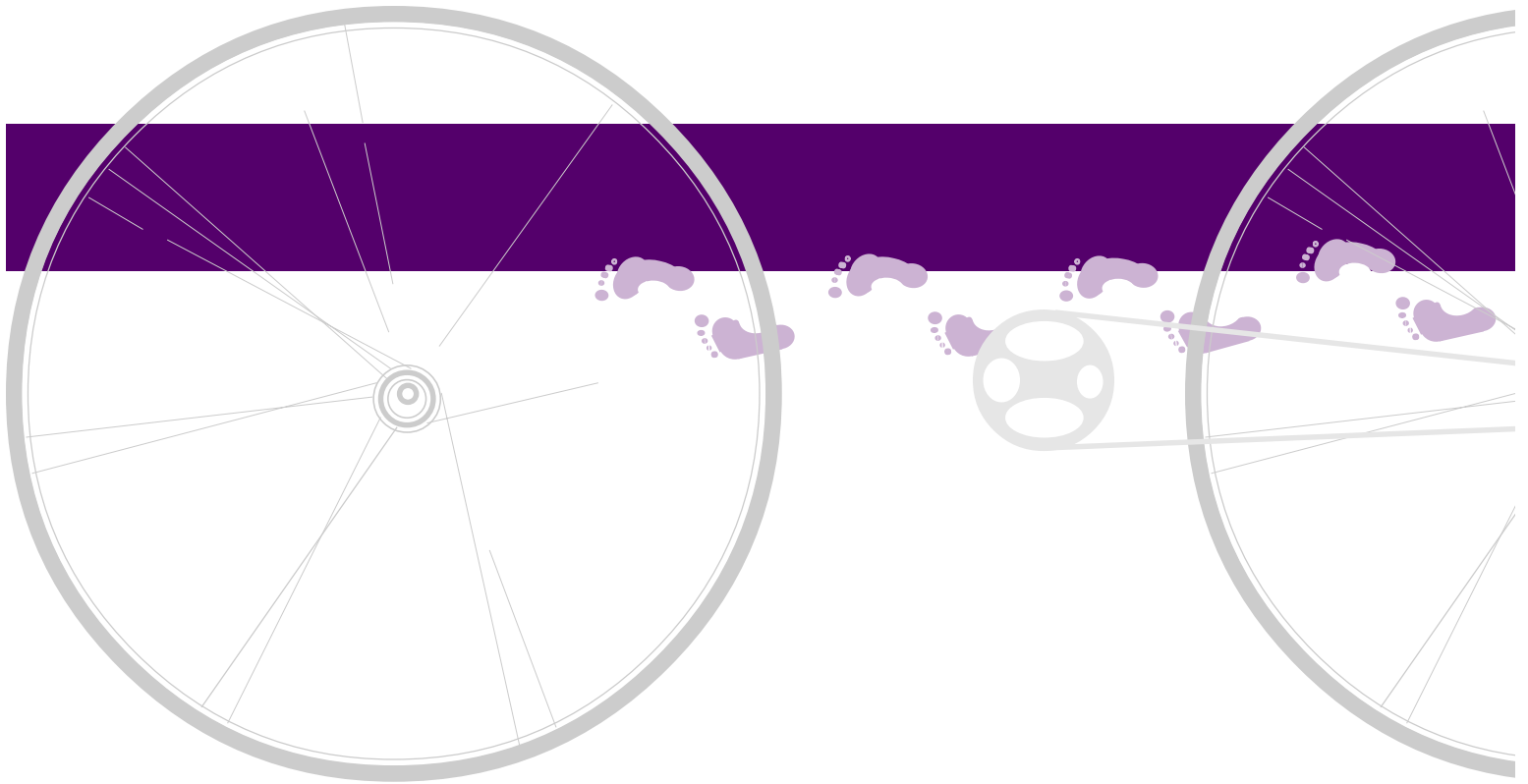


Appendix II



Household Survey Instrument



162 (This page is intentionally left blank.)

I. GENERAL INFORMATION

1. What is the town or city in which you currently reside?

2. What is the county in which you currently reside?

3. What is your ZIP code?

4. In what type of residence do you reside?
 single family home
 town house/condo
 apartment
 mobile home
 college dorm/boarding house
 other (describe): _____
5. Including yourself how many persons live in your household?

