

Land Use and Travel Behavior
Appendix A: Survey Instruments

Contents:

Davis Pilot Survey

Phase 1: Background Questionnaire.....	A-2
Phase 1: Personal Travel Diary pages.....	A-6
How to Fill Out Your Travel Diary.....	A-8
Phase 2: Household Questionnaire.....	A-12
Phase 3: Transportation and Urban Life.....	A-20

Bay Area Survey

Cover Sheet.....	A-32
Cover Letter.....	A-32
Will You Participate?.....	A-33
Household Questionnaire.....	A-34
Personal Travel Diary.....	A-42
Individual Questionnaire.....	A-63
Thank You Letter.....	A-75

<p>Phase 1 Background Questionnaire</p>
--

1. Your first name: _____
2. Are you Female Male ?
3. How old are you? _____ years old
4. Do you have a driver's license? No Yes
5. Are you employed?
 - No → **Go to Question 11 on Next Page**
 - Yes
 - ↓
 - Work Location _____, _____
 (Nearest intersection or street address) (city)
 - One-way home to work distance: _____ miles (enter "0" if you work at home)
6. Do you work Full time Part time ?
7. How would you describe your job?

<input type="checkbox"/> Administrative Support/Clerical	<input type="checkbox"/> Farming/Forestry/Fishing
<input type="checkbox"/> Professional/Technical	<input type="checkbox"/> Services/Maintenance/Repair
<input type="checkbox"/> Managerial	<input type="checkbox"/> Self-employed
<input type="checkbox"/> Sales	<input type="checkbox"/> Production/Construction/Craft
<input type="checkbox"/> Other _____ (specify)	
8. What is your primary means of travel to work?

<input type="checkbox"/> Drive alone	<input type="checkbox"/> Bicycle
<input type="checkbox"/> Car/van pool	<input type="checkbox"/> Walk
<input type="checkbox"/> Public transportation	<input type="checkbox"/> Work at home
<input type="checkbox"/> Other _____ (specify)	

9. How frequently do you share a ride to work? (Include informal ride-sharing with other employed family members or friends as well as formal car/van pools, but not public transportation)

- Never
- Less than once a month
- 1-3 times a month
- Once a week
- More than once a week

10. How frequently do you ride public transportation (bus, train, etc.) to work?

- Never
- Less than once a month
- 1-3 times a month
- Once a week
- More than once a week

11. Do you go to school?

- No → **Go to Question 16 on Next Page**
- Yes



• School Location _____, _____
(Nearest intersection or street address) (city)

• One-way home to school distance: _____ miles

12. Do you go to school Full time Part time ?

13. What is your primary means of travel to school?

- Drive alone
- Car/van pool
- Public transportation
- Bicycle
- School Bus
- Walk
- Other _____ (specify)

14. How frequently do you share a ride to school? (Include informal ride-sharing with other family members or friends as well as formal car/van pools, but not school bus)
- Never
 - Less than once a month
 - 1-3 times a month
 - Once a week
 - More than once a week
15. How frequently do you ride public transportation (for example, bus or train) to school? (Do not include school bus)
- Never
 - Less than once a month
 - 1-3 times a month
 - Once a week
 - More than once a week
16. What is your educational background?
- Some grade school or high school
 - High school diploma
 - Some college or technical school
 - Four-year college or technical school degree
 - Some graduate school
 - Completed graduate degree(s)
17. In case we have questions on your responses, may we contact you by phone?
- No Yes; Daytime phone number _____

We would value any comments you may have regarding the subject of this study. Please feel free to write them on the back of this page. Thank you for mailing back your completed travel diary together with this questionnaire.

COMMENTS

MOBILITY AND LIVABLE COMMUNITIES STUDY
 INSTITUTE OF TRANSPORTATION STUDIES
 UNIVERSITY OF CALIFORNIA, DAVIS, CA 95616

Please list all the vehicles you drive. Then, for any driving trips you make, use this numbering to indicate which vehicle you used. If you do not drive, please begin recording your trips on the next page.

Vehicle #1

Make _____
 Model _____
 Year _____

Vehicle #2

Make _____
 Model _____
 Year _____

Vehicle #3

Make _____
 Model _____
 Year _____

Vehicle #4

Make _____
 Model _____
 Year _____

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**PHASE 1
 PERSONAL TRAVEL DIARY**

Please read the instructions on the green sheet before beginning to fill out your diary. For ease of reference a summary description of the trip purposes is provided on the back of every page of this diary.

Travel Survey Days: June 3, 4, and 5

Check this box if you do not make any trips at all during this three-day period

Your Name: _____

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DESCRIPTION OF TRIP PURPOSES

TRANSFER TO DIFFERENT MEANS OF TRAVEL	Trips made to change your means of travel on your way to a final destination (for example, driving to a park-and-ride lot to join a vanpool).
RETURN HOME	A trip ending at home. Not necessarily the last trip of the day.
WORK	All trips made to your usual work place.
WORK RELATED	Trips made to carry out work business at locations other than the main work place (for example, attending business meetings, calling on customers).
SCHOOL	Trips made to attend classes.
SHOPPING	Trips for shopping or browsing.
DROP OFF/ PICK UP PASSENGERS	If the main reason for your trip is to drop off or pick up someone, then it falls in this category.
PERSONAL BUSINESS	Those include trips made to carry out personal business such as going to the bank, post office, or the mechanic.
SOCIAL/ RECREATION	For example, a social visit to a friend or relative, a trip to participate in or watch a ball game, a trip to the movies or theater, and so on.
EAT MEAL	Trips made to a restaurant or fast food place to dine or carry-out.
MEDICAL/ DENTAL	A trip to a doctor, dentist, or medical or dental clinic.
OTHER	If you feel that the trip does not fall into any one of the above categories, check this box and try to specify the kind of trip.

Enter Today's Date: _____ / _____ / _____
month day year

Did you make trips today?

- No → Begin tomorrow's trips on the next page
 Yes → Continue below

Trip Began : : am pm
 At Home Work School Other

(Address or cross streets) (city)

Trip Ended : : am pm
 At Home Work School Other

(Address or cross streets) (city)

Purpose of Trip

- Transfer to Different Means of Travel
 Drop off/pick up passengers
 Return Home
 Personal Business
 Work
 Social/Recreation
 Work Related
 Eat Meal
 School
 Medical/Dental
 Shopping
 Other _____
(specify)

Means of Travel

- Drove Vehicle # _____
 Light Rail
 Rode in car/truck/van
 Amtrak
 Carpool/Vanpool
 Bus
 Motorcycle/Moped
 School Bus
 Bicycle
 Walk
 Other _____
(specify)

Number of Persons In Vehicle _____
(include yourself)

Location of Parking

- On-site lot/garage
 On-street
 Off-site lot/garage
 Not applicable

Parking or Transit Cost

- Free Paid \$ _____ Not applicable

Toll Paid for this Trip

- Paid \$ _____ Not applicable

Approximate Total Length of Trip: _____ miles

Distance on Freeway: _____ miles

HOW TO FILL OUT YOUR TRAVEL DIARY

WHO SHOULD FILL OUT THE DIARY? All members of your household who are age 16 or older are requested to fill out the blue background questionnaire and the travel diary. If there are not enough background questionnaires or travel diaries, please call the ITS office at 752-1914 and request additional copies.

FIRST, THE COVER AND YELLOW PAGE. Please write in your first name on the diary cover. Then list the vehicles you drive on the first page (the yellow page).

THEN THE DIARY, ONE PAGE PER TRIP. Please record in your travel diary all trips you make in the three day period, June 3, 4, and 5. A trip is a one-way movement from one place to another, whatever the purpose or means of travel might be. For example, a commute from home to work is a trip. A short walk to a store or a bike ride to a friend's house is also a trip.

However you need not record movements made within the same premises (a building, a shopping center, or a college campus). For example, you would not record the trips to all the stores you visited within the same shopping mall--only record the trips to the mall and from the mall.

HOW TO COUNT TRIPS? Each stop means an end of a trip and a beginning of a new trip. Use one travel diary page for each trip, and fill in all the information about the trip. When a new trip starts, begin a new diary page. For example, suppose you drove to work in the morning; walked to a nearby restaurant during the lunch break; walked back to the workplace; left work and stopped at a grocery store on the way; then returned home. There are altogether 5 trips:

1. Trip from home to work (*Work*)
2. From work to restaurant (*Eat Meal*)
3. From restaurant to work (*Work*)
4. From work to grocery store (*Shopping*)
5. From grocery store to home (*Return Home*)

TRIP PURPOSE CATEGORIES. What you see in the parentheses above are trip purposes for each trip. A summary description of trip purpose categories is shown on the back of this leaflet and also on the back of every diary page. Please mark the trip purpose category that best describes the purpose of each trip.

- If you just go for a walk or a bike ride in the evening, the purpose of the trip is "Social/Recreation", and you would record the origin and destination as "Home" (see inside page of this leaflet).
- If you drive a personal vehicle to make a trip, indicate which vehicle you drove using the numbering you gave on the yellow page.
- If you use up all diary pages, please stop recording and mail back the diary along with the other material.
- If you do not travel at all during this three-day period (for example, due to vacation or illness), then please check the box on the cover of your travel diary and mail it back along with the other material.

YOUR DIARY DAYS ARE JUNE 3, 4, AND 5.

You can find item-by-item instructions for the travel diary on the following pages.

ITEM-BY-ITEM INSTRUCTIONS FOR TRAVEL DIARY

Detailed instructions for each item in the diary page are given below.

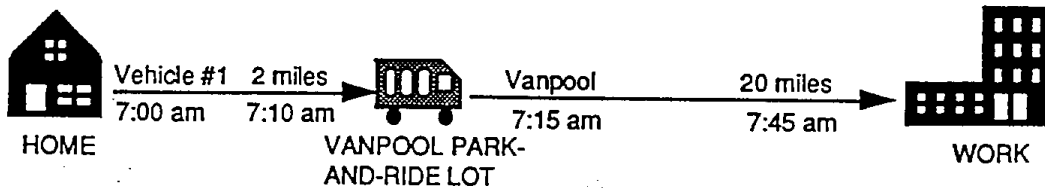
- A At the top of the travel diary page, enter the date (month/day/year).
- B Then indicate whether you traveled on that particular day at all. If not, then start the next day on a new page. You need to do this only when a new day begins.
- C Please fill in the exact time at which the trip started.
- D Check the box corresponding to the place where your trip began. If you check "OTHER", then give its location.
- E Please fill in the exact time at which the trip ended.
- F Check the box corresponding to the place where your trip ended. If you check OTHER, then give its location. Note that the end place of one trip is the start place of the next trip.
- G The purpose of the trip is defined by the main activity at the place where your trip ends. Check the appropriate box for the trip purpose. Explanations of trip purposes are provided on the back of each diary page.
- H Check the box corresponding to the means of travel you used for the trip. If you drove a vehicle, then write in the number for the vehicle as shown in the list you made on the yellow page of the diary. Note that bicycle and walk trips should also be reported.
- I If you used a personal vehicle or carpooled, write down the total number of persons in the vehicle including yourself.
- J If you parked a vehicle, specify the type of parking location. Otherwise check "NOT APPLICABLE".
- K If you used a personal vehicle or car/van pool, indicate the cost of parking. If you used public transportation or taxi, write down the fare. Otherwise check "NOT APPLICABLE".

- L Enter any amount you paid as toll(s) in the specified trip.
- M Finally, provide the approximate total length of the trip in miles and the distance covered on any freeway. (If the trip did not involve any freeway use, enter "0" for freeway miles).

Enter Today's Date: _____ / _____ / _____ <small>month day year</small>	A
Did you make trips today? <input type="checkbox"/> No → Begin tomorrow's trips on the next page <input type="checkbox"/> Yes → Continue below	B
Trip Began <input type="checkbox"/> <input type="checkbox"/> : <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> am <input type="checkbox"/> pm At <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School <input type="checkbox"/> Other _____ <small>(Address or cross streets) (city)</small>	C D
Trip Ended <input type="checkbox"/> <input type="checkbox"/> : <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> am <input type="checkbox"/> pm At <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School <input type="checkbox"/> Other _____ <small>(Address or cross streets) (city)</small>	E F
Purpose of Trip <input type="checkbox"/> Transfer to Different Means of Travel <input type="checkbox"/> Drop off/pick up Passengers <input type="checkbox"/> Return Home <input type="checkbox"/> Personal Business <input type="checkbox"/> Work <input type="checkbox"/> Social/Recreation <input type="checkbox"/> Work Related <input type="checkbox"/> Eat Meal <input type="checkbox"/> School <input type="checkbox"/> Medical/Dental <input type="checkbox"/> Shopping <input type="checkbox"/> Other _____ <small>(specify)</small>	G
Means of Travel <input type="checkbox"/> Drove Vehicle # _____ <input type="checkbox"/> Light Rail <input type="checkbox"/> Rode in car/truck/van <input type="checkbox"/> Amtrak <input type="checkbox"/> Carpool/Vanpool <input type="checkbox"/> Bus <input type="checkbox"/> Motorcycle/Moped <input type="checkbox"/> School Bus <input type="checkbox"/> Bicycle <input type="checkbox"/> Walk <input type="checkbox"/> Other _____ <input type="checkbox"/> Taxi <small>(specify)</small>	H
Number of Persons in Vehicle _____ <small>(include yourself)</small>	I
Location of Parking <input type="checkbox"/> On-site lot/garage <input type="checkbox"/> On-street <input type="checkbox"/> Off-site lot/garage <input type="checkbox"/> Not applicable	J
Parking or Transit Cost <input type="checkbox"/> Free <input type="checkbox"/> Paid \$ _____ <input type="checkbox"/> Not applicable	K
Toll Paid for this Trip <input type="checkbox"/> Paid \$ _____ <input type="checkbox"/> Not applicable	L
Approximate Total Length of Trip: _____ miles Distance on Freeway: _____ miles	M

Example of Completed Travel Diary

On May 29, at 7:00 am, Mary drives in vehicle #1 to the park-and-ride lot to catch her vanpool to work. This drive is 2 miles, and involves no freeway. Mary arrives at 7:10 am. She waits for 5 minutes and then rides in the vanpool to work. This ride is 20 miles, of which 15 miles are on the freeway. The van is parked in the lot at her place of work. There is no charge for parking. She arrives at work at 7:45 am.



This journey to work is made up of TWO trips and should be recorded on TWO separate diary pages as shown below:

Enter Today's Date: 05/29/92
month day year

Did you make trips today?
 No → Begin tomorrow's trips on the next page
 Yes → Continue below

Trip Began 7: 00 am pm
 At Home Work School Other
(Address or cross streets) (city)

Trip Ended 7: 10 am pm
 At Home Work School Other
I-80 + Watt Sacto.
(Address or cross streets) (city)

Purpose of Trip
 Transfer to Different Means of Travel Drop off/pick up passengers
 Return Home Personal Business
 Work Social/Recreation
 Work Related Eat Meal
 School Medical/Dental
 Shopping Other (specify)

Means of Travel
 Drove Vehicle # 1 Light Rail
 Rode in car/truck/van Amtrak
 Carpool/Vanpool Bus
 Motorcycle/Moped School Bus
 Bicycle Walk
 Other (specify) Taxi

Number of Persons in Vehicle 1
(include yourself)

Location of Parking
 On-site lot/garage On-street
 Off-site lot/garage Not applicable

Parking or Transit Cost
 Free Paid \$ Not applicable

Toll Paid for this Trip
 Paid \$ 0 Not applicable

Approximate Total Length of Trip: 2 miles
 Distance on Freeway: 0 miles

Enter Today's Date: _____
month day year

Did you make trips today?
 No → Begin tomorrow's trips on the next page
 Yes → Continue below

Trip Began 7: 15 am pm
 At Home Work School Other
I-80 + Watt Sacto.
(Address or cross streets) (city)

Trip Ended 7: 45 am pm
 At Home Work School Other
(Address or cross streets) (city)

Purpose of Trip
 Transfer to Different Means of Travel Drop off/pick up passengers
 Return Home Personal Business
 Work Social/Recreation
 Work Related Eat Meal
 School Medical/Dental
 Shopping Other (specify)

Means of Travel
 Drove Vehicle # _____ Light Rail
 Rode in car/truck/van Amtrak
 Carpool/Vanpool Bus
 Motorcycle/Moped School Bus
 Bicycle Walk
 Other (specify) Taxi

Number of Persons in Vehicle 8
(include yourself)

Location of Parking
 On-site lot/garage On-street
 Off-site lot/garage Not applicable

Parking or Transit Cost
 Free Paid \$ Not applicable

Toll Paid for this Trip
 Paid \$ 0 Not applicable

Approximate Total Length of Trip: 20 miles
 Distance on Freeway: 15 miles

THANK YOU! PLEASE MAIL BACK YOUR DIARY AND THE BLUE BACKGROUND QUESTIONNAIRE IN THE BUSINESS REPLY ENVELOPE (ALONG WITH THOSE FROM OTHER MEMBERS OF YOUR HOUSEHOLD, IF YOU HAVE OTHER HOUSEHOLD MEMBERS PARTICIPATING IN THE SURVEY).

