To get to school/work ☐ To get to transit   |
|     |  |     | ☐ For pleasure ☐ I don't walk   |
|     | $\square$ Less than once a day $\square$ Nearly every day  |     | ☐ Other (please specify)  |
| 5.  | What three (3) destinations would you like to be able to walk to using the Cranbury Road corridor? | 6.  | Please identify up to three (3) areas along the Cranbury Road corridor where you think walking conditions should be improved: |
|     | 1)   |     | 1)  |
|     | 2)   |     | 2)  |
|     | 3)   |     | 3)  |
| 6a. | 1)   |     |   |
|     | •  |     |   |
|     | 3)   |     |   |
|     | CYCLING  |     |   |
| 7.  | In the last year, how often did you ride a bicycle?  | 8.  | Please rate your bicycling comfort/skill level:   |
|     | □ Never  |     | ☐ I'm extremely cautious/I only ride on bike paths or sidewalks   |
|     | ☐ Less than once a month   |     |   |
|     | ☐ Less than once a week  |     | ☐ I only bike on neighborhood roads   |
|     | ☐ Less than once a day   |     | ☐ I bike on any road, as necessary to reach my destination  |
|     | ☐ Nearly every day   |     | ☐ I don't know how to bike  |
| 9.  | Why do you bike? (check all that apply)  | 10. | What prevents you from biking more often? (check all that   |
|     | ☐ For exercise/health reasons  |     | apply)  |
|     | ☐ For shopping/errands   |     | ☐ Destinations are too far away ☐ Too many cars/speeding  |
|     | ☐ To get to school/work  |     | $\Box$ Drivers don't share the road $\Box$ I have to carry things   |
|     | ☐ To get to transit  |     | $\square$ No bike paths, lanes or routes $\square$ Not enough time  |
|     | ☐ For pleasure   |     | $\Box$ I travel with small children $\Box$ Lack of secure bicycle parking   |
|     | ☐ I don't bike ☐ Other (please specify)  |     | ☐ Insufficient lighting on streets/paths ☐ Weather ☐ Other (please specify)   |

## Cranbury Road Area Bicycle and Pedestrian Mobility Alternatives Study Public Comment Survey

| 11.  | Please identify your favorite three (3) places to ride a bicycle in the area:  1)  2)  3)     | 11a. Name the reasons why you like biking in these areas:  1) 2) 3)  |
|------|---|--|
| 12.  | Please indicate three (3) areas where you'd like to see more or improved bicycle parking:  1) | <ul> <li>13. Do you ever use your bicycle with transit (trains/bus bike racks)?</li> <li>□Yes → Number of trips per week</li> <li>□No</li> </ul> |
| ADI  | DITIONAL COMMENTS   |  |
| Plea | ase provide any additional comments on the corridor below:                                    |  |
|      |   |  |
|      |   |  |
|      |   |  |
|      |   |  |
|      |   |  |
|      |   |  |
|      |   |  |
| Nan  | ne:   | Email Address:   |
| Add  | lress:  | Phone Number:  |

Thank you for taking the time to complete this survey!

Please Return by Sunday, April 27<sup>th</sup> to:

West Windsor Township
Engineering Department
271 Clarksville Road, P.O. Box 38
West Windsor NJ 08550