_____ persons
6. Please indicate the number of household members in each category:

Numbers should add to the total number of household members given in Question 5.

 ages 0-4
 ages 5-15
 ages 16-20
 ages 21-30
 ages 31-40
 ages 41-50
 ages 51-60
 ages 61-70
 ages 71+
7. How many registered motor vehicles (cars, pickup trucks, motorcycles, etc.) that can be used for commuting purposes are owned by members of your household?

_____ motor vehicles

8. Do you have a driver's license? (*Circle one*)

1. Yes
2. No

9. How far is it from your home to the nearest public transportation (bus stop, light rail station, etc.)? (*Circle one*)

1. No Public Transportation
2. 0-2 blocks (less than 1/8 mile)
3. 3-4 blocks (1/8 to 1/4 mile)
4. 5-8 blocks (1/4 to 1/2 mile)
5. Between 1/2 and 1 mile
6. Between 1 and 2 miles
7. 2 miles or more
8. Don't know

II. WORK TRAVEL

10. Are you currently employed (do any work for pay or profit)? (*Circle one*)

1. Yes
2. No → if "No" go to "Question 26."

11. Are you self employed?

1. Yes
2. No

12. On average, how many *days per week* do you work?

_____ days per week

13. On average, how many paid *hours per week* do you work?

_____ hours per week

14. How frequently do you telecommute (use a telephone or computer to work from home)?

1. Never
2. Sometimes, but less than 4 days per month
3. One day per week
4. 2-3 days per week
5. 5 or more days per week

15. Do you work outside your home?

1. Yes
2. No → if "No" go to "Question 26."

16. Approximately, at what time do you leave home for work?

_____ : _____ am / pm

17. Approximately, at what time do you leave work?

_____ : _____ am / pm

18. How far is your place of work from where you live? (one way) (*Circle one*)

1. Less than ½ mile
2. Between ½ mile and 1 mile
3. Between 1 mile and 2 miles
4. Between 2 miles and 5 miles
5. Between 5 miles and 10 miles
6. Between 10 miles and 20 miles
7. More than 20 miles

19. What is your primary method of transportation for your trips to work during a typical "good weather" week?

Circle one. The primary method of transportation is that which you used most frequently.

1. Drive alone in car or truck
2. Drive car/truck with passenger(s)
3. Passenger in car or truck
4. Motorcycle, scooter, or moped
5. Public transportation (bus, light rail)
6. Taxi
7. Bicycle
8. Walk
9. Other (describe) _____

20. About how much time is usually needed to make this trip? (one way)

_____ minutes

21. How much is your monthly out-of-pocket spending for commuting to work? (including bus fare, gas, parking, etc.)

\$ _____ per month

22. What secondary method of transportation, if any, do you use for your trips to work?

Circle one. Secondary method of transportation is the second most frequently used method of transportation.

1. No secondary method used
3. Drive alone in car or truck
4. Drive car/truck with passenger(s)
5. Passenger in car or truck
6. Motorcycle, scooter or moped
7. Public transportation (bus, light rail)
8. Taxi
9. Bicycle
10. Walk
11. Other (describe): _____

23. If you have ever considered using your *bicycle* for **work** trips, what factors prevent you from doing so or doing as much as you would like?

Write a number in the blank:

- 0 = not a factor,
1 = minor factor,
2 = major factor,
3 = prevents me from using my bicycle.

Never considered using my bike for work trips. → if so, go to "Question 26."

- _____ Physically unable
_____ Time of day
_____ Unable to take bike on public transportation
_____ Lack of secure bike storage at destination
_____ Distance
_____ Weather conditions
_____ Lack of shower/dressing facilities at destination
_____ Hazardous route (gravel, potholes, etc.)
_____ Traffic safety concerns
_____ Lack of personal security (crime)
_____ Lack of off-street bike paths
_____ Lack of shoulders to ride on
_____ Lack of transit connections

- _____ Need a car for job
- _____ No alternative to congested routes
- _____ Other (describe): _____

24. In *good weather* conditions about how often do you make a **work** trip by *bicycle*? (*Circle one*)

1. More than once per week
2. Once per week
3. 2-3 times per month
4. Once per month
5. Less than once per month
6. Never ã if "Never" go to "Question 26."