DESCRIPTION OF TRIP PURPOSES

TRANSFER TO DIFFERENT MEANS OF TRAVEL	Trips made to change your means of travel on your way to a final destination (for example, driving to a park-and-ride lot to join a vanpool).
RETURN HOME	A trip ending at home. Not necessarily the last trip of the day.
WORK	All trips made to your usual work place.
WORK RELATED	Trips made to carry out work business at locations other than the main work place (for example, attending business meetings, calling on customers).
SCHOOL	Trips made to attend classes.
SHOPPING	Trips for shopping or browsing.
DROP OFF/PICK UP PASSENGERS	If the main reason for your trip is to drop off or pick up someone, then it falls in this category.
PERSONAL BUSINESS	These include trips made to carry out personal business such as going to the bank, post office, or the mechanic.
SOCIAL/ RECREATION	For example, a social visit to a friend or relative, a trip to participate in or watch a ball game, a trip to the movies or theater, and so on.
EAT MEAL	Trips made to a restaurant or fast food place to dine or carry-out.
MEDICAL/DENTAL	A trip to a doctor, dentist, and medical or dental clinic.
OTHER	If you feel that the trip does not fall into any one of the above categories, check this box and try to specify the kind of trip.

--	--	--	--	--	--

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<h2>PHASE 2</h2> <h3>Household Questionnaire</h3>

Please enter your first name here: _____

PART A
TRANSPORTATION FACILITIES IN YOUR NEIGHBORHOOD

In this part the questions concern transportation facilities and related issues in your neighborhood.

1. Are streets in your neighborhood pleasant for walking or jogging? Yes No
2. Are there sidewalks in your neighborhood? Yes No
3. Are there easily accessible bike paths in your neighborhood? Yes No
4. Is public transit (such as bus or light rail) easily accessible? Yes No
5. Is there enough parking space near your residence? Yes No
6. Do you or your household members regularly park your vehicle on the street? Yes No
7. How many parking spaces are available exclusively for your household use? Include your garage and driveway. _____
8. Does your household pay separately for a parking space(s) at (or near) your residence? Yes No

↓

How much per month? _____ for _____ space(s)

9. Approximately how much does your household pay each month for?

- a. Gasoline and other vehicle fuel _____
- b. Public transportation _____
- c. Parking at work _____
- d. Tolls _____

PART B
YOUR HOME AND NEIGHBORHOOD

In this section the importance of the reasons for choice of residence is emphasized. Please think of the time you chose to live in your current residence.

1. What are the reasons that you chose the neighborhood you live in now? (Mark as many as apply.)

- | | |
|--|--|
| <input type="checkbox"/> a Quiet neighborhood | <input type="checkbox"/> b Lively neighborhood |
| <input type="checkbox"/> c Safety and security | <input type="checkbox"/> d Good school |
| <input type="checkbox"/> e Close to work | <input type="checkbox"/> f Close to the freeway |
| <input type="checkbox"/> g Close to transit | <input type="checkbox"/> h Close to shops and services |
| <input type="checkbox"/> i Nicely landscaped area | <input type="checkbox"/> j Spacious residential neighborhood |
| <input type="checkbox"/> k Housing cost | <input type="checkbox"/> l Liked the style of housing units |
| <input type="checkbox"/> m Other (Please specify.) _____ | |

2. Of the reasons you marked above, please indicate up to the three most important reasons: (by letter)

- Most important _____
- Second most important _____
- Third most important _____

3. Where did you live before you moved into your current residence?

City _____ State/Country _____

For how long? _____

4. How would you describe the place you lived before you moved to your current residence?

- | | |
|---|---|
| <input type="checkbox"/> 1 A large city | <input type="checkbox"/> 2 A suburb of a large city |
| <input type="checkbox"/> 3 A medium sized city or its suburbs | <input type="checkbox"/> 4 A small city |
| <input type="checkbox"/> 5 A town or village | <input type="checkbox"/> 6 The countryside |

5. Approximately how far (in miles) is your home from the nearest?

- a. Grocery store _____
- b. Gas station _____
- c. Park or playground _____

6. Do you plan to move within the next 12 months?

- Yes No → Please go to Question 8 below.



7. What is the major reason for your plan?

- | | |
|--|--|
| <input type="checkbox"/> a Job related | <input type="checkbox"/> b Finishing school |
| <input type="checkbox"/> c More residential space needed | <input type="checkbox"/> d Too much space |
| <input type="checkbox"/> e Cost of housing | <input type="checkbox"/> f Health/retirement |
| <input type="checkbox"/> g Children left home | <input type="checkbox"/> h Married/divorced |
| <input type="checkbox"/> i Dissatisfaction with the neighborhood | |
| <input type="checkbox"/> j Other (Please specify.) _____ | |

8. Given your current neighborhood situation, which of the following reasons may make you consider moving to a different area? (Mark as many as apply.)

- | | |
|--|---|
| <input type="checkbox"/> a Crime | <input type="checkbox"/> b Traffic |
| <input type="checkbox"/> c Noise | <input type="checkbox"/> d Parking |
| <input type="checkbox"/> e Distance to shops and services | <input type="checkbox"/> f Distance to work |
| <input type="checkbox"/> g Neighbor(s) | <input type="checkbox"/> h Cost of housing |
| <input type="checkbox"/> i Other reasons (Please specify.) _____ | |
| <input type="checkbox"/> j No reason to move at this time | |

9. In what type of area would you prefer to live?

- | | |
|---|---|
| <input type="checkbox"/> 1 The same type of area | <input type="checkbox"/> 2 A large city |
| <input type="checkbox"/> 3 A suburb near a large city | <input type="checkbox"/> 4 A medium sized city or its suburbs |
| <input type="checkbox"/> 5 A small city | <input type="checkbox"/> 6 A town or village |
| <input type="checkbox"/> 7 The countryside | |

10. How many square feet are there in your current residence? _____

11. How many bedrooms are there in your current residence? _____

12. Which of the following do you have in your current residence? (Please mark as many as apply.)

- 1 Separate living and family room
- 2 Dining room
- 3 Private office area
- 4 Private backyard
- 5 Basement

13. Do you own your home?

- Yes No → Please go to Question 15 below



14. What is the approximate value of your home? (Please check the appropriate box.)

- | | |
|---|---|
| <input type="checkbox"/> a Under \$50,000 | <input type="checkbox"/> b \$50,001 to \$80,000 |
| <input type="checkbox"/> c \$80,001 to \$120,000 | <input type="checkbox"/> d \$120,001 to \$180,000 |
| <input type="checkbox"/> e \$180,001 to \$250,000 | <input type="checkbox"/> f \$250,001 to \$350,000 |
| <input type="checkbox"/> g \$350,001 to \$500,000 | <input type="checkbox"/> h More than \$500,000 |

Please go to PART C, next page.

15. If you are renting your residence, what is the rent of the unit per month? (Please check the appropriate box.)

- | | |
|---|--|
| <input type="checkbox"/> a Under \$350 | <input type="checkbox"/> b \$351 to \$500 |
| <input type="checkbox"/> c \$501 to \$700 | <input type="checkbox"/> d \$701 to \$1,000 |
| <input type="checkbox"/> e \$1,001 to \$1,400 | <input type="checkbox"/> f More than \$1,400 |

16. Does the rent include the following? (Mark as many as apply.)

- | | |
|---|--|
| <input type="checkbox"/> a Lawn service | <input type="checkbox"/> b A swimming pool |
| <input type="checkbox"/> c A club house | <input type="checkbox"/> d A gym |
| <input type="checkbox"/> e Other (Please specify.): _____ | |

PART C ABOUT YOUR HOUSEHOLD

In this part we are asking very general questions, some of them about your household interests. The reason we ask these questions is the fact that in many previous studies, travel and transportation habits of the people have been connected to their other interests. We continue the effort to understand the connection between the two. However, we cannot do this without asking some personal questions. We assure all participants of their privacy and confidentiality of the information they provide.

If you are interested in the findings, preliminary results of the study will be available in the ITS office in December 1992. You may contact the office by calling (916) 752-1914.

1. Please check the items you have at your residence.

- | | | |
|--|---|--|
| <input type="checkbox"/> a Microwave oven | <input type="checkbox"/> b Dishwasher | <input type="checkbox"/> c Washer & dryer |
| <input type="checkbox"/> d VCR | <input type="checkbox"/> e CD player | <input type="checkbox"/> f Answering machine |
| <input type="checkbox"/> g Camcorder | <input type="checkbox"/> h Cable TV | <input type="checkbox"/> i Big screen TV |
| <input type="checkbox"/> j Personal computer | <input type="checkbox"/> k Fax machine | <input type="checkbox"/> l Swimming pool |
| <input type="checkbox"/> m Fitness equipment | <input type="checkbox"/> n Boat | <input type="checkbox"/> o RV |
| <input type="checkbox"/> p Spa | <input type="checkbox"/> q Chest or stand-alone freezer | |

2. What best describes the way you usually spend your weekends? (Please mark as many as apply.)

- | | | |
|--|--|--|
| <input type="checkbox"/> a Yard work | <input type="checkbox"/> b Cook | <input type="checkbox"/> c Stay home and relax |
| <input type="checkbox"/> d Do chores | <input type="checkbox"/> e Visit friends | <input type="checkbox"/> f Entertain people |
| <input type="checkbox"/> g Read | <input type="checkbox"/> h Hobbies | <input type="checkbox"/> i Go shopping |
| <input type="checkbox"/> j Exercise | <input type="checkbox"/> k Work | <input type="checkbox"/> l Religious activities |
| <input type="checkbox"/> m Volunteer activities | <input type="checkbox"/> n Study | <input type="checkbox"/> o Take short vacation trips |
| <input type="checkbox"/> p Outdoor/sports | <input type="checkbox"/> q Cultural activities | <input type="checkbox"/> r Dining out/movies |
| <input type="checkbox"/> s Other (Please specify.) _____ | | |

3. In the last 12 months how many holiday trips did you take? _____

4. How many of your holiday trips were one week or longer? _____

5. To what newspaper(s) does your household subscribe? (Please list all.)

6. To what newsweekly(ies) does your household regularly subscribe? (Please list all.)

7. Is there a recycling program in your neighborhood? Yes No

8. Do you participate in any recycling program? Yes No

9. Do you hire somebody to do yard work? Yes No

10. Do you hire somebody to clean the house? Yes No

11. To confirm the information in the earlier phase of survey, please fill in the blanks below:

a. Including yourself, how many people are in your household? _____

b. Including yourself, how many are 16 years or older? _____

c. How many have a driver's license? _____

d. How many people in your household are employed? _____

e. How many usable bicycles does your household have? _____

f. How many usable mopeds does your household have? _____

12. Please indicate the normally operational vehicles available to your household.

Vehicle A:
Make: _____ Model: _____ Year: _____
Acquired: 1 Used 2 New in 19 _____
Fuel type: 1 Gasoline 2 Diesel 3 Other _____
Ownership: 1 Own 2 Lease 3 Company car
4 Other (Please specify.) _____
(specify)

Vehicle B:
Make: _____ Model: _____ Year: _____
Acquired: 1 Used 2 New in 19 _____
Fuel type: 1 Gasoline 2 Diesel 3 Other _____
Ownership: 1 Own 2 Lease 3 Company car
4 Other (Please specify.) _____
(specify)

Vehicle C:
Make: _____ Model: _____ Year: _____
Acquired: 1 Used 2 New in 19 _____
Fuel type: 1 Gasoline 2 Diesel 3 Other _____
Ownership: 1 Own 2 Lease 3 Company car
4 Other (Please specify.) _____
(specify)

Vehicle D:
Make: _____ Model: _____ Year: _____
Acquired: 1 Used 2 New in 19 _____
Fuel type: 1 Gasoline 2 Diesel 3 Other _____
Ownership: 1 Own 2 Lease 3 Company car
4 Other (Please specify.) _____
(specify)

13. Please indicate the age, gender, and employment status of the members of your household who *did not* fill out the travel diary in phase one of this survey (Please include children under 16 years old):

Person #1		
Age: _____	Gender:	<input type="checkbox"/> 1 Female <input type="checkbox"/> 2 Male
Employment status:		
<input type="checkbox"/> 1 Employed full time	<input type="checkbox"/> 2 Employed part time	<input type="checkbox"/> 3 Student
<input type="checkbox"/> 4 Homemaker	<input type="checkbox"/> 5 Retired	<input type="checkbox"/> 6 Not applicable

Person #2		
Age: _____	Gender:	<input type="checkbox"/> 1 Female <input type="checkbox"/> 2 Male
Employment status:		
<input type="checkbox"/> 1 Employed full time	<input type="checkbox"/> 2 Employed part time	<input type="checkbox"/> 3 Student
<input type="checkbox"/> 4 Homemaker	<input type="checkbox"/> 5 Retired	<input type="checkbox"/> 6 Not applicable

Person #3		
Age: _____	Gender:	<input type="checkbox"/> 1 Female <input type="checkbox"/> 2 Male
Employment status:		
<input type="checkbox"/> 1 Employed full time	<input type="checkbox"/> 2 Employed part time	<input type="checkbox"/> 3 Student
<input type="checkbox"/> 4 Homemaker	<input type="checkbox"/> 5 Retired	<input type="checkbox"/> 6 Not applicable

Person #4		
Age: _____	Gender:	<input type="checkbox"/> 1 Female <input type="checkbox"/> 2 Male
Employment status:		
<input type="checkbox"/> 1 Employed full time	<input type="checkbox"/> 2 Employed part time	<input type="checkbox"/> 3 Student
<input type="checkbox"/> 4 Homemaker	<input type="checkbox"/> 5 Retired	<input type="checkbox"/> 6 Not applicable

--	--	--	--	--	--

PHASE 3 TRANSPORTATION AND URBAN LIFE
--

Please enter your first name here: _____

Your neighborhood is important to you in your everyday routine. And you are an integral part of that neighborhood community. In Phase 3 we ask you some questions about your neighborhood, what you do there, and how you feel about current issues. Your opinions are extremely valuable. Please answer each question in a way that accurately represents your opinions. Again, thank you for your help.

PART A
NEIGHBORHOOD INFORMATION

In this part of the questionnaire we are concerned with your opinions and knowledge about your neighborhood, the places you visit and how you get there.

1. As a place to live, my neighborhood has just about everything I want. ₁ Yes ₂ No

Please answer questions 2 through 4 about public transit even if you don't use it.