25. Please indicate approximately what percentage of an average *bicycle work* trip you ride on the following surfaces:

- On a city street with bike lane/
shoulder..... _____%
 - On a city street with no bike lane/
shoulder..... _____%
 - On the shoulder of a road/
highway..... _____%
 - On a road/highway with no
shoulder..... _____%
 - On paved off-street bike path... _____%
 - On unpaved off-street bike path _____%
 - On sidewalk..... _____%
 - Other (describe): _____%
 - Total..... 100%
- ç Not applicable

III. SCHOOL TRAVEL

26. Are you a student?

1. Yes
2. No ã if "No," please skip to "Section IV Utility Trips" on next page.

27. Do you attend school full or part time?

1. Full time
2. Part time

28. How many days per week do you usually attend school/class?

_____ days per week

29. Approximately, at what time do you go to school?

_____ : _____ am / pm

30. Approximately, at what time do you leave school?

_____ : _____ am / pm

31. Approximately how far do you usually travel to attend school/class? (one way)

1. Less than ½ mile
2. Between ½ mile and 1 mile
3. Between 1 mile and 2 miles
4. Between 2 miles and 5 miles
5. Between 5 miles and 10 miles
6. Between 10 miles and 20 miles
7. More than 20 miles

32. What is your primary transportation for most of your trips to school during a typical "*good weather*" week?

Circle one. The primary method of transportation is that which you used most frequently.

1. Drive alone in car or truck
2. Drive car/truck with passenger(s)
3. Passenger in car or truck
4. Motorcycle, scooter or moped
5. Public transportation (bus, light rail)
6. School bus
7. Taxi
8. Bicycle
9. Walk
10. Other (describe): _____

33. About how much time is usually needed to make this trip? (one way)

_____ minutes

34. How much is your weekly out-of-pocket spending for commuting to school? (including bus fare, gas, parking, etc)

\$ _____ per week

35. What secondary method of transportation, if any, do you use for your trips to school?

Circle one. Secondary method of transportation is the second most frequently used method of transportation.

1. No secondary method used
2. Drive alone in car or truck
3. Drive car/truck with passenger(s)
4. Passenger in car or truck
5. Motorcycle, scooter or moped
6. Public transportation (bus, light rail)
7. School bus
8. Taxi
9. Bicycle
10. Walk
11. Other (describe): _____

36. If you have ever considered using your *bicycle* for **school** trips, what factors prevent you from doing so or doing as much as you would like?

Write a number in the blank:

- 0 = not a factor,
 1 = minor factor,
 2 = major factor,
 3 = prevents me from using my bicycle.

Never considered using my bike for school trips. ã if so, please go to "Section IV, Utility Trips."

- _____ Physically unable
- _____ Time of day
- _____ Unable to take bike on public transportation
- _____ Lack of secure bike storage at destination
- _____ Distance
- _____ Weather conditions
- _____ Lack of shower/dressing facilities at destination
- _____ Hazardous route (gravel, potholes, etc.)
- _____ Traffic safety concerns
- _____ Lack of personal security (crime)
- _____ Lack of off-street bike paths
- _____ Lack of shoulders to ride on
- _____ Lack of transit connections

- _____ Need a car for job/school
- _____ No alternative to congested routes
- _____ Other (describe): _____

37. In good weather conditions about how often do you make a **school** trip by *bicycle*? (Circle one)

1. More than once per week
2. Once per week
3. 2-3 times per month
4. Once per month
5. Less than once per month
6. Neverã if "Never" please go to "Section IV, Utility Trips."

38. Please indicate approximately what percentage of an average *bicycle* **school** trip you ride on the following surfaces:

- On a city street with bike lane/shoulder..... _____%
- On a city street with no bike lane/shoulder..... _____%
- On the shoulder of a road/highway..... _____%
- On a road/highway with no shoulder..... _____%
- On paved off-street bike path... _____%
- On unpaved off-street bike path _____%
- On sidewalk..... _____%
- Other (describe): _____%
- Total..... 100%
- ç Not applicable

IV. UTILITY TRIPS

A **utility trip** is one in which you travel to a particular destination (or destinations) for purposes other than work, school or recreation. Examples of these might include trips to a friend's house or running errands. *If you combine a utility trip with a work commute, that entire trip should be considered a work commute.*

For most of the **utility trips** that you made in good weather:

39. What was your primary means of travel?

Circle one. The primary method of transportation is that which you used most frequently.

1. Drove car or truck
2. Passenger in car or truck
3. Motorcycle, scooter or moped
4. Public transportation (bus, light rail)
5. Taxi
6. Bicycle
7. Walk/jog
8. Other (describe): _____

40. What secondary method of transportation, if any, did you use for most of the **utility trips** that you made in *good weather*?

Circle one. Secondary method of transportation is the second most frequently used method of transportation.

1. No secondary method used
3. Drove alone in car or truck
4. Drove car/truck with passenger(s)
5. Passenger in car or truck
6. Motorcycle, scooter or moped
7. Public transportation (bus, light rail)
8. Taxi
9. Bicycle
10. Walk
11. Other (describe): _____

41. On average, how far did you travel for a typical utility trip? (one-way distance from your starting point or last stopping place to the destination)

1. Less than ½ mile
2. Between ½ mile and 1 mile
3. Between 1 mile and 2 miles
4. Between 2 miles and 5 miles
5. Between 5 miles and 10 miles
6. Between 10 miles and 20 miles
7. More than 20 miles

42. What is the average *travel time* of a typical utility trip? (one way)

_____ minutes

43. If you have ever considered using your *bicycle* for **utility** trips, what factors prevent you from doing so or doing as much as you would like?

Write a number in the blank:

- 0 = not a factor,
1 = minor factor,
2 = major factor,
3 = prevents me from using my bicycle.

☐ Never considered using my bike for utility trips. ⌚ if so, go to "Question 46."

- _____ Physically unable
_____ Time of day
_____ Unable to take bike on public transportation
_____ Lack of secure bike storage at destination
_____ Distance
_____ Weather conditions
_____ Lack of shower/dressing facilities at destination
_____ Hazardous route (gravel, potholes, etc.)
_____ Traffic safety concerns
_____ Lack of personal security (crime)
_____ Lack of off-street bike paths
_____ Lack of shoulders to ride on
_____ Lack of transit connections
_____ Need a car for purpose of trip
_____ No alternative to congested routes
_____ Other (describe): _____

44. In *good weather* conditions about how often do you make a **utility** trip by *bicycle*? (*Circle one*)

1. More than once per week
2. Once per week
3. 2-3 times per month
4. Once per month
5. Less than once per month
6. Never ⌚ if "never," go to "Question 46."

45. Please indicate approximately what percentage of an average bicycle **utility** trip you ride on the following surfaces:

- On a city street with bike lane/
shoulder..... %
 - On a city street with no bike lane/
shoulder..... %
 - On the shoulder of a road/
highway..... %
 - On a road/highway with no
shoulder..... %
 - On paved off-street bike path... %
 - On unpaved off-street bike path %
 - On sidewalk..... %
 - Other (describe):..... %
 - Total..... 100%
- ☐ Not applicable

V. TRANSPORTING CHILDREN

46. Do you have school age children living with you?

- 1. Yes
- 2. No ☐ if "No" go to "Section VI, Recreational / Exercise Trips."

47. What is the primary method of transportation by which your youngest child commutes to school?

- 1. Walking or biking
- 2. School Bus
- 3. Driven by household member
- 4. Car pooling
- 5. Public transportation

48. How far is it from your home to your youngest child's school?

- 1. 1-2 blocks (less than 1/8 mile)
- 2. 3-4 blocks (1/8 to 1/4 mile)
- 3. 5-8 blocks (1/4 to 1/2 mile)
- 4. Between 1/2 and 1 mile
- 5. Between 1 and 2 miles
- 6. 2 miles or more
- 7. Don't know

VI. RECREATIONAL/EXERCISE TRIPS

Some **Recreational/Exercise** activities begin from home, work or school and do not involve first traveling to another location. These include all activities that do not involve driving or using public transportation. An example would be roller-blading during your lunch hour from your office, or walking to the park from your home for an activity. Many times these activities may include utility trips or commutes as well. In that case, the ride should be considered a utility trip or a work or school commute.

Considering your most frequent **recreational/exercise activity where the activity itself originated from home, work or school in good weather**:

49. What was your primary recreation/exercise activity? (Circle one)

- 1. Bicycle
- 2. Walk
- 3. Running
- 4. In-line skating
- 5. Other (describe): _____

50. On average, how much time does this trip take? (round trip)

_____ minutes

51. What facility do you use? (circle all that apply)

- 1. Park
- 2. Street
- 3. Sidewalk
- 4. Paved shared use path
- 5. Unpaved path
- 6. Other: _____

Other **recreation/exercise** activities involve first traveling to a remote location. An example would be if you took a bus into the mountains to hike.