2. How far away, to the nearest tenth of a mile, is the bus stop:

Nearest your home? _____ ₉ Don't know
(miles)

Nearest your work/school? _____ ₉ Don't know
(miles)

3. How far away is the Amtrak or CalTrain station:

Nearest your home? _____ ₉ Don't know
(miles)

Nearest your work/school? _____ ₉ Don't know
(miles)

4. How would you (*do you usually*) get to the public transit stop/station (*check up to two*)?

₁ Walk ₂ Bicycle ₃ Drive alone ₄ Drive or ride with others

₅ Other (*please specify*): _____

PLEASE CONTINUE ON THE NEXT PAGE.

The following questions ask about the types of transportation you use to travel to the places you routinely visit.

5. How often during the past two weeks did you go to a grocery store?

- ₁ None ₂ 1 - 2 ₃ 3 - 5 ₄ 6 - 10 ₅ More often

6. List up to five grocery stores where you shop (*please list the most frequently visited one first*).

Check here if you do not go grocery shopping.

	Name of Store	Street Store is On	How you usually get there <i>(walk, drive, bus, etc.)</i>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

7. List up to five stores where you go clothes shopping most often (*please list the most frequently visited one first*).

Check here if you do not go clothes shopping.

	Name of Store	Street Store is On	How you usually get there <i>(walk, drive, bus, etc.)</i>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

PLEASE CONTINUE ON THE NEXT PAGE.

8. How often during the past two weeks did you go to a shopping mall (a shopping mall includes a collection of stores in one location that is known as a mall)?

- ₁ None ₂ 1 ₃ 2 ₄ 3 - 4 ₅ More often

9. List up to three major shopping malls you often visit.

Check here if you do not visit a mall.

	Name of Mall	Street Mall is On	How you usually get there (walk, drive, bus, etc.)
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

10. How often during the past month did you shop at a discount, membership store or factory outlet store (such as Home Base, Office Club, Home Depot, Price Club, etc)?

- ₁ None ₂ 1 ₃ 2 ₄ 3 - 4 ₅ More often

11. List up to three membership stores or discount stores where you often shop.

Check here if you do not visit a membership or discount store.

	Name of Store	Street Store is On	How you usually get there (walk, drive, bus, etc.)
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

12. How often during the past two weeks did you buy vehicle fuel (gasoline, diesel, liquid propane gas, or other fuel)?

- ₁ None ₂ 1 ₃ 2 ₄ 3 - 4 ₅ More often

PLEASE CONTINUE ON THE NEXT PAGE.

13. Below is a list of familiar activities in which you may participate. As with the questions above, we are interested in how you get to the places you go (*please check as many as apply*).

Codes for columns below:

- Seldom* = Seldom or never attend/visit
- Bike* = Bicycle or other non-motorized means
- Transit* = Bus or other public transportation
- Rideshare* = Drive or ride with at least one other person including family members
- Walk* = Walk
- Taxi* = Taxi
- Drive* = Drive Alone

		Seldom	Bike	Transit	Rideshare	Walk	Taxi	Drive
a.	Video rental store	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
b.	Laundromat	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
c.	Medical/dental appointment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
d.	Banking and other personal business	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
e.	Lawn & garden store or hardware store	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
f.	School functions or activities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
g.	Religious meeting (<i>Church, Synagogue, Mosque, Temple, etc.</i>)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
h.	Visit friends or family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
i.	Community event, club or association meeting	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
j.	Park or playground	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
k.	Gym or exercise club	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
l.	Eating out (<i>restaurant or fast food restaurant</i>)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
m.	Museum or art gallery	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
n.	Movies	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
o.	Other - please specify other types of places you visit regularly (<i>please do not include grocery shopping, clothes shopping or discount stores here</i>):	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
	_____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
	_____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
	_____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇

PART B TRANSPORTATION AND URBAN LIFE

In Part B we ask what you think about urban travel. Your answers will improve policy makers' understanding of people's feelings, opinions and travel patterns. This will help them make informed decisions.

There are no right or wrong answers to the following questions. Please select the responses that best reflect your opinions or feelings. It's your opinions that are important here.

1. Do you work outside the home?

<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₂ No
↓	↓
Go to Q. 2	Go to Q. 11 Next page
2. Do you ever walk or bicycle to work?

<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₂ No
↓	↓
Go to Q. 3	Go to Q. 6 Next page
3. During the last month, how often did you walk or bicycle to work?

<input type="checkbox"/> ₁ Several times a week	<input type="checkbox"/> ₄ Once or twice a month
<input type="checkbox"/> ₂ Once or twice a week	<input type="checkbox"/> ₅ None
<input type="checkbox"/> ₃ Several times a month	
4. Comparing last month to the preceding January, did you walk or bicycle to work:

<input type="checkbox"/> ₁ As often?	<input type="checkbox"/> ₂ More often?	<input type="checkbox"/> ₃ Less often?
---	---	---
5. I walk or bicycle to work because (please check all that apply):

<input type="checkbox"/> ₁ I don't have a vehicle	<input type="checkbox"/> ₄ I live close to work
<input type="checkbox"/> ₂ For exercise	<input type="checkbox"/> ₅ There's not enough parking
<input type="checkbox"/> ₃ It saves money	<input type="checkbox"/> ₆ Parking is expensive
<input type="checkbox"/> ₇ Other (please specify): _____	

(PLEASE GO TO QUESTION 7 ON THE NEXT PAGE.)

PLEASE CONTINUE NEXT PAGE.

6. I never walk or bicycle to work because (please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> ₁ I don't have a bicycle | <input type="checkbox"/> ₁₀ I don't like to walk/bicycle |
| <input type="checkbox"/> ₂ Physical impairment | <input type="checkbox"/> ₁₁ I don't like to be sweaty when I arrive |
| <input type="checkbox"/> ₃ It's too far | <input type="checkbox"/> ₁₂ There are no showers |
| <input type="checkbox"/> ₄ I have too much to carry | <input type="checkbox"/> ₁₃ There are no bike lockers or racks |
| <input type="checkbox"/> ₅ I don't dress for it | <input type="checkbox"/> ₁₄ My route is through an unsafe area |
| <input type="checkbox"/> ₆ I take child(ren) to child care | <input type="checkbox"/> ₁₅ Some drivers are not careful |
| <input type="checkbox"/> ₇ I do personal errands | <input type="checkbox"/> ₁₆ I work after dark |
| <input type="checkbox"/> ₈ I use my car for work | <input type="checkbox"/> ₁₇ There are no sidewalks, bike paths, or bike lanes |
| <input type="checkbox"/> ₉ Wind, weather, hilly, heat or cold | |
| <input type="checkbox"/> ₁₈ Other (please specify): _____ | |

7. Do you ever ride public transit such as a bus or rail to work?

₁ Yes

↓
Go to-Q. 8

₂ No

↓
Go to Q. 10

8. How do you get to the stop or station? _____

9. I use public transit to get to work because (please check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> ₁ I don't have a vehicle available | <input type="checkbox"/> ₄ I have time to read and relax |
| <input type="checkbox"/> ₂ It's as fast as or faster than driving and parking | <input type="checkbox"/> ₅ It's cheaper than driving and parking |
| <input type="checkbox"/> ₃ It saves wear and tear on my vehicle | |
| <input type="checkbox"/> ₆ Other (please specify): _____ | |

(PLEASE GO TO QUESTION 11 BELOW.)

10. I do not use public transportation to get to work because (please check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> ₁ None available | <input type="checkbox"/> ₉ Transit is too crowded |
| <input type="checkbox"/> ₂ It doesn't stop near my home | <input type="checkbox"/> ₁₀ The vehicle is uncomfortable |
| <input type="checkbox"/> ₃ There is no stop near my destination | <input type="checkbox"/> ₁₁ It's too slow |
| <input type="checkbox"/> ₄ I have to transfer to get to my destination | <input type="checkbox"/> ₁₂ I use my car for work |
| <input type="checkbox"/> ₅ There is no comfortable place to wait | <input type="checkbox"/> ₁₃ I use my car for errands |
| <input type="checkbox"/> ₆ The stop or station is unsafe | <input type="checkbox"/> ₁₄ I take child(ren) to child care |
| <input type="checkbox"/> ₇ None available at the right time | <input type="checkbox"/> ₁₅ I have too much to carry |
| <input type="checkbox"/> ₈ It's too expensive | <input type="checkbox"/> ₁₆ It doesn't run on time |
| <input type="checkbox"/> ₁₇ Other (please specify): _____ | |

11. Do you ever use public transit other than for commuting to work?

₁ Yes

₂ No

PLEASE CONTINUE ON NEXT PAGE.

Below are general statements about a variety of subjects. Please indicate how much you agree or disagree with the following statements by checking your response to each. Your opinions are important even if you feel you're not very familiar with the topics.

12. PRIVATE AUTOMOBILE

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. Driving allows me freedom.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Too many people drive alone.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I would rather drive an electric or other clean-fuel vehicle than give up driving.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Driving allows me to get more done.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. I often get stuck in traffic.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

13. RIDESHARING (CARPOOL OR VANPOOL)

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I like someone else to do the driving.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Ridesharing saves money.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I am not comfortable riding with strangers.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. The rideshare car or van is often late.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. It takes too long to collect everyone in the car or vanpool.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

14. PUBLIC TRANSPORTATION

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I can read and do other things when I use public transportation.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. It costs more to use public transportation than it does to drive a car.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Public transportation is unreliable.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Public transportation is for poor people.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Buses and trains are pleasant to travel in.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

15. TRANSPORTATION PLANNING

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. Traffic congestion will take care of itself because people will make adjustments.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Stricter vehicle smog control laws should be introduced and enforced.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. We need to build more roads to help decrease congestion.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. More lanes should be set aside for carpools and buses.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. We should provide incentives to people who use electric or other clean-fuel vehicles.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

PLEASE CONTINUE ON THE NEXT PAGE.

16. TIME

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. Occasionally, I would be willing to give up a day's pay to get a day off work.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. I would like to have more time for leisure.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. I like to spend most of my time working.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. When things are busy at work, I get more done by cutting back on leisure time.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. When things are busy at work, I get more done by cutting back on sleep.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

17. ENVIRONMENTAL DECISION MAKING

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. Environmental protection is good for California's economy.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. People and jobs are more important than the environment.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. Whoever causes environmental damage should repair the damage.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. High density residential development should be encouraged.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. Environmentalism hurts minority and small businesses.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

18. HOUSING

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I need to have space between me and my neighbors.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. Having shops and services within walking distance of housing is important.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. It's important for children to have a large backyard for playing.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. I would only live in a multiple family unit, (apartment, condo, etc.) as a last resort.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. Too much valuable agricultural land is consumed to supply housing.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

19. ECONOMICS

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I would be willing to pay a toll to drive on an uncongested road.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. Vehicle emissions increase the need for health care.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. Using tax dollars to pay for public transportation is a good investment.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. Environmental protection costs too much.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. We should raise the price of gasoline to reduce congestion and air pollution.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

PLEASE CONTINUE ON THE NEXT PAGE.

PART C LIFESTYLE

Part C asks general interest questions about the types of things you like to do and how you spend your leisure time. We once again assure that all responses will be kept strictly anonymous. This information is useful to indicate the demand for transportation and other urban facilities.

1. From the following lists, check all that you have done within the last 12 months.

A. Outdoors/Sports

- | | | | |
|-----------------------------|--------------------------------------|-----------------------------|---------------------------------|
| <input type="checkbox"/> 1 | Attended a professional sports event | <input type="checkbox"/> 10 | Went horseback riding |
| <input type="checkbox"/> 2 | Went rafting/canoeing | <input type="checkbox"/> 11 | Went hiking/backpacking/camping |
| <input type="checkbox"/> 3 | Went fishing | <input type="checkbox"/> 12 | Went hunting |
| <input type="checkbox"/> 4 | Participated in a sports event | <input type="checkbox"/> 13 | Went mountain climbing |
| <input type="checkbox"/> 5 | Went scuba diving | <input type="checkbox"/> 14 | Went sailing |
| <input type="checkbox"/> 6 | Went on a picnic | <input type="checkbox"/> 15 | Participated in motorcross |
| <input type="checkbox"/> 7 | Used an off-road vehicle | <input type="checkbox"/> 16 | Played tennis/golf |
| <input type="checkbox"/> 8 | Went to a shooting range | <input type="checkbox"/> 17 | Went bird watching |
| <input type="checkbox"/> 9 | Went skiing | | |
| <input type="checkbox"/> 18 | Other (please specify): _____ | | |

B. Entertainment/Events

- | | | | |
|-----------------------------|-------------------------------|-----------------------------|--------------------------------|
| <input type="checkbox"/> 1 | Went wine/beer tasting | <input type="checkbox"/> 7 | Attended an auto show |
| <input type="checkbox"/> 2 | Went to a horse race | <input type="checkbox"/> 8 | Attended an auto race |
| <input type="checkbox"/> 3 | Attended the ballet | <input type="checkbox"/> 9 | Attended a concert/symphony |
| <input type="checkbox"/> 4 | Attended the theater | <input type="checkbox"/> 10 | Attended a parade |
| <input type="checkbox"/> 5 | Went to a bar/night club | <input type="checkbox"/> 11 | Went to a state or county fair |
| <input type="checkbox"/> 6 | Went to a casino | <input type="checkbox"/> 12 | Went to a tradeshow/exhibit |
| <input type="checkbox"/> 13 | Other (please specify): _____ | | |

C. Travel

- | | | | |
|-----------------------------|--|-----------------------------|----------------------------------|
| <input type="checkbox"/> 1 | Visited a National Park or Historic Site | <input type="checkbox"/> 7 | Visited another state |
| <input type="checkbox"/> 2 | Took a cruise | <input type="checkbox"/> 8 | Traveled to another country |
| <input type="checkbox"/> 3 | Visited a beach | <input type="checkbox"/> 9 | Visited a wildlife refuge |
| <input type="checkbox"/> 4 | Visited a wild animal park | <input type="checkbox"/> 10 | Visited an aquarium |
| <input type="checkbox"/> 5 | Visited a State Park or Historic Site | <input type="checkbox"/> 11 | Visited a local or regional park |
| <input type="checkbox"/> 6 | Went to a theme park/amusement park | <input type="checkbox"/> 12 | Went to a zoo/wild animal park |
| <input type="checkbox"/> 13 | Other (please specify): _____ | | |

PLEASE CONTINUE ON THE NEXT PAGE.

D. Do It Yourself/Education/Hobbies

- | | | | |
|-----------------------------|--------------------------------------|-----------------------------|------------------------------------|
| <input type="checkbox"/> 1 | Took a class or short course | <input type="checkbox"/> 8 | Built/refinished furniture myself |
| <input type="checkbox"/> 2 | Made house improvements myself | <input type="checkbox"/> 9 | Made household repairs myself |
| <input type="checkbox"/> 3 | Did automobile service/repair myself | <input type="checkbox"/> 10 | Taught a class |
| <input type="checkbox"/> 4 | Sewed (made clothes, quilts, etc.) | <input type="checkbox"/> 11 | Did needlework/embroidery |
| <input type="checkbox"/> 5 | Painted/wrote | <input type="checkbox"/> 12 | Took/developed photographs |
| <input type="checkbox"/> 6 | Volunteered to help the community | <input type="checkbox"/> 13 | Entertained friends/family at home |
| <input type="checkbox"/> 7 | Put in flower/vegetable garden | <input type="checkbox"/> 14 | Participated in community event(s) |
| <input type="checkbox"/> 15 | Other (please specify): _____ | | |

2. What types of subjects do you read most often (check all that apply)?

- | | | | | | |
|-----------------------------|--------------------------------|-----------------------------|-------------------|-----------------------------|------------------------|
| <input type="checkbox"/> 1 | Art/architecture | <input type="checkbox"/> 11 | History | <input type="checkbox"/> 21 | Religion |
| <input type="checkbox"/> 2 | Business/finance | <input type="checkbox"/> 12 | Home improvement | <input type="checkbox"/> 22 | Romance |
| <input type="checkbox"/> 3 | Children's (stories) | <input type="checkbox"/> 13 | Horror stories | <input type="checkbox"/> 23 | Sailing |
| <input type="checkbox"/> 4 | Cooking/recipes | <input type="checkbox"/> 14 | Humor | <input type="checkbox"/> 24 | Science fiction |
| <input type="checkbox"/> 5 | Computer | <input type="checkbox"/> 15 | Men's | <input type="checkbox"/> 25 | Science/nature |
| <input type="checkbox"/> 6 | Decorating | <input type="checkbox"/> 16 | Military | <input type="checkbox"/> 26 | Sports/exercise/health |
| <input type="checkbox"/> 7 | Entertainment | <input type="checkbox"/> 17 | News/politics | <input type="checkbox"/> 27 | Trade/professional |
| <input type="checkbox"/> 8 | Environmental | <input type="checkbox"/> 18 | Outdoors | <input type="checkbox"/> 28 | Westerns/adventure |
| <input type="checkbox"/> 9 | Fashion | <input type="checkbox"/> 19 | Pets and pet care | <input type="checkbox"/> 29 | Women's |
| <input type="checkbox"/> 10 | Gardening | <input type="checkbox"/> 20 | Photography | | |
| <input type="checkbox"/> 30 | Other (please indicate): _____ | | | | |

Please use the space below for comments.

PLEASE CONTINUE ON THE NEXT PAGE.

**PART D
 THE LAST QUESTIONS**

The end of the survey is in sight! Part D requests some information about yourself to make sure we have a balanced mixture of people in our survey.

1. Have you been employed?

₁ Yes
 ↓
 Go to Q. 2

₂ No
 ↓
 Go to Q. 4

2. Please check the category of your occupation (if retired, please indicate occupation before retiring):

₁ Check here if retired.

- ₂ Management/administration
- ₃ Service/repair
- ₄ Sales
- ₅ Homemaker
- ₆ Student

- ₇ Professional/technical
- ₈ Clerical/administrative support
- ₉ Production/construction/crafts
- ₁₀ Military

₁₁ Other (please specify): _____

3. Which of the following best describes the type of business or industry in which you work or worked?

- ₁ Agriculture/fishing
- ₂ Banking/finance/investment
- ₃ Business/technical service
- ₄ Construction, architectural
- ₅ Communication/transportation/utilities
- ₆ Computer services
- ₇ Education services
- ₈ Food service/restaurant
- ₉ Government
- ₁₀ Health/hospital/medical services
- ₁₁ Insurance

- ₁₂ Legal services
- ₁₃ Manufacturing consumer goods
- ₁₄ Manufacturing industrial goods
- ₁₅ Natural resources/energy
- ₁₆ Mining/forestry
- ₁₇ Publishing/media/advertising
- ₁₈ Real estate
- ₁₉ Retail/distribution trade
- ₂₀ Research and non-profit organization
- ₂₁ Wholesale trade

₂₂ Other (please specify): _____

4. Estimate your combined annual household income (please check the appropriate box).

- ₁ No income
- ₂ \$ 1 to \$ 5,000
- ₃ \$ 5,001 to \$ 10,000
- ₄ \$ 10,001 to \$ 20,000
- ₅ \$ 20,001 to \$ 35,000

- ₆ \$ 35,001 to \$ 50,000
- ₇ \$ 50,001 to \$ 75,000
- ₈ \$ 75,001 to \$ 150,000
- ₉ More than \$ 150,000

Thank you very much.

Please use this space for any comments you wish to make.

Thank you very much.

A-31

March 1, 1994

Dear Survey Participant:

Thank you for agreeing to participate in the Mobility and Livable Communities Study. Your responses to our survey will be of great importance in learning about the daily travel of people in different types of neighborhoods.

We have enclosed a Personal Travel Diary and a Household Questionnaire. In addition we have enclosed \$2 bill as a small token of our appreciation for your participation. Please make be sure to write your name on your Personal Travel Diary.

By completing the survey, you will be providing us with information that will help us to make improvements in transportation in the Bay Area.

YOUR INFORMATION COUNTS!!

No matter how much or how little you travel, YOU ARE IMPORTANT. You are one of the few people picked to help us study daily travel patterns in the Bay Area. Please fill in the Personal Travel Diary and respond to the Household questionnaire.

QUESTIONS? Call us at 1-800-303-1103

After completing this survey, please your Personal Travel Diary and your Household Questionnaire in the enclosed business reply envelope. No postage is needed. In about two weeks you will receive your Individual Survey. Once again, we thank you for your cooperation.

Sincerely,

R. Kitamura
Professor

P.L. Mokhtarian
Assistant Professor

**Mobility and Livable Communities Study
Institute of Transportation Studies
University of California, Davis, CA 95616**

Your responses to the questions on this page will greatly help us extend our results to the general population.

1. Has this questionnaire been delivered to a business address?
₁ Yes → Please return unanswered. Thank you.
₂ No
↓
Please continue.
2. How many years have you lived in the Bay Area? _____
3. Including yourself, how many people are in your household? _____
(include roommates)
4. Of these, how many are age 16 or older? _____
5. How many vehicles are available to your household (motorcycles, cars, vans, and light duty trucks)? _____
6. In what type of housing unit do you live?
 Single family home or duplex/halfplex Condominium or Townhouse
 Apartment
 Other _____
(specify)
7. How many in your household who are 16 or older, will participate in the survey? _____

Please mail your completed questionnaire to us in the enclosed, postage-paid, business reply envelope (even if you are not able to participate in the survey).

To receive incentives, return by January 15, 1993.

Please print any name or address correction below:
(Include apartment number if applicable.)

THANK YOU FOR YOUR COOPERATION!!

UC Davis use

					del
					del2

Household Questionnaire

Who should fill this out? Please have one adult member of the household answer this questionnaire for the entire household. Other household members should be consulted for responses and opinions.

PART A YOUR NEIGHBORHOOD

Your neighborhood is important to you in your everyday routine. And you are an integral part of that neighborhood community. In this section we ask you some questions about your neighborhood, what you do there, and how you feel about current issues. Your opinions are extremely valuable. Please answer each question in a way that accurately represents your opinions. Again, thank you for your help.

In this section we would like your views on your home and what your neighborhood is like.

1. As a place to live, my neighborhood has

- ₁ More or less everything I want
- ₂ Provides a lot of what I want
- ₃ Provides some of what I want
- ₄ Doesn't have much of what I want

2. What are the reasons that you chose the neighborhood you live in now? (Mark as many as apply.)

- | | |
|--|---|
| <input type="checkbox"/> _a Quiet neighborhood | <input type="checkbox"/> _g Lively neighborhood |
| <input type="checkbox"/> _b Safety and security | <input type="checkbox"/> _h Good school |
| <input type="checkbox"/> _c Close to work | <input type="checkbox"/> _i Close to the freeway |
| <input type="checkbox"/> _d Close to transit | <input type="checkbox"/> _j Close to shops and services |
| <input type="checkbox"/> _e Nicely landscaped area | <input type="checkbox"/> _k Spacious residential neighborhood |
| <input type="checkbox"/> _f Housing cost | <input type="checkbox"/> _l Liked the style of housing units |
| <input type="checkbox"/> _m Other (please specify) _____ | |

3. Of the reasons you marked above, please indicate the 3 most important reasons (by number):

Most important _____
Second most important _____
Third most important _____

4. What type of dwelling unit did you live in before your current residence?

- | | |
|---|---|
| <input type="checkbox"/> ₁ Lived in the current unit all my life | <input type="checkbox"/> ₄ Apartment |
| <input type="checkbox"/> ₂ Single family home, duplex/halfplex | <input type="checkbox"/> ₅ Other _____ |
| <input type="checkbox"/> ₃ Condominium or townhouse | <i>(specify)</i> |

5. How would you describe the area you lived in before you moved to your current residence?

- | | |
|--|--|
| <input type="checkbox"/> ₁ Lived in this area all my life | <input type="checkbox"/> ₅ A medium sized city or its suburbs |
| <input type="checkbox"/> ₂ The countryside | <input type="checkbox"/> ₆ A suburb of a large city |
| <input type="checkbox"/> ₃ A town or village | <input type="checkbox"/> ₇ A large city |
| <input type="checkbox"/> ₄ A small city | |

6. Given your current neighborhood situation, which of the following reasons may make you consider moving to a different area? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> ₁ No reason to move at this time | <input type="checkbox"/> ₆ Traffic |
| <input type="checkbox"/> ₂ Crime | <input type="checkbox"/> ₇ Parking |
| <input type="checkbox"/> ₃ Noise | <input type="checkbox"/> ₈ Distance to work |
| <input type="checkbox"/> ₄ Distance to shops and services | <input type="checkbox"/> ₉ Cost of housing |
| <input type="checkbox"/> ₅ Neighbors | <input type="checkbox"/> ₁₀ Other _____ |
| | <i>(specify)</i> |

7. In what type of area would you prefer to live?

- | | |
|---|--|
| <input type="checkbox"/> ₁ The same type of area | <input type="checkbox"/> ₅ A medium sized city or its suburbs |
| <input type="checkbox"/> ₂ The countryside | <input type="checkbox"/> ₆ A suburb of a large city |
| <input type="checkbox"/> ₃ A town or village | <input type="checkbox"/> ₇ A large city |
| <input type="checkbox"/> ₄ A small city | |

8. About how large is your home (square feet)? _____

9. How many bedrooms are there in your current residence? _____

10. Do you have a private backyard? ₁ Yes ₂ No

11. Do you own your home?

₁ Yes



PLEASE ANSWER QUESTION 12 BELOW.

₂ No



PLEASE SKIP TO QUESTION 13 BELOW.

12. What is the approximate value of your home? (Please check the appropriate box.)

₁ Under \$80,000

₂ \$80,001 to \$120,000

₃ \$120,001 to \$180,000

₄ \$180,001 to \$250,000

₅ \$250,001 to \$375,000

₆ \$375,001 to \$575,000

₇ \$575,001 to \$775,000

₈ More than \$775,000

If you answered question 12, please go to PART B, next page.

13. If you are renting/leasing your residence, what is your monthly rent? (Please check the appropriate box.)

₁ Under \$350

₂ \$351 to \$500

₃ \$501 to \$700

₄ \$701 to \$1,000

₅ \$1,001 to \$1,400

₆ More than \$1,400

14. Does the rent/lease include any of the following? (Check all that apply.)

₁ Lawn service

₂ A club house

₃ A swimming pool

₄ A gym or exercise room

₅ Other (specify): _____

PART B
VIEWS ON TRANSPORTATION

In this part of the questionnaire we are asking about your neighborhood.

- | | Yes | No | Not
Sure |
|---|---------------------------------------|---------------------------------------|---------------------------------------|
| 1. Are the streets in your neighborhood pleasant for walking or jogging? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| 2. Is cycling pleasant in your neighborhood? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| 3. Is there good local public transit service in your neighborhood? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| 4. Is there enough parking space near your home? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| 5. Are there problems of traffic congestion in your neighborhood? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| 6. About how much does your household <u>AS A WHOLE</u> pay each month for: | | | |
| a. Gasoline and diesel | | | _____ |
| b. Parking costs | | | _____ |
| c. Tolls | | | _____ |
| d. Public transportation | | | _____ |

Please answer the following two questions about public transit even if you don't use it.

7. How far away, to the nearest tenth of a mile, is the bus stop nearest your home?
- _____ (miles) ₃ Don't know
8. How far away, to the nearest tenth of a mile, is the BART, Amtrak, CalTrain, or light rail station nearest to your home?
- _____ (miles) ₃ Don't know
9. Are there sidewalks in your neighborhood? ₁ Yes ₂ No

10. Are there bike paths in your neighborhood?

₁ Yes



Go to QUESTION 11.

₂ No



Skip to QUESTION 12.

11. Are the bike paths convenient to use?

₁ Yes ₂ No

12. Is public transit (such as bus, light rail, or BART) convenient?

₁ Yes ₂ No

13. Do you or your household members regularly park your vehicle on the street?

₁ Yes ₂ No

14. How many parking spaces are available exclusively for your household use? Include your garage and driveway.

15. Does your household pay separately for a parking space(s) at (or near) your residence?

₁ Yes



₂ No



How much per month? _____ For _____ space(s).

Skip to QUESTION 16.

16. Approximately how far (in miles) is your home from the nearest?

a. Grocery store _____

b. Gas station _____

c. Park or playground _____

PART C
YOUR HOUSEHOLD

In this section we ask very general questions, some of them about your household's interests. We ask these questions because in many previous studies, travel and transportation habits have been connected to other interests of the household. We continue the effort to understand the connection between the two for a better living environment. We assure all participants of their privacy and confidentiality of the information they provide.

1. Please check the items you have at your residence.

- | | | |
|---|---|--|
| <input type="checkbox"/> ₁ Microwave oven | <input type="checkbox"/> ₇ Dishwasher | <input type="checkbox"/> ₁₃ Washer & dryer |
| <input type="checkbox"/> ₂ VCR | <input type="checkbox"/> ₈ CD player | <input type="checkbox"/> ₁₄ Answering machine |
| <input type="checkbox"/> ₃ Camcorder | <input type="checkbox"/> ₉ Cable TV | <input type="checkbox"/> ₁₅ Big screen TV |
| <input type="checkbox"/> ₄ Personal computer | <input type="checkbox"/> ₁₀ Fax machine | <input type="checkbox"/> ₁₆ Swimming pool |
| <input type="checkbox"/> ₅ Fitness equipment | <input type="checkbox"/> ₁₁ Boat | <input type="checkbox"/> ₁₇ RV |
| <input type="checkbox"/> ₆ Spa | <input type="checkbox"/> ₁₂ Chest or stand alone freezer | |

2. To which newspaper(s) does your household subscribe? (Please list all.)

3. To which newsweekly(ies) does your household regularly subscribe? (Please list all.)

4. Is there a recycling program in your neighborhood? ₁ Yes ₂ No

5. Does your household participate in any recycling program? ₁ Yes ₂ No

6. Does your household hire somebody to do yard work? ₁ Yes ₂ No

7. Does your household hire somebody to clean the house? ₁ Yes ₂ No

8. Estimate your combined annual household income before taxes (please check the appropriate box).

- | | |
|--|---|
| <input type="checkbox"/> ₁ No Income | <input type="checkbox"/> ₆ \$ 35,001 to \$ 50,000 |
| <input type="checkbox"/> ₂ \$ 1 to \$ 5,000 | <input type="checkbox"/> ₇ \$ 50,001 to \$ 75,000 |
| <input type="checkbox"/> ₃ \$ 5,001 to \$ 10,000 | <input type="checkbox"/> ₈ \$ 75,001 to \$ 150,000 |
| <input type="checkbox"/> ₄ \$ 10,001 to \$ 20,000 | <input type="checkbox"/> ₉ More than \$ 150,000 |
| <input type="checkbox"/> ₅ \$ 20,001 to \$ 35,000 | |

List the vehicles (cars, trucks, motorcycles, bicycles, etc.) that are usable and normally available to your household.

Vehicle	Make, Model and Year	Year Acquired	# of Miles Driven per year	Ownership				Fuel Type			Describe Other	
				Own	Lease	Company	Other	Gasoline	Diesel	Other		
Example				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Example				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
A				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
C				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
D				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
E				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
F				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

THANK YOU VERY MUCH.

A-41

PLEASE RETURN YOUR HOUSEHOLD QUESTIONNAIRE IN THE POSTAGE PAID
ENVELOPE PROVIDED (INCLUDE ALL THE PERSONAL TRAVEL DIARIES FROM
YOUR HOUSEHOLD).

If you are interested in the findings, preliminary results of this study will be available in the
Institute of Transportation Studies (ITS) office in September of 1993.
You may contact the ITS office by calling (916) 752-4194.

PERSONAL TRAVEL DIARY

of

(Write your first name here.)