(Continued on Next Page)

For most of the *trips to a location for recreation/exercise activities* in *good weather* conditions:

52. What means did you use to get to the location of the recreational or exercise activity?

1. Car/truck
2. Bike
3. Skate
4. Walk
5. Bus/public transportation
6. Train
7. Other (describe): _____

53. Where do you typically go for these trips?

1. Health club
2. Resort
3. City or county open space/park
4. State park
5. National forest
6. National park/monument
7. Indoor amusement (e.g. arcade, etc.)
8. Mall
9. Other (describe): _____

54. What recreational/exercise activity do you typically engage in when you arrive at the destination of these trips?

1. Hike/Walk
2. Bicycle
3. Swim
4. Health club activities
5. Skate
6. Picnic
7. Sports
8. Other (describe): _____

55. At the remote location do you typically:

1. Spend half a day or less
2. Spend between a half a day and a full day
3. Camp for one night or more
4. Stay in a hotel/motel for one night or more

56. How much money do you typically spend at the remote location?

\$ _____

57. If you have ever considered using your *bicycle* for any kind of **recreation/exercise** activity that began at home, or for an activity that included trips to a location, what factors prevent you from doing so or doing as much as you would like? Write a number in the blank:

- 0 = not a factor,
1 = minor factor,
2 = major factor,
3 = prevents me from using my bicycle.

Never considered using my bicycle for recreation/exercise trips. ã if so, go to "Question 60."

- _____ Physically unable
_____ Unable to take bike on public transportation
_____ Lack of secure bike storage at destination
_____ Distance
_____ Weather conditions
_____ Lack of shower/dressing facilities at destination
_____ Hazardous route (gravel, potholes, etc.)
_____ Traffic safety concerns
_____ Lack of personal security (crime)
_____ Lack of off-street bike paths
_____ Lack of shoulders to ride on
_____ Lack of transit connections
_____ No alternative to congested routes
_____ Other (describe): _____

58. In *good weather* conditions about how often do you make a **recreation/exercise** trip by bicycle? (*Circle one*)

1. More than once per week
2. Once per week
3. 2-3 times per month
4. Once per month
5. Less than once per month
6. Never ã if "Never," go to "Question 60."

59. Please indicate approximately what percentage of an average *bicycle recreation/exercise* trip you ride on the following surfaces:

- On a city street with bike lane/
shoulder..... %
 - On a city street with no bike lane/
shoulder..... %
 - On the shoulder of a road/
highway..... %
 - On a road/highway with no
shoulder..... %
 - On paved off-street bike path... %
 - On unpaved off-street bike path %
 - On sidewalk..... %
 - On a general use trail..... %
 - On a mountain bike only trail... %
 - Other (describe): _____ %
 - Total..... 100%
- Not applicable

63. Where would you most prefer *children* receive their bicycle safety training?
(Circle one)

1. School by teacher
2. School by police/fire department
3. Parks and recreation district
4. Parents
5. Pamphlets and brochures
6. Community organizations (e.g. Boy/Girl Scouts)

64. What do you believe the severity of a typical bicycle crash on the following surfaces is likely to be?

	Minor	Medium	Severe	Fatal
Paved bike path	1	2	3	4 5
Street	1	2	3	4 5
Unpaved Trail	1	2	3	4 5
Mountain terrain	1	2	3	4 5

65. How likely do you think a bicycle accident is on the following surfaces (on any given ride)?

	Unlikely	Medium	Likely
Paved bike path	1	2 3	4 5
Street	1	2 3	4 5
Unpaved Trail	1	2 3	4 5
Mountain terrain	1	2 3	4 5

66. Has anyone in your household suffered a "severe" or worse injury due to a bicycle crash?

1. Yes
2. No

67. How often do you wear a bicycle helmet when riding on the following terrain?

	Never	Medium	Always
Paved Bike Path	1	2 3	4 5
Street	1	2 3	4 5
Unpaved Trail	1	2 3	4 5
Mountain Terrain	1	2 3	4 5

I never bicycle → go to "Question 78."

VII. BICYCLE SAFETY

60. If you have young children, how often do they wear a bicycle helmet when they ride their bicycles?

I do not have young children

	Never	Medium	Always	N/A
Paved Bike Path	1	2 3	4 5	<input type="checkbox"/>
Street	1	2 3	4 5	<input type="checkbox"/>
Unpaved Trail	1	2 3	4 5	<input type="checkbox"/>
Mountain Terrain	1	2 3	4 5	<input type="checkbox"/>

61. Have you ever received any instruction/education on bicycling safety?

1. Yes
2. No → if "No" go to "Question 63" below.

62. Where did you receive your bicycle safety training? (Circle all that apply)

1. Seminar
2. School
3. Police/fire department
4. Parents
5. Pamphlets and brochures
6. Community organizations (e.g. Boy/Girl Scouts)
7. Informal (talking to friends, etc.)
8. Other (describe): _____

68. Have you ever crashed or fallen off your bicycle on an *unpaved trail*?

1. Yes
2. No → if “No,” go to “Question 73.”

69. How many times have you crashed or fallen off your bicycle while riding on an *unpaved trail* during the last 12 months?

_____ times

70. What was the severity of the injury suffered as a result of the last crash or fall from a bicycle on an *unpaved trail*, if any?

1. Minor
2. Moderate
3. Severe (not life threatening)
4. Severe (life threatening, survival probable)
5. Critical (survival uncertain)
6. No injuries suffered

71. What was the total cost of the most recent bicycle crash on an *unpaved trail* ? (including damage to the bike and medical expenses)

\$ _____

Never crashed or fallen on unpaved trail

72. Was the accident in the previous question reported to any authority (e.g. police, park rangers, hospital emergency room, etc.) by either you or another person?

1. Yes
2. No

73. Have you ever crashed or fallen off your bicycle on a *paved road or path*?

1. Yes
2. No → if “No” go to “Question 78.”

74. How many times have you crashed or fallen off your bicycle on while riding on a *paved road or path* during the last 12 months?

_____ times

75. What was the severity of the injury suffered as a result of the last crash or fall from a bicycle while riding on a *paved road or path*, if any?

1. Minor
2. Moderate
3. Severe (not life threatening)
4. Severe (life threatening, survival probable)
5. Critical (survival uncertain)
6. No injuries suffered

76. What was the total cost of the most recent bicycle crash on a *paved road or path* ? (including damage to the bike and medical expenses)

\$ _____

Never crashed or fallen on a paved road or path

77. Was the accident in the previous question reported to any authority (e.g. police, park rangers, hospital emergency room, etc.) by either you or another person?

1. Yes
2. No

VIII. BICYCLE SPENDING

78. How many usable bicycles of the types listed and bicycle helmets are presently owned by *your household*?

- _____ # standard road bicycles
- _____ # mountain bicycles
- _____ # touring/light weight bicycles
- _____ # tandem (built for two)
- _____ # sidewalk/child’s bicycles
- _____ # tri-wheelers or tricycles
- _____ # other bicycles
- _____ # bicycle helmets

79. If *your household* has purchased any bicycles in the last 12 months, please indicate the price and where it was purchased below.

☐ None purchased → go to "Question 80."

1st Bicycle — Price: \$ _____

Where purchased: (*Circle one*)

- a. Specialty bike shop b. Toy store
- c. Department store d. Discount store
- e. Sporting goods store f. Mail order
- g. Classified ad h. Friend
- i. Other (describe): _____

2nd Bicycle — Price: \$ _____

Where purchased: (*Circle one*)

- a. Specialty bike shop b. Toy store
- c. Department store d. Discount store
- e. Sporting goods store f. Mail order
- g. Classified ad h. Friend
- i. Other (describe): _____

3rd Bicycle — Price: \$ _____

Where purchased: (*Circle one*)

- a. Specialty bike shop b. Toy store
- c. Department store d. Discount store
- e. Sporting goods store f. Mail order
- g. Classified ad h. Friend
- i. Other (describe): _____

If your household has purchased more than three bicycles in the last 12 months, please indicate the total cost for the other bicycles purchased that have not been listed above.