Travel Survey Days: February 10, 11 and 12.

Check here if you did not make any trips at all during this three-day period.

UC Davis use

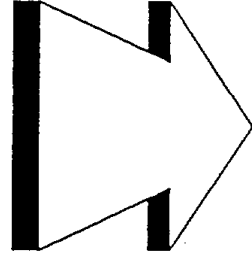
DE1 DE2

INSTRUCTIONS

Thank you for participating in this important study for the Bay Area!!

PERSONAL TRANSPORTATION	
List the vehicles YOU use (cars, trucks, motorcycles, bicycles, etc.) DO NOT include public transportation here.	
This column is the vehicle identification letter. This letter is used in the "TRIPS MADE..." pages in the "Means of Transportation" column. It will identify which vehicle you use for each trip.	Use this column to describe the vehicle. The description may include the type of vehicle. For example, a Peugeot can be a bicycle or a car.

Please use these instructions when completing the page below.



ABOUT YOU AND THE VEHICLES YOU USE

Please complete the information on this page before you to fill out the rest of your **PERSONAL TRAVEL DIARY**.

Year of Birth: 19 _____	Are you: <input type="checkbox"/> Female <input type="checkbox"/> Male
-------------------------	--

PERSONAL TRANSPORTATION	
List the vehicles YOU use (cars, trucks, motorcycles, bicycles, etc.) DO NOT include public transportation here.	
Vehicle	Make, Model, Year
Example A	
Example B	
A	
B	
C	
D	
E	
F	
G	

INSTRUCTIONS

PLACES YOU GO MOST OFTEN

TRIP PURPOSES		LOCATION	TYPICAL MEANS OF TRANSPORTATION (MODE)
1	TRANSFER TO DIFFERENT MEANS OF TRAVEL		
2	RETURN HOME		
3	WORK		
4	WORK-RELATED		
5	SCHOOL		
6	SHOPPING		
7	DROP OFF/ PICK UP PASSENGERS		
8	PERSONAL BUSINESS		
9	SOCIAL/ RECREATIONAL		
10	EAT MEAL		
11	MEDICAL/ DENTAL		
12	OTHER		
		Enter the name of the place you go and the cross streets. For example, you may go to the "Civic Auditorium" in Yountown, or to the "Kennedy Elementary School" on Fifth St. and Elm Ave. in Anytown.	1 = Walk 2 = Bicycle 3 = Drive Alone 4 = Ride with Other 5 = Motorcycle 6 = Bus 7 = Caltrain 8 = BART 9 = Amtrak 10 = Other (Specify)
		REASONS FOR CHOICE OF MODE	FREQUENCY (How often do you typically make these trips?)
		1 = No other way 2 = Convenience 3 = Cost 4 = Speed 5 = Personal Safety 6 = Health 7 = Environment 8 = Difficult to Find Parking 9 = Things to Carry 10 = Just Bought a New Car 11 = Other (describe)	1 = Daily/more than weekly 2 = Weekly/more than monthly 3 = Monthly/less frequently

Please use these instructions when completing the page below.

PLACES YOU GO MOST OFTEN

Please indicate the trips you make most often in the table below. Some typical personal trip purposes are already entered.

Trip Purpose	Location	Distance (miles)	Typical Means of Transportation (Mode)	Reasons for Choice Of Mode	Frequency
See instructions above	Name, cross streets, and city	From home	See instructions above	See instructions above	See instructions above
Example					
1					
2					
3					
4					
5					
6					
7					
8					

DAY ONE

February 10, 1993

Check here if you made no trips today.

INSTRUCTIONS

Use this page to help you fill out your Personal Travel Diary page below.		TRIP PURPOSES	
<p>Find the heading matching the column heading on the page below. Place the number which describes the Trip Purpose, Means of Transportation, and Vehicle Used (if you used a personal vehicle), into the corresponding spaces.</p>			
FROM, TO PLACES YOU GO	MEANS OF TRANSPORTATION (MODE)	TRANSFER TO DIFFERENT MEANS OF TRAVEL	
<p>Use the number from the "Trip Purpose" column in your PLACES YOU GO MOST OFTEN table for location of trips you make most often.</p> <p>For trips you do not describe in PLACES YOU GO MOST OFTEN, please write in the names of the cross streets and city.</p>	<p>1 = Walk 2 = Bicycle 3 = Drive Alone 4 = Ride with Other 5 = Motorcycle 6 = Bus 7 = Caltrain 8 = BART 9 = Amtrak 10 = Other (Specify)</p>	<p>1 Trips made to change your means of travel on your way to a final destination (for example, driving to a park-and-ride lot to join a vanpool).</p> <p>2 Trips ending at home. Not necessarily the last trip of the day.</p> <p>3 All trips made to your usual work place.</p> <p>4 Trips made to carry out work business at locations other than the main work place (for example, attending business meetings, calling on customers.)</p> <p>5 Trips made to attend class.</p> <p>6 Trips for shopping or browsing.</p> <p>7 Trips whose main purpose is to drop off or pick up someone.</p> <p>8 Trips made to carry out personal business such as going to the bank, post office, or the mechanic.</p> <p>9 Trips made to visit a friend or relative, to participate in or watch a ball game, go to the movies or theater, etc.</p> <p>10 Trips made to a restaurant or fast food place to dine or carry-out.</p> <p>11 Trips made to the doctor, dentist, optometrist, or medical/dental clinic.</p> <p>12 When you feel that the trip does not fall into any one of the above categories, specify the kind of trip.</p>	
PEOPLE IN VEHICLE	VEHICLE USED		
<p>Enter the number of people in the vehicle (unless the vehicle is public transit such as a bus or train). Include yourself.</p>	<p>If you use your private vehicle, please indicate which vehicle you are using by the letter from PERSONAL TRANSPORTATION on page 1.</p>		

TRIPS MADE ON

, 1993

(Date)

Trip	Places You Go		Start Time	Arrival Time	How Far?	Trip Purposes(s)	Means of Transportation	Vehicle Used	People in Vehicle
	From	To							
	<p>For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2.</p> <p>For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.</p>				Miles				See instructions above
Example			<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
Example			<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
1			<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
A-49			<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
2			<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
3			<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
4			<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					

PLEASE COMPLETE THE FOLLOWING QUESTIONS IF YOU PAY FOR PARKING OR TOLLS.

Please enter the total amount that you paid for tolls today. \$ _____.

Please enter the amount you paid for incidental parking fees (from parking meters & lots that are not routine). \$ _____.

Day One, Page 1

**PLEASE CONTINUE DAY ONE ON THE NEXT PAGE.
IF YOU MADE NO MORE TRIPS TODAY, GO TO DAY TWO.**

TRIPS MADE ON

(Date) _____, 1993

Trip	From		To		Start Time	Arrival Time	How Far?	Trip Purpose(s)	Means of Transportation	Vehicle Used	People In Vehicle	
	Places You Go		Places You Go									
	For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2. For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.											
5					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
6					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
7					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
A-50					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
8					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
9					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
10					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
11					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
12					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm						
							Miles	See instructions above				

Day One, Page 2
PLEASE CONTINUE DAY ONE ON THE NEXT PAGE.
IF YOU MADE NO MORE TRIPS TODAY, GO TO DAY TWO.

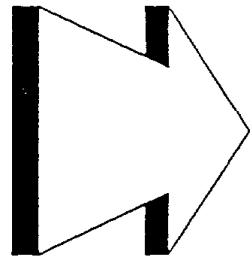
TRIPS MADE ON

_____, 1993

(Date)

Trip	From		To		Start Time	Arrival Time	How Far?	Trip Purposes	Means of Transportation	Vehicle Used	People in Vehicle
	Places You Go		Places You Go								
	<p>For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2.</p> <p>For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.</p>										
13					am pm	am pm	Miles				
14					am pm	am pm					
15					am pm	am pm					
A-51					am pm	am pm					
17					am pm	am pm					
18					am pm	am pm					
19					am pm	am pm					
20					am pm	am pm					

DAY TWO FOLLOWS



DAY TWO

February 11, 1993

Check here if you made no trips today.

TRIPS MADE ON

_____, 1993

(Date)

Trip	From	To	Start Time	Arrival Time	How Far?	Trip Purpose(s)	Means of Transportation	Vehicle Used	People in Vehicle
	Places You Go								
	For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2.				Miles				See instructions above
	For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.								
1			□ am □ pm	□ am □ pm					
2			□ am □ pm	□ am □ pm					
3			□ am □ pm	□ am □ pm					
A-54			□ am □ pm	□ am □ pm					
5			□ am □ pm	□ am □ pm					
6			□ am □ pm	□ am □ pm					
7			□ am □ pm	□ am □ pm					

PLEASE COMPLETE THE FOLLOWING QUESTIONS IF YOU PAID FOR PARKING OR TOLLS.

Please enter the total amount that you paid for tolls today. \$ _____.

Please enter the amount you paid for incidental parking fees (from parking meters & lots that are not routine). \$ _____.

Day Two, Page 1

PLEASE CONTINUE DAY TWO ON THE NEXT PAGE.

IF YOU MADE NO MORE TRIPS TODAY, GO TO DAY THREE.

TRIPS MADE ON _____, 1993
(Date)

Trip	From		To		Start Time	Arrival Time	How Far?	Trip Purposes	Means of Transportation	Vehicle Used	People in Vehicle
	Places You Go		Places You Go								
	For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2. For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.										
8					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm	Miles				
9					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					
10					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					
A-55					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					
12					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					
13					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					
14					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					
15					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					
16					<input type="text"/> am <input type="text"/> pm	<input type="text"/> am <input type="text"/> pm					

Day Two, Page 2
 PLEASE CONTINUE DAY TWO ON THE NEXT PAGE.
 IF YOU MADE NO MORE TRIPS TODAY, GO TO DAY THREE.

TRIPS MADE ON _____

, 1993

(Date)

Trip	From		To		Start Time	Arrival Time	How Far?	Trip Purpose(s)	Means of Transportation	Vehicle Used	People in Vehicle
	Places You Go		Places You Go								
	For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2. For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.										
17					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
18					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
19					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
A-56					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
21					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
22					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
23					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
24					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
25					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
							Miles				See instructions above

DAY THREE

February 12, 1993

Check here if you made no trips today.

TRIPS MADE ON

(Date) _____, 1993

Trip	From		To		Start Time	Arrival Time	How Far?	Purposes)	Means of Transportation	Vehicle Used	People in Vehicle
	Places You Go		Places You Go								
	For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2. For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.										
1					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
2					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
3					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
4-58					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
5					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
6					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
7					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					

See instructions above

PLEASE COMPLETE THE FOLLOWING QUESTIONS IF YOU PAID FOR PARKING OR TOLLS.

Please enter the total amount that you paid for tolls today. \$ _____.

Please enter the amount you paid for incidental parking fees (from parking meters & lots that are not routine). \$ _____.

Day Three, Page 1

PLEASE CONTINUE DAY THREE ON THE NEXT PAGE.

IF YOU MADE NO MORE TRIPS TODAY, RETURN YOUR PERSONAL TRAVEL DIARY.

TRIPS MADE ON

, 1993

(Date)

Trip	From		To		Start Time	Arrival Time	How Far?	Purposes(s)	Means of Transportation	Vehicle Used	People in Vehicle
	Places You Go										
	<p>For the trips you make often use the number corresponding to the location from the Places You Go Most Often table on page 2.</p> <p>For trips not described on the Places You Go Most Often page, please enter the name of the cross streets and the city.</p>										
8					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
9					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
10					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
A-59					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
12					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
13					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
14					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
15					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					
16					<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm					

See instructions above

You may use the space below for any comments you wish to make about the survey.

QUESTIONS? Call us at:

1-(800)-303-1103

(Hours: 10:00 am to 4:00 pm)

After hours you will reach a recording.

However, we will return your call to the number you specify.

THANK YOU VERY MUCH.

PLEASE RETURN YOUR PERSONAL TRAVEL DIARY IN THE POSTAGE PAID
ENVELOPE PROVIDED (INCLUDE THE HOUSEHOLD QUESTIONNAIRE).

If you are interested in the findings, preliminary results of this study will be available in the
Insitute of Transportation Studies (ITS) office in September, 1993.
You may contact the ITS office by calling (916) 752-4194.

UCD use					
				DE1	DE2

Individual Questionnaire

PART A ABOUT YOUR FREQUENT TRIPS

In Part A are questions about how you get to work or school. There are no right or wrong answers to any of these questions. All your answers are confidential. You are assured of complete anonymity when answering any part of this survey.

1. Your first name: _____

2. Are you employed?

₁ No →

Skip to Question 18 on page 4.

₂ Yes



3. Is your employment ₁ Full time? ₂ Part time?

4. Work location _____
(Nearest intersection or street address) (City)

5. One-way home to work distance: _____ (miles) (enter "0" if you work at home).

6. How many days a week do you commute to work? _____ days a week.

If you do not commute to work, please skip to Question 18 on page 4.

7. What is your primary means of travel to work?

₁ Drive alone

₄ Bicycle

₂ Car/vanpool

₅ Walk

₃ Public transportation

₆ Other _____ (specify)

8. How frequently do you share a ride (rideshare) to work (include informal ride-sharing with other employed family members or friends as well as formal car/van pools, but not bus, rail or other public transportation)?

- | | |
|--|---|
| <input type="checkbox"/> ₁ Never | <input type="checkbox"/> ₄ Once a week |
| <input type="checkbox"/> ₂ Less than once a month | <input type="checkbox"/> ₅ More than once a week |
| <input type="checkbox"/> ₃ 1 - 3 times a month | |

If you checked 'Never', skip to Question 10.

9. I rideshare to work because (please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> ₁ I don't have a vehicle | <input type="checkbox"/> ₅ Parking is expensive |
| <input type="checkbox"/> ₂ It saves money | <input type="checkbox"/> ₆ I have time to read and relax |
| <input type="checkbox"/> ₃ There's not enough parking | <input type="checkbox"/> ₇ It's as fast as or faster than driving & parking |
| <input type="checkbox"/> ₄ It saves wear and tear on my vehicle | <input type="checkbox"/> ₈ Other _____
(specify) |

If you answered Question 9, skip to Question 11.

10. I do not rideshare to work because (please specify):

11. How frequently do you ride public transportation (bus, train, etc.) to work?

- | | |
|--|---|
| <input type="checkbox"/> ₁ Never | <input type="checkbox"/> ₄ Once a week |
| <input type="checkbox"/> ₂ Less than once a month | <input type="checkbox"/> ₅ More than once a week |
| <input type="checkbox"/> ₃ 1 - 3 times a month | |

If you checked 'Never', skip to Question 14.

12. I use public transportation to get to work because (please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> ₁ I don't have a vehicle | <input type="checkbox"/> ₅ Parking is expensive |
| <input type="checkbox"/> ₂ It saves money | <input type="checkbox"/> ₆ I have time to read and relax |
| <input type="checkbox"/> ₃ There's not enough parking | <input type="checkbox"/> ₇ It's as fast as or faster than driving & parking |
| <input type="checkbox"/> ₄ It saves wear and tear on my vehicle | <input type="checkbox"/> ₈ Other _____
(specify) |

13. How do you get to the stop or station?

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> ₁ Walk | <input type="checkbox"/> ₂ Bicycle | <input type="checkbox"/> ₃ Drive alone | <input type="checkbox"/> ₄ Drive or ride with others |
| <input type="checkbox"/> ₅ Other _____ | (specify) | | |

If you answered Question 13, skip to Question 15.

14. I do not use public transportation to get to work because (please specify):

- | | | | |
|-----------------------------|---------------------------------------|-----------------------------|---------------------------------|
| <input type="checkbox"/> 1 | None available | <input type="checkbox"/> 11 | Transit is too crowded |
| <input type="checkbox"/> 2 | It doesn't stop near my home | <input type="checkbox"/> 12 | The vehicle is uncomfortable |
| <input type="checkbox"/> 3 | There is no stop near work | <input type="checkbox"/> 13 | It's too slow |
| <input type="checkbox"/> 4 | I have to transfer to get to my work | <input type="checkbox"/> 14 | I use my car for work |
| <input type="checkbox"/> 5 | There is no comfortable place to wait | <input type="checkbox"/> 15 | I use my car for errands |
| <input type="checkbox"/> 6 | The stop or station is unsafe | <input type="checkbox"/> 16 | I take child(ren) to child care |
| <input type="checkbox"/> 7 | None available at the right time | <input type="checkbox"/> 17 | I have too much to carry |
| <input type="checkbox"/> 8 | It's too expensive | <input type="checkbox"/> 18 | It doesn't run on time |
| <input type="checkbox"/> 9 | Physical impairment | <input type="checkbox"/> 19 | Other _____ |
| <input type="checkbox"/> 10 | I work after dark | | (specify) |

15. How frequently do you walk or bicycle to work?

- | | | | |
|----------------------------|------------------------|----------------------------|-----------------------|
| <input type="checkbox"/> 1 | Never | <input type="checkbox"/> 4 | Once a week |
| <input type="checkbox"/> 2 | Less than once a month | <input type="checkbox"/> 5 | More than once a week |
| <input type="checkbox"/> 3 | 1 - 3 times a month | | |

If you checked 'Never', skip to Question 17.

16. I walk or bicycle to work because (please check all that apply):

- | | | | |
|----------------------------|------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> 1 | I don't have a vehicle | <input type="checkbox"/> 5 | There's not enough parking |
| <input type="checkbox"/> 2 | For exercise | <input type="checkbox"/> 6 | Parking is expensive |
| <input type="checkbox"/> 3 | It saves money | <input type="checkbox"/> 7 | Other _____ |
| <input type="checkbox"/> 4 | I live close to work | | (specify) |

If you answered Question 16, please skip to Question 18.

17. I never walk or bicycle to work because (please check all that apply):

- | | | | |
|----------------------------|------------------------------------|-----------------------------|---|
| <input type="checkbox"/> 1 | I don't have a bicycle | <input type="checkbox"/> 10 | I don't like to be sweaty when I arrive |
| <input type="checkbox"/> 2 | Physical impairment | <input type="checkbox"/> 11 | There are no showers |
| <input type="checkbox"/> 3 | It's too far | <input type="checkbox"/> 12 | There are no bike lockers or racks |
| <input type="checkbox"/> 4 | I have too much to carry | <input type="checkbox"/> 13 | My route is through an unsafe area |
| <input type="checkbox"/> 5 | I don't dress for it | <input type="checkbox"/> 14 | Some drivers are not careful |
| <input type="checkbox"/> 6 | I take child(ren) to child care | <input type="checkbox"/> 15 | I work after dark |
| <input type="checkbox"/> 7 | I do personal errands | <input type="checkbox"/> 16 | There are no sidewalks or bike paths |
| <input type="checkbox"/> 8 | I use my car for work | <input type="checkbox"/> 17 | I don't like to walk or bicycle |
| <input type="checkbox"/> 9 | Wind, weather, hilly, heat or cold | <input type="checkbox"/> 18 | Other _____ |
| | | | (specify) |

18. Do you attend school?

- ₁ No →
₂ Yes

Skip to Question 26 below.



19. Do you attend ₁ Full time? ₂ Part time?

20. School location _____
(Nearest intersection or street address) (City)

21. One-way home to school distance: _____

22. How many days a week do you attend school? _____

23. What is your primary means of travel to school?

- | | |
|---|--|
| <input type="checkbox"/> ₁ Drive alone | <input type="checkbox"/> ₄ Bicycle |
| <input type="checkbox"/> ₂ Car/vanpool | <input type="checkbox"/> ₅ Walk |
| <input type="checkbox"/> ₃ Public transportation | <input type="checkbox"/> ₆ Other _____
(specify) |

24. How frequently do you share a ride (rideshare) to school (include informal ride-sharing with other family members or friends as well as formal car/vanpools, but not the school bus)?

- | | |
|--|---|
| <input type="checkbox"/> ₁ Never | <input type="checkbox"/> ₄ Once a week |
| <input type="checkbox"/> ₂ Less than once a month | <input type="checkbox"/> ₅ More than once a week |
| <input type="checkbox"/> ₃ 1 - 3 times a month | |

25. How frequently do you ride public transportation (for example bus, or train) to school?

- | | |
|--|---|
| <input type="checkbox"/> ₁ Never | <input type="checkbox"/> ₄ Once a week |
| <input type="checkbox"/> ₂ Less than once a month | <input type="checkbox"/> ₅ More than once a week |
| <input type="checkbox"/> ₃ 1 - 3 times a month | |

26. Do you ever use public transit other than for commuting to work or school?

- ₁ Yes ₂ No

27. How would you (*do you usually*) get to the public transit stop/station (*check up to two*)?

- ₁ Walk ₂ Bicycle ₃ Drive alone ₄ Drive or ride with others
₅ Other _____ (specify)

28. How many times during the past two weeks did you go to a grocery store?

- ₁ None ₂ 1 - 2 ₃ 3 - 5 ₄ 6 - 10 ₅ More often

29. List up to five grocery stores where you shop (*please list the most frequently visited one first*).

	Name of store	Street and city	How you usually get there <i>(walk, drive, bus, etc.)</i>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

30. List up to five stores where you go clothes shopping (*please list the most frequently visited one first*).

	Name of store	Street and city	How you usually get there <i>(walk, drive, bus, etc.)</i>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

31. How often during the past two weeks did you go to a shopping mall?

- ₁ None ₂ 1 - 2 ₃ 3 - 5 ₄ 6 - 10 ₅ More often

32. List up to three major shopping malls you often visit.

	Name of mall	Street and city	How you usually get there <i>(walk, drive, bus, etc.)</i>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

33. How often during the past month did you shop at a discount store, membership store, or factory outlet store *(such as Home Base, Office Club, Home Depot, Price Club, etc.)*?

- ₁ None ₂ 1 - 2 ₃ 3 - 5 ₄ 6 - 10 ₅ More often

34. List up to three discount, membership or factory outlet stores where you often shop.

	Name of store	Street and city	How you usually get there <i>(walk, drive, bus, etc.)</i>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

35. How often during the past two weeks did you buy vehicle fuel *(gasoline, diesel, liquid propane gas, or other fuel)*?

- ₁ None ₂ 1 - 2 ₃ 3 - 5 ₄ 6 - 10 ₅ More often

36. During the last year, have you changed your most frequently used means of transportation?

- ₁ Yes ₂ No

37. Why or why not? _____

PART B TRANSPORTATION AND URBAN LIFE

Part B questions ask what you think about a variety of subjects. There are no right or wrong answers to the following questions.

Please indicate how much you **agree** or **disagree** with the following statements by checking your response to each. Your opinions are important even if you feel you're not very familiar with the topics.

1. PRIVATE AUTOMOBILE

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. Driving allows me freedom.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Too many people drive alone.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I would rather drive an electric or other clean-fuel vehicle than give up driving.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Driving allows me to get more done.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Getting stuck in traffic doesn't bother me too much.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

2. RIDESHARING (CARPOOL OR VANPOOL)

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I like someone else to do the driving.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Ridesharing saves money.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I am not comfortable riding with strangers.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. The rideshare car or van is often late.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

3. PUBLIC TRANSPORTATION

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I can read and do other things when I use public transportation.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. It costs more to use public transportation than it does to drive a car.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Public transportation is unreliable.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. I use public transportation when I cannot afford to drive.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Buses and trains are pleasant to travel in.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

4. TRANSPORTATION

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. Traffic congestion will take care of itself because people will make adjustments.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Stricter vehicle smog control laws should be introduced and enforced.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. We need to build more roads to help decrease congestion.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. More lanes should be set aside for carpools and buses.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. We should provide incentives to people who use electric or other clean-fuel vehicles.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

5. TIME

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I feel that I am wasting time when I have to wait.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. I would like to have more time for leisure.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I like to spend most of my time working.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. When things are busy at work, I get more done by cutting back on personal time.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Occasionally, I would be willing to give up a day's pay to get a day off work.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

6. ENVIRONMENT

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. Environmental protection is good for California's economy.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. People and jobs are more important than the environment.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Whoever causes environmental damage should repair the damage.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. High density residential development should be encouraged.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Environmentalism hurts minority and small businesses.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

7. HOUSING	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I need to have space between me and my neighbors.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. Having shops and services within walking distance of my home would be important to me.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. It's important for children to have a large backyard for playing.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. I would only live in a multiple family unit, (apartment, condo, etc.) as a last resort.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. Too much valuable agricultural land is consumed to supply housing.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

8. ECONOMY	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
a. I would be willing to pay a toll to drive on an uncongested road.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. Vehicle emissions increase the need for health care.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. Using tax dollars to pay for public transportation is a good investment.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. Environmental protection costs too much.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. We should raise the price of gasoline to reduce congestion and air pollution.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

PART C
LIFESTYLE

Part C asks about the types of things you like to do and how you spend your leisure time. This information is useful to indicate the demand for transportation and other urban facilities. We once again assure you that all responses will be kept strictly anonymous.

1. What types of subjects did you read last month *(check all that apply)*?

- | | | |
|---|---|--|
| <input type="checkbox"/> 1 Art/architecture | <input type="checkbox"/> 12 Home improvement | <input type="checkbox"/> 22 Religion |
| <input type="checkbox"/> 2 Business/finance | <input type="checkbox"/> 13 Horror stories | <input type="checkbox"/> 23 Romance |
| <input type="checkbox"/> 3 Children's (stories) | <input type="checkbox"/> 14 Humor | <input type="checkbox"/> 24 Sailing |
| <input type="checkbox"/> 4 Cooking/recipes | <input type="checkbox"/> 15 Men's | <input type="checkbox"/> 25 Science fiction |
| <input type="checkbox"/> 5 Computer | <input type="checkbox"/> 16 Military | <input type="checkbox"/> 26 Science/nature |
| <input type="checkbox"/> 6 Decorating | <input type="checkbox"/> 17 Mystery | <input type="checkbox"/> 27 Sports/exercise/health |
| <input type="checkbox"/> 7 Entertainment | <input type="checkbox"/> 18 News/politics | <input type="checkbox"/> 28 Trade/professional |
| <input type="checkbox"/> 8 Environmental | <input type="checkbox"/> 19 Outdoors | <input type="checkbox"/> 29 Westerns/adventure |
| <input type="checkbox"/> 9 Fashion | <input type="checkbox"/> 20 Pets and pet care | <input type="checkbox"/> 30 Women's |
| <input type="checkbox"/> 10 Gardening | <input type="checkbox"/> 21 Photography | <input type="checkbox"/> 31 Other _____ |
| <input type="checkbox"/> 11 History | | <i>(specify)</i> |

2. What best describes the way you spent last weekend? *(check as many as apply)*.

- | | | |
|---|---|--|
| <input type="checkbox"/> 1 Yard work | <input type="checkbox"/> 8 Entertain people | <input type="checkbox"/> 15 Short vacation trips |
| <input type="checkbox"/> 2 Visit friends | <input type="checkbox"/> 9 Exercise | <input type="checkbox"/> 16 Movies |
| <input type="checkbox"/> 3 Go shopping | <input type="checkbox"/> 10 Volunteer work | <input type="checkbox"/> 17 Do chores |
| <input type="checkbox"/> 4 Religious activities | <input type="checkbox"/> 11 Dining out | <input type="checkbox"/> 18 Hobbies |
| <input type="checkbox"/> 5 Cultural activities | <input type="checkbox"/> 12 Stay home & relax | <input type="checkbox"/> 19 Outdoor/sports |
| <input type="checkbox"/> 6 Cook | <input type="checkbox"/> 13 Read | <input type="checkbox"/> 20 Other _____ |
| <input type="checkbox"/> 7 Concerts | <input type="checkbox"/> 14 Work | <i>(specify)</i> |

3. In the last 12 months how many holiday trips did you take? _____

4. How many of your holiday trips were one week or longer? _____

5. From the following lists, check all that you have done within the last 12 months.

A. Outdoors/Sports

- 1 Attended a professional sports event
- 2 Went rafting/canoeing
- 3 Went fishing
- 4 Participated in a sports event
- 5 Went scuba diving
- 6 Went on a picnic
- 7 Used an off-road vehicle
- 8 Went to a shooting range
- 9 Went skiing
- 10 Went horseback riding

- 11 Went hiking/backpacking/camping
- 12 Went hunting
- 13 Went mountain climbing
- 14 Went sailing
- 15 Participated in motorcross
- 16 Played tennis/golf
- 17 Went bird watching
- 18 Went swimming
- 19 Other _____
(specify)

B. Entertainment/Events

- 1 Went wine/beer tasting
- 2 Went to a horse race
- 3 Attended the ballet
- 4 Attended the theater
- 5 Went to a bar/night club
- 6 Went to a casino
- 7 Attended an auto show

- 8 Attended an auto race
- 9 Attended a concert/symphony
- 10 Attended a parade
- 11 Went to a state or county fair
- 12 Went to a trade show/exhibit
- 13 Went to the movies
- 14 Other _____
(specify)

C. Travel

- 1 Visited a national park or historic site
- 2 Visited a state park or historic site
- 3 Visited a local or regional park
- 4 Visited a wild animal park
- 5 Visited a beach
- 6 Visited a theme park/amusement park
- 7 Visited another state

- 8 Traveled to another country
- 9 Visited a wildlife refuge
- 10 Visited an aquarium
- 11 Took a cruise
- 12 Went to a zoo
- 13 Other _____
(specify)

D. Do It Yourself/Education/Hobbies

- 1 Took a class or short course
- 2 Made house improvements myself
- 3 Did automobile service/repair myself
- 4 Sewed (made clothes, quilts, etc.)
- 5 Painted/wrote
- 6 Volunteered to help the community
- 7 Put in flower/vegetable garden

- 8 Built/refinished furniture myself
- 9 Made household repairs myself
- 10 Taught a class
- 11 Did needlework/embroidery
- 12 Took/developed photographs
- 13 Entertained friends/family at home
- 14 Participated in community event(s)
- 15 Other _____
(specify)

**PART D
DEMOGRAPHIC INFORMATION**

In Part D we request some information about you to make sure we have a balanced mixture of people in our survey.

1. Do you have a driver's license? ₁ Yes ₂ No

2. What is your educational background?

- | | |
|--|---|
| <input type="checkbox"/> ₁ Some grade school or high school | <input type="checkbox"/> ₄ Four-year college/technical school degree |
| <input type="checkbox"/> ₂ High school diploma | <input type="checkbox"/> ₅ Some graduate school |
| <input type="checkbox"/> ₃ Some college or technical school | <input type="checkbox"/> ₆ Completed graduate degree(s) |

Please answer Question 3 even if you are temporarily unemployed or retired.

3. What best describes your occupation?

- | | |
|--|---|
| <input type="checkbox"/> ₁ Not applicable | <input type="checkbox"/> ₆ Manager/administrator |
| <input type="checkbox"/> ₂ Service/repair | <input type="checkbox"/> ₇ Clerical/administrative support |
| <input type="checkbox"/> ₃ Sales | <input type="checkbox"/> ₈ Professional/technical |
| <input type="checkbox"/> ₄ Homemaker | <input type="checkbox"/> ₉ Production/construction/crafts |
| <input type="checkbox"/> ₅ Student | <input type="checkbox"/> ₁₀ Military |

4. Please indicate your 1992 before-tax personal income using the following categories.

- | | |
|---|--|
| <input type="checkbox"/> ₁ No income | <input type="checkbox"/> ₆ \$15,001 to \$30,000 |
| <input type="checkbox"/> ₂ 0 to \$ 7,500 | <input type="checkbox"/> ₇ \$30,001 to \$50,000 |
| <input type="checkbox"/> ₃ \$ 7,501 to \$ 15,000 | <input type="checkbox"/> ₈ Over \$50,000 |

We would value any comments you may have regarding the subject of this study.