\$ _____

80. How much was spent by all members of your household purchasing **bicycle accessories** in the last 12 months?

\$ _____

81. How much was spent by all members of your household on **bicycle repair or maintenance** in the last 12 months?

\$ _____

82. How much was spent by all members of your household on bicycle related vacations (including weekends) during the last 12 months **in Colorado**?

\$ _____

83. How much was spent by all members of your household on bicycle related vacations in the last 12 months **outside Colorado**?

\$ _____

84. If you were to rent a home or apartment, how much more would you be willing to pay per month if it were located within walking distance from a trail?

\$ _____

IX. BICYCLING IN COLORADO

85. Do you ever ride a bicycle in Colorado?

- 1. Yes
- 2. No → if "No" go to "Question 91."

86. *Ideally*, what type of surface would you like to make your average bicycle **work/school/utility** trip on? (*Circle one*)

- 1. Street with bike lane
- 2. Street with no bike lane
- 3. Shoulder of a road
- 4. Paved off-street bike path
- 5. Unpaved off-street bike path
- 6. Sidewalk
- 7. Other (describe): _____

87. *Ideally*, what type of surface would you like to make your average bicycle **recreation/exercise** trip on? (*Circle one*)

- 1. Street with bike lane
- 2. Street with no bike lane
- 3. Shoulder of a road/highway
- 4. Paved off-street bike path
- 5. Unpaved off-street bike path
- 6. General use trail
- 7. Mountain bike only trail
- 8. Sidewalk
- 9. Other (describe): _____

88. Please circle your degree of satisfaction with the following as it pertains to your bicycling in Colorado.

Bicycle parking at work

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Bicycle parking at school

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Bicycle parking at other places (not school/work)

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Courtesy of motorists

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Courtesy of other cyclists

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Courtesy of runners, walkers and skaters

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Crossings at road intersections

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Railroad crossings

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Debris on roads/paths

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Speed bumps and drainage grates on roads

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Road surface conditions

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Bike path surface conditions

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Road shoulder surface conditions

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Road shoulder widths

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

Signs/travel markers

5 4 3 2 1 □
Very satisfied ↔ Not satisfied Not Applicable

89. If you were given \$100 to spend in order to improve bicycling on **work and utility** trips, please indicate how you like to see the money divided between the following options:

<u>Option</u>	<u>Amount</u>
New paved off-street bicycle paths	\$ _____
Recreational unpaved paths	\$ _____
Reconstruct on-street routes	\$ _____
Enhanced maintenance on existing routes	\$ _____
Link existing paved paths creating state wide network	\$ _____
Construction/reconstruction of road shoulders	\$ _____
Supplemental bike facilities (e.g. showers, etc.)	\$ _____
Striping bike lanes	\$ _____
Directional/route signs	\$ _____
Education/enforcement	\$ _____
Other: _____	

_____	\$ _____
Total	\$100

90. What local project would improve your bicycling experience?

X. WALKING

91. If you have ever considered walking to work, school, or for utility or recreation/exercise trips, what factors prevent you from doing so or doing so as much as you would like? Write a number in the blank:

- 0 = not a factor,
- 1 = minor factor,
- 2 = major factor,
- 3 = prevents me from walking.

Never considered walking to work, school, utility or for recreation/exercise trips.

- _____ Physically unable
- _____ Distance
- _____ Weather conditions
- _____ Lack of shower/dressing facilities at destination
- _____ Hazardous route (condition of sidewalk or path)
- _____ Traffic safety concerns
- _____ Lack of personal security (crime)
- _____ Lack of sidewalk
- _____ Transit stop not convenient
- _____ Lack of transit connections
- _____ Need a car for job
- _____ Other (describe): _____

92. Have you ever received any instruction/education on pedestrian safety?

- 1. Yes
- 2. No → if “No” go to “Question 94” below.

93. Where did you receive your pedestrian safety training? (*Circle all that apply*)

- 1. Seminar
- 2. School
- 3. Police/fire department
- 4. Parents
- 5. Pamphlets and brochures
- 6. Community organizations (e.g. Boy/Girl Scouts)
- 6. Informal (talking to friends, etc.)
- 7. Other (describe): _____

94. Where would you most prefer *children* receive their pedestrian safety training?

- 1. School by teacher
- 2. School by police/fire department
- 3. Parks and recreation district
- 4. Parents
- 5. Pamphlets and brochures
- 6. Community organizations (e.g. Boy/Girl Scouts)

95. What do you believe the severity of a typical pedestrian accident under the following conditions to be?

	Minor	1	2	3	4	Fatal
With a motor vehicle	1	2	3	4	5	
With a bicycle	1	2	3	4	5	
Resulting from a hazardous surface (e.g. ice, etc.)	1	2	3	4	5	

96. How many times have you been involved in an accident, *as a pedestrian*, during the last 12 months?

_____ times

97. What was the severity of the injury suffered as a result of the last accident you were involved in, *as a pedestrian*, if any?