12
THANK YOU VERY MUCH!
A-74

March 5, 1993

Dear Survey Participant:

Thank you for participating in the Mobility and Livable Communities Study. We sincerely appreciate your cooperation. Your responses have provided us with invaluable information on travel and transportation. Your views and responses will be reflected in our final report.

As promised, we have enclosed \$5 as a token of our appreciation and our recognition for your contribution and participation in the Mobility and Livable Communities Study.

If you are interested in the findings, preliminary results of the study will be available in the Institution of Transportation office sometime in December, 1993. You may contact the office by calling (916) 752-4194.

Please give us a call at the Institute of Transportation Studies if you have any questions. Again, thank you for your participation in the study.

With regards,

R. Kitamura
Professor

P. L. Mokhtarian
Assistant Professor

Land Use and Travel Behavior

Appendix B: Site Survey Results

Contents:

Summary of Concord Site Description	B-1
Map.....	B-2
Site Description.....	B-3
Summary of Pleasant Hill Site Description.....	B-6
Map.....	B-7
Site Description.....	B-8
Summary of North San Francisco Site Description.....	B-11
Map.....	B-12
Site Description.....	B-13
Summary of South San Francisco Site Description.....	B-15
Map.....	B-16
Site Description.....	B-17
Summary of San Jose Site Description.....	B-20
Map.....	B-21
Site Description.....	B-22
Map: Relative Location of All Survey Sites.....	B-26

Summary of Concord Site Description

APARTMENTS

The site contains nine (9) apartment complexes with a total of 236 units. Two apartment complexes are located on Chestnut Avenue in the northeast center of the survey site. Six apartment complexes are located along Chestnut Avenue which runs through the center of the site in a south easterly direction. The apartments are located towards the east side of the survey site. The last apartment complex is located on Grove Avenue which runs north/south through the site slightly to the east.

BART

The BART station is at the opposite side of the survey site from the apartments. BART runs at approximately 2 hour intervals during the early a.m., increasing frequency to approximately one-half hour intervals during the peak commute hours from 5:00 a.m. through 7:30 a.m. and 4:00 p.m. through 6:00 p.m. Departure times are approximately one hour apart during the remainder of the day.

BUS SERVICE

There are thirteen (13) bus routes in the Concord survey area. All begin or end at the BART station. During the week the buses run from 5:52 a.m. to 7:34 a.m. and 4:38 p.m. to 6:45 p.m. at approximately one-half hour intervals. During the remainder of the bus service time buses run at approximately one hour intervals (from 41 minute to 74 minute intervals). Weekend service is provided at approximately one hour intervals.

BUSINESSES

The Concord survey site has one-hundred and forty-nine (149) businesses, including 5 churches in its approximately one-square mile area. One-hundred and one (101) are along Clayton Road. The next greatest concentration of business are along Galindo Street, which has eighteen (18) businesses. The remainder of the businesses are along Chestnut Avenue, Colfax Street, Concord Boulevard, Cowell Road, East Street, Farm Bureau Road, Grant Street, Grove Street, Lagunda Street, Main Avenue, and The Alameda.

The greatest concentration of business is around the BART station and is bordered by Mesa Street, Oakland Avenue, Clayton Road, Concord Boulevard, Galindo Street, and Monument Boulevard. Other businesses are located along Clayton Road and side streets near Clayton.

PARKS

There is one park, the Concord Community Park, located at the southeast of the Concord study site. It contains a picnic area, playground, swimming pool, tennis courts, a clubhouse, a refreshment stand, and parking.

SCHOOLS

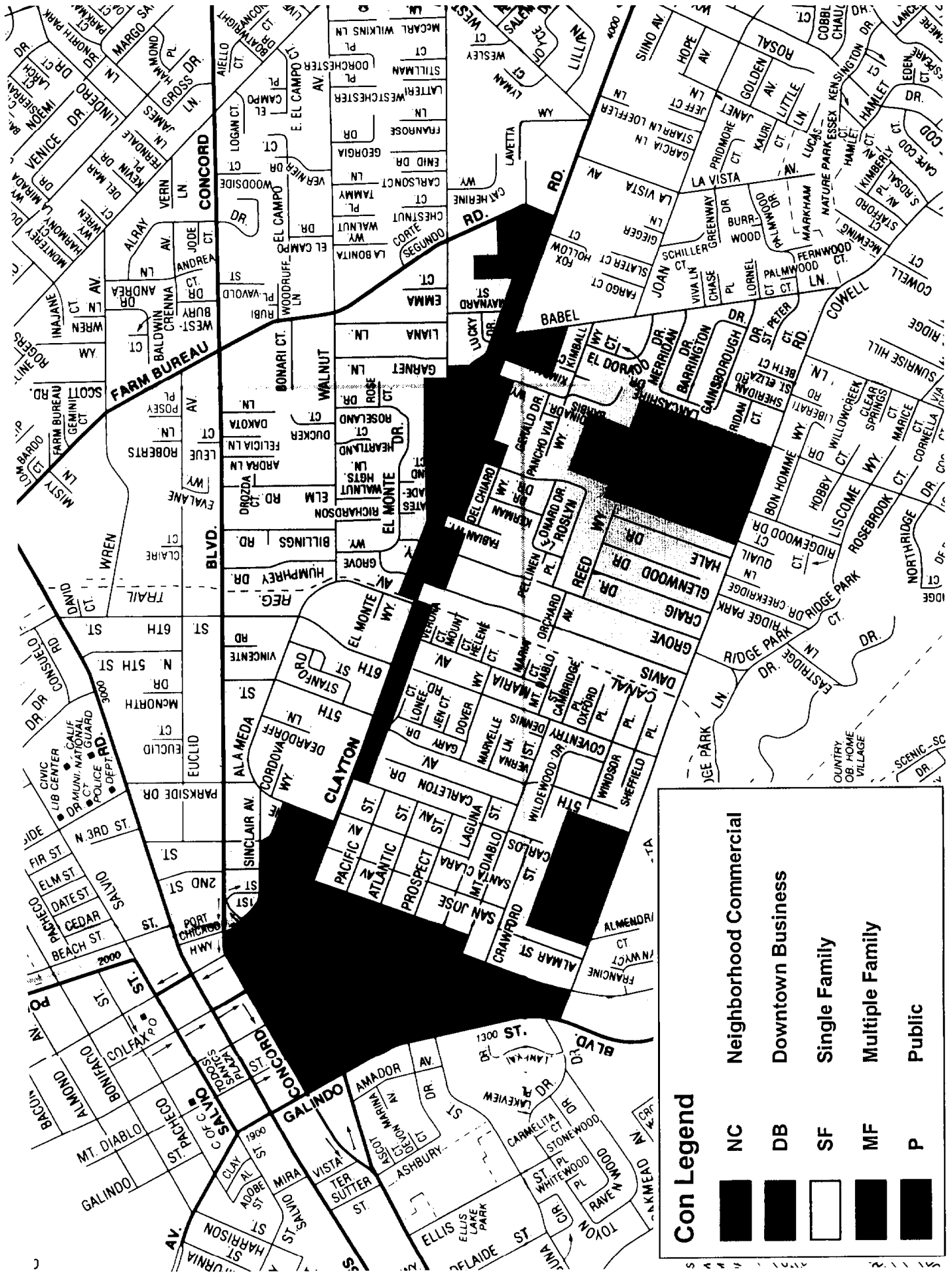
There are three schools in the Concord study area. Two are along San Carlos Avenue at the southwest portion of the study area. The third school is located on Pancho Via Way to the north-east of the Concord Community Park.

SINGLE FAMILY RESIDENTIAL






The remainder of the site is dedicated to single family residential dwellings.

CONCORD SURVEY SITE

B-2



Con Legend

	NC	Neighborhood Commercial
	DB	Downtown Business
	SF	Single Family
	MF	Multiple Family
	P	Public

Concord: Site Description

Street Name	Length (feet)	Width (feet)	Two-way Year/no	Number of Lanes	Divided Year/no	Condition	Speed Limit	Stop Signs	Stop Lights	Park Aft	Sidewalk Year/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Bebel Ln.	3000	25	Y	2	Y	F	35	0	2	none	Y-d	3	0	Y	G
Clayton Rd.	9000	50	Y	3	Y	G	30	0	7	2 hr	Y	3	0	Y	G
Concord Blvd.	6900	40	Y	2	Y	G	35	0	6	2 hr	Y	2	0	Y	G
Cowell Rd.	3000	50	Y	2	Y	VG	35	0	2	none	Y-n	3	0	Y	G
Farm Burcau Rd.	3700	25	Y	2	Y	G	35	2	2	off street	N	0	0	Y	G
Galindo St.	2600	80	Y	4	Y	G	30	0	4	2 hr	Y	3	0	Y	G
1st St.	250	30	Y	2	N	G	25	1	0	off street	N	0	0	Y	G
2nd St.	250	30	Y	2	N	G	25	1	0	off street	N	0	0	Y	G
3rd St.	700	30	Y	2	N	G	25	2	0	on street	N	0	0	Y	G
5th Ave.	2700	20	Y	2	N	F	25	2	0	on street	N	0	0	Y	G
5th St.	1450	30	Y	2	N	F	25	3	0	off street	Y-w	3	3	Y	G
6th St.	1800	30	Y	2	Y	G	25	1	2	off street	N	0	0	Y	G
Almar St.	800	30	Y	2	N	G	25	2	0	4 hr	Y	3	2	Y	F
Astra Ln.	400	20	Y	2	N	P	25	1	0	off street	N	0	0	N	F
Atlantic St.	950	20	Y	2	N	G	25	1	0	4 hr	Y-a	3	2	Y	F
Bonari Ct.	600	30	Y	2	N	G	25	1	0	on street	Y	4	0	Y	G
Barbis Way	1400	25	Y	2	N	G	25	1	0	on street	N	0	0	Y	G
Barrington Dr.	1100	30	Y	2	N	G	25	0	0	on street	Y	3	2	Y	G
Billings Rd.	750	15	Y	1	N	P	25	1	0	none	N	0	0	N	F
Cambridge Pl.	450	20	Y	2	N	G	25	1	0	on street	N	0	0	Y	G
Carlton Dr.	1350	30	Y	2	N	G	25	1	0	on street	Y	3	0	Y	G
Chestnut Ave.	2350	35	Y	2	Y	F	25	2	0	on street	Y-a	3	4	Y	G
Colfax St.	300	40	N	3	N	G	30	0	2	none	Y	6	0	Y	G
Cordova Way	300	25	Y	2	N	F	25	1	0	off street	N	0	0	Y	F
Coventry Rd.	2650	30	Y	2	N	G	25	3	0	on street	Y	3	2	Y	G
Craig Dr.	1150	30	Y	2	N	G	25	1	0	on street	N	0	0	Y	G
Crawford St.	1200	30	Y	2	N	G	25	1	0	on street	Y	3	2	Y	G
Dakota Ln.	500	25	Y	2	N	F	25	1	0	4 hr	N	0	0	N	F
Devils Ave.	3300	30	Y	2	N	G	25	2	0	on street	N	0	0	Y	G
Deardoff Ln.	450	25	Y	2	N	G	25	1	0	off street	N	0	0	Y	F
Del Chiaro Way	550	30	Y	2	N	G	25	0	0	on street	Y	3	0	Y	G
Denia Ct.	150	30	Y	2	N	G	25	0	0	on street	N	0	0	Y	G
Dina Dr.	150	25	Y	2	N	G	25	0	0	on street	N	0	0	Y	G
Dover Way	900	30	Y	2	N	G	25	2	0	on street	Y	4	0	Y	G
Drosda Ct.	100	15	Y	1	N	P	25	0	0	off street	N	0	0	N	G
Ducker Ct.	450	30	Y	2	N	G	25	1	0	on street	Y	4	0	Y	G
East St.	700	60	Y	2	Y	G	25	0	1	none	Y	6	0	Y	F
Elm Rd.	1000	25	Y	2	N	G	25	2	0	off street	N	0	0	Y	G
El Monte Dr.	1200	25	Y	2	N	G	25	2	0	off street	N	0	0	Y	G
El Dorado Dr.	950	30	Y	2	N	G	25	1	0	off street	Y	3	0	Y	G
El Monte Way	250	25	Y	2	N	G	25	1	0	off street	N	0	0	Y	G
Emma Ct.	400	25	Y	2	N	G	25	1	0	off street	N	0	0	Y	G
Estata Ct.	100	25	Y	2	N	G	25	0	0	off street	N	0	0	Y	G
Fabian Way	500	30	Y	2	N	G	25	1	0	off street	Y	3	0	Y	G

Concord: Site Description

Street Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk Yes/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Felicia Ln.	350	20	Y	2	N	G	25	1	0	off street	N	0	0	N	F
Gainborough Dr.	600	30	Y	2	N	G	25	1	0	on street	Y	3	0	Y	VG
Garnet Ln.	1100	25	Y	2	N	G	25	2	0	off street	N	0	0	Y	G
Gary Dr.	650	30	Y	2	N	G	25	2	0	on street	Y	3	0	Y	G
Gerald Dr.	250	25	Y	2	N	G	25	0	0	off street	N	0	0	Y	G
Glenwood Dr.	1150	30	Y	2	N	F	25	0	0	off street	Y	0	0	Y	G
Grant St.	900	50	Y	4	Y	G	25	1	2	none	Y	5	5	Y	G
Grove Way	3700	25	Y	2	N	G	25	2	0	on street	N	0	0	Y	G
Hale Dr.	1150	30	Y	2	N	G	25	1	0	off street	N	0	0	Y	G
Heartland Ct.	350	30	Y	2	N	G	25	1	0	on street	Y	4	0	Y	G
Helene Ct.	150	30	Y	2	N	F	25	0	0	on street	Y	3	0	Y	G
Humphrey Dr.	1000	30	Y	2	N	F	25	2	0	off street	Y	0	0	N	G
Jen Ct.	150	30	Y	2	N	G	25	0	0	on street	Y	3	0	Y	G
Karman Dr.	400	30	Y	2	N	G	25	0	0	on street	Y	4	0	Y	G
Kimball Ct.	150	30	Y	2	N	G	25	0	0	on street	Y	4	0	Y	G
Kirrbell Way	700	30	Y	2	N	G	25	1	0	on street	Y	4	0	Y	G
Laguna St.	1300	30	Y	2	N	G	25	3	0	on street	Y	3	2	Y	G
Laguna St.	500	25	Y	2	N	P	25	1	0	none	Y	0	0	Y	F
Lancashire Dr.	650	30	Y	2	N	G	25	0	0	on street	Y-n	3	0	Y	VG
Leonard Dr.	950	25	Y	2	N	G	25	0	0	on street	N	0	0	Y	G
Lison Ln.	1050	25	Y	2	N	G	25	2	0	off street	N	0	0	Y	G
Lonee Ct.	150	30	Y	2	N	G	25	0	0	on street	Y	3	0	Y	G
Lucky Dr.	450	15	Y	1	N	F	25	0	0	off street	N	0	0	Y	G
Main Ave.	300	30	Y	2	N	G	25	1	0	on street	Y	3	0	Y	G
Maria Ave.	1400	25	Y	2	N	G	25	0	1	off street	Y	0	0	Y	G
Marie Ct.	150	30	Y	2	N	G	25	0	0	on street	Y	3	0	Y	G
Marville Ln.	350	30	Y	2	N	G	25	0	0	on street	Y	3	0	Y	G
Maynard St.	650	15	Y	1	N	F	25	2	0	on street	Y	3	0	Y	G
Meridian Dr.	800	30	Y	2	N	G	25	1	0	off street	Y	3	0	Y	VG
Mesa St.	1000	30	Y	2	N	G	25	2	0	on street	Y	3	0	Y	G
Montebello Ct.	450	30	Y	2	N	G	25	1	0	on street	Y	3	0	Y	G
Mt Diablo St.	3100	30	Y	2	N	G	25	3	0	on street	Y	3	0	Y	G
Oak St.	550	40	Y	2	N	G	25	0	1	none	Y	4	0	Y	G
Oakland Ave.	1550	50	Y	4	Y	F	30	1	1	none	Y-o	3	0	Y	G
Orchard Ave.	500	30	Y	2	N	G	25	0	0	off street	N	0	0	Y	G
Oxford Pl.	450	20	Y	2	N	G	25	1	0	off street	N	0	0	Y	N
Pancho Villa Way	500	25	Y	2	N	P	25	0	0	none	N	0	0	Y	F
Park St.	700	40	Y	2	Y	G	25	1	0	none	N	0	0	Y	G
Parkside Dr.	300	30	Y	2	N	G	25	2	0	off street	N	0	0	Y	G
Port Chicago Hwy.	600	40	Y	2	N	F	25	1	0	on street	Y	4	0	Y	G
Prospect St.	950	25	Y	2	N	G	25	1	0	on street	Y	3	2	Y	G
Pacific St.	950	25	Y	2	N	G	25	1	0	on street	Y	3	2	Y	G
Reed Way	900	30	Y	2	N	F	25	0	0	off street	N	0	0	Y	G
Richardson Rd.	450	15	Y	1	N	F	25	0	0	off street	N	0	0	Y	F