- 1. Minor
- 2. Moderate
- 3. Severe (not life threatening)
- 4. Severe (life threatening, survival probable)
- 5. Critical (survival uncertain)
- 6. No injuries suffered
- 7. Never been involved in an accident as a pedestrian → skip to “Question 100.”

98. What was the total cost of the accident? (including medical expenses)

\$ _____

99. Was the accident in the previous question reported to any authority (e.g. police, park rangers, hospital emergency room, etc.) by either you or another person?

1. Yes
2. No

100. Has anyone in your household suffered a "severe" or worse injury due to an accident as a pedestrian?

1. Yes
2. No

XI. ADDITIONAL INFORMATION

101. Would you like to see improvements of conditions to encourage bicycling as a means of transportation?

1. Yes
2. No

102. Where would you most prefer to see funding for improvements of bicycling in Colorado come from? (*circle as many as apply*)

1. New tax
2. User fees for trails and paths
3. Bike registration/licensing fees
4. Reallocating funds from other transportation projects.

103. What is your age? _____

104. Your sex? (*Circle one*)

1. Male
2. Female

105. What is your marital status?

1. Single living alone or with room-mate
2. Single living with parent(s)
3. Married, or living with a significant other
4. Divorced or separated living alone or with roommate
5. Divorced or separated living with parents
6. Widow or widower

106. How do you identify yourself?

1. White, Non-Hispanic
2. White Hispanic/Latino
3. African American, Non-Hispanic
4. African American, Hispanic/Latino
5. Asian/Pacific Islander
6. Native American
7. Other (describe): _____

107. How many children (birth, adopted, foster or stepchildren) under 18 years old live with you full or part time?

108. Do you smoke?

1. Yes
2. No

109. What is the highest grade you have completed? (*Circle one*)

1. 9th grade or less
2. 10th grade
3. 11th grade
4. 12th grade
5. 1st year of college
6. 2nd year of college
7. 3rd year of college
8. 4th year of college
9. 5th year of college
10. 6th year of college
11. 7th year of college
12. 8 or more years of college

110. What is the highest **degree** that you have earned?

1. No high school diploma
2. High school diploma (or GED)
3. Associates degree (or equivalent)
4. Bachelor's degree (or equivalent)
5. Master's degree (or equivalent)
6. Doctorate degree (or equivalent)

111. Do you have a personal computer at home?

1. Yes
2. No

112. How many *hours per week*, on average, do you access the internet?

From work: _____

From home: _____

113. In what industry do you currently work?

1. Agriculture, forestry or fishing
2. Mining
3. Construction
4. Manufacturing
5. Transportation, communication or public utilities
6. Wholesale trade
7. Retail trade
8. Finance, insurance or real estate
9. Services/Education/Technology
10. Public administration
11. Government
12. Not currently employed/Retired

114. What is your occupation?

1. Manager
2. Professional
3. Technician
4. Sales
5. Administrative
6. Protective services
7. Services
8. Mechanic/Repair
9. Other
10. Not currently employed/Retired

115. How many employees are there at your place of work?

1. 1
2. 2 – 9
3. 10 – 24
4. 25 – 50
5. 51 – 100
6. 101 – 249
7. 250 – 499
8. 500 or more

116. What is your hourly wage or annual salary before taxes are deducted?

\$ _____ per hour, or

\$ _____ per year

117. What is your annual household income for all household members from all sources?

1. Less than \$10,000
2. \$10,001 - \$20,000
3. \$20,001 - \$30,000
4. \$30,001 - \$40,000
5. \$40,001 - \$50,000
6. \$50,001 - \$60,000
7. \$60,001 - \$80,000
8. \$80,001 - \$100,000
9. \$101,000 - \$150,000
10. More than \$150,000

Thank you! Please put tape on the open sides of this survey and drop it in the mail.