Concord: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park At	Sidewalk Yn	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Rose Ct.	100	25	Y	2	N	G	25	0	0	off street	N	0	0	Y	G
Roecland Dr.	700	25	Y	2	N	G	25	1	0	off street	N	0	0	Y	G
Roelyn Dr.	1000	30	Y	2	N	G	25	1	0	on street	N	3	0	Y	G
San Carlos Ave.	2050	20	Y	2	N	F	25	2	0	4 hr	Y-e	3	2	Y	G
San Jose Ave.	1800	30	Y	2	N	G	25	3	0	4 hr	Y	3	2	Y	G
Santa Clara Ave.	1250	25	N	2	N	F	25	2	0	4hr	Y	3	0	Y	F
Shadeland Ct.	100	25	Y	2	N	G	25	0	0	off street	N	0	0	Y	G
Sheffield Ct.	0	0	0	0	0	0	0	0	0	off street	N	0	0	Y	G
Sheffield Pl.	800	30	Y	2	N	G	25	1	0	off street	N	0	0	Y	G
Sheridan Ct.	200	30	Y	2	N	G	25	0	0	on street	Y	3	0	Y	G
Sheridan Ct.	550	30	Y	2	N	G	25	1	0	on street	Y	3	0	Y	VG
Sheridan Rd.	1450	30	Y	2	N	G	25	2	0	on street	Y	3	3	Y	G
Sinclair Ave.	1200	30	Y	2	N	F	25	1	0	off street	N	0	0	Y	G
Stanford St.	350	30	Y	2	N	G	25	1	0	on street	Y	3	0	Y	G
St. Elizabeth Ct.	600	30	Y	2	N	G	25	1	0	on street	Y	3	0	Y	G
St. Peter Ct.	300	50	N	4	N	G	25	0	1	none	Y	6	0	Y	F
Sunset Ave.	2750	20	Y	2	N	F	25	2	0	off street	N	0	0	Y	G
The Alameda	150	30	Y	2	N	G	25	0	0	off street	N	0	0	Y	G
Verona Ct.	150	25	Y	2	N	F	25	0	0	on street	N	0	0	Y	G
Vicente Rd.	300	25	Y	2	N	F	25	1	0	off street	N	0	0	N	F
Walnut Ave.	2500	20	Y	2	N	F	25	2	0	off street	N	0	0	N	F
Walnut Heights	500	25	Y	2	N	F	25	0	0	off street	N	0	0	N	G
Wildwood Dr.	1050	30	Y	2	N	G	25	0	0	on street	Y	3	0	Y	G
Windsor Pl.	1150	25	Y	2	N	G	25	1	0	off street	N	0	0	Y	G

Summary of Pleasant Hill Site Description

Pleasant Hill has designated the area surrounding the BART station as a planned unit development (PUD) district. It's intent is to encourage development of high density, multi-family housing, business complexes, and business parks near the BART transit station.

APARTMENTS

There are forty-four apartment complexes in the Pleasant Hill survey area with a total of approximately 3,390 units. The majority of the units are located around the BART station along Jones Road, Las Juntas Way, and Elena Court. Four areas are designated as high density apartment complexes. They are located along Jones Road paralleling Highway 680, and south of Treat Boulevard; to the east of the BART PUD and north of Treat Boulevard, to the north of the BART PUD along Coggins Drive; and to the west of Highway 680 and separating the commercial district from the single family residential area.

On the south and east portion of the survey site is an area designated as low density multiple family. No apartments are located in this area and this area is not included in the above count. Duplexes or townhouses rather than apartments may be allowed in this area.

BART

The BART station is located near the center of the Pleasant Hill study site, north of Treat Boulevard and east of Highway 680.

BUS SERVICE

There are six (6) bus routes in the Pleasant Hill study area. Weekday service leaves at approximately fifteen (15) minute intervals during the peak commute hours of 6:22 a.m. to 8:57 a.m. and 4:34 p.m. to 7:35 p.m. (with intervals of 11 minutes to 20 minutes). Weekend service is at fifty (50) minute intervals.

BUSINESSES

Pleasant Hill has one-hundred and four (104) businesses located within the survey area. This includes four churches, two pre-schools, California State University Hayward, a private school, a convalescent hospital, day care center and a retirement home. Businesses are located along Treat Boulevard which runs east/west through the south central survey area; along Park Boulevard to the east of Highway 680 and at the northern boundary of the survey site; along Buskirk Avenue at the north of the BART PUD area and adjacent to Highway 680. There is a large "General Commercial" area located to the west of Highway 680 at the southern border of the study site.

PARKS

There are no parks located in this study area.

SCHOOLS

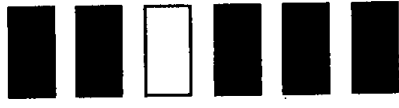
There are no public schools in the study area.

SINGLE FAMILY RESIDENTIAL

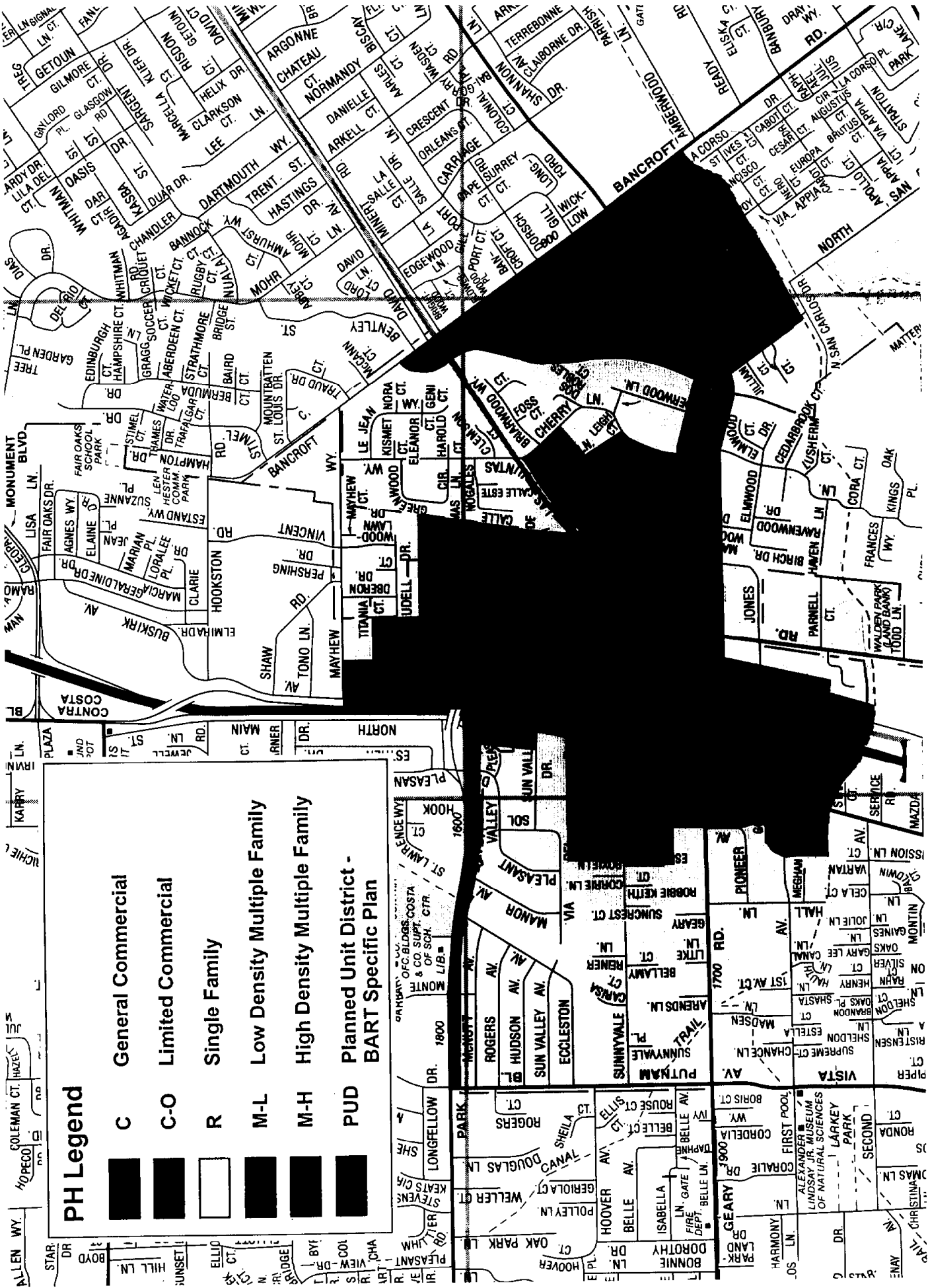
Single family residential areas are at the far west side of the study area, and at the north and south of the eastern portion of the study area.

PLEASANT HILL SURVEY SITE

PH Legend



- C** General Commercial
- C-O** Limited Commercial
- R** Single Family
- M-L** Low Density Multiple Family
- M-H** High Density Multiple Family
- PUD** Planned Unit District - BART Specific Plan



Pleasant Hill: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk Year/No	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
McNutt Ave.	2050	25	2	2	N	F	25	1	0	on	N	0		Y	G
Monte Cresta	200	25	2	2	N	F	25	1	0	on	N	0		Y	G
Rogers Ave.	1400	25	2	2	N	F	25	1	0	on	N	0		Y	G
Hudson Ave.	1250	25	2	2	N	F	25	1	0	on	N	0		Y	G
Sun Valley Ave.	1200	25	2	2	N	F	25	1	0	on	N	0		Y	G
Ecstasy Ave.	2400	25	2	2	N	F	25	2	0	on	N	0		Y	G
Minor Ave.	1050	25	2	2	N	F	25	1	0	on	N	0		Y	G
Via Del Sol	2300	25	2	2	N	F	25	2	0	off	N	0		Y	G
Pleasant Valley Dr.	1550	25	2	2	N	F	25	1	1	on	N	0		Y	G
Sun Valley Dr.	950	25	2	2	N	F	25	2	0	on	N	0		Y	G
Pleasant Ct.	300	25	2	2	N	F	25	0	0	on	N	0		Y	G
Sunnyvale Ave.	3400	25	2	2	N	G	25	1	1	off	N	0		Y	G
Wealey Ct.	450	25	2	2	N	G	25	0	0	off	Y	3		Y	G
Roxie Ln.	350	35	2	2	N	G	25	0	0	off	Y	3		Y	G
Corrie Ln.	350	35	2	2	N	G	25	0	0	off	Y	3		Y	G
Reiner Ln.	350	20	2	2	N	F	25	1	0	off	Y	3		Y	G
Carina Ct.	350	35	2	2	N	G	25	0	0	off	N	3		Y	G
Bellamy Ct.	300	35	2	2	N	P	25	0	0	off	Y	3		Y	G
Sunnyvale Pl.	250	20	2	2	N	F	25	0	0	off	N	0		Y	G
Suncreef Ct.	250	20	2	2	N	P	25	0	0	off	N	0		Y	G
Robbie Keith Ct.	250	20	2	1	N	F	25	0	0	off	N	0		Y	G
Erasmus Pl.	400	40	2	2	N	G	25	0	0	off	Y	0		Y	G
Roxanne Ct.	400	20	2	1	N	G	25	0	0	off	N	0		Y	G
Geary Ct.	300	20	2	2	N	F	25	1	0	none	N	0		Y	G
Lilke Ct.	250	15	2	1	N	F	25	0	0	none	N	0		Y	G
Arenda Ln.	300	25	2	2	N	F	25	0	0	none	N	0		Y	G
Geary Rd.	2950	50	2	2	N	F	25	0	0	none	N	0		Y	G
Alderwood Ln.	1000	15	2	1	N	P	25	1	0	none	N	0		Y	G
Cherry Ln.	2100	30	2	2	N	F	30	2	1	none	N	0		Y	G
Des Robles Ct.	250	25	2	2	N	G	25	0	0	none	N	0		Y	G
Briarwood Way	850	35	2	2	N	G	25	1	0	none	N	0		Y	G
Foss Ct.	100	35	2	2	N	G	25	0	0	none (9-1 lum)	N	0		Y	G
Briarwood Ct.	350	35	2	2	N	G	25	0	0	on	N	0		Y	G
Laird Ct.	150	30	2	2	N	G	25	0	0	on	N	0		Y	G
Santos Ln.	900	35	2	2	N	F	25	2	2	on	Y	3		Y	G
Las Juntas Way	4500	35	2	2	Y	F	25	2	1	on	N	0		Y	G
Del Hombro Ln.	1200	25	2	2	Y	F	25	0	0	on	N	0		Y	G
Honey Trail Ct.	200	15	1	1	N	VP	25	0	0	off	N	0		Y	G
Wayside Ln.	400	15	2	2	Y	G	25	0	0	off	N	0		Y	G
Wayside Ln.	4600	35	2	2	Y	G	25	1	1	on	Y	0		Y	G
Coggins Dr.	900	30	2	2	Y w trees	F	25	0	0	on	Y	0		Y	G
Elena Dr.	450	30	2	2	N	F	25	0	0	on	Y	0		Y	G
Juana Ct.	500	30	2	2	N	F	25	0	0	on	Y	0		Y	G
Elena Ct.	500	30	2	2	N	F	25	0	0	on	Y	0		Y	G
Clemson Ct.	400	25	2	2	N	F	25	1	0	on	Y	3		Y	G

Pleasant Hill: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Alt	Sidewalk Year/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Hurold Ct.	150	25	2	2	N	G	25	1	0	on	N	0		Y	G
Kinnel Ct.	150	20	2	2	N	G	25	1	0	on	N	0		Y	G
Le Jean Way	1150	35	2	2	N	G	25	1	0	on	N	0		Y	G
Nora Ct.	150	35	2	2	N	G	25	0	0	on	N	0		Y	G
Geri Ct.	150	35	2	2	N	G	25	0	0	on	N	0		Y	G
Eleanor Ct.	150	35	2	2	N	G	25	0	0	on	N	0		Y	G
Greenwood Cr.	1250	30	2	2	N	G	25	2	0	on	N	0		Y	G
Calle Nogales Way	900	30	2	2	N	G	25	1	0	none	N	0		Y	G
Calle Este.	200	30	2	2	N	G	25	0	0	on	N	0		Y	G
Myshaw Ct.	150	25	2	2	N	F	25	0	0	on	N	0		Y	G
Woodlawn Dr.	550	30	2	2	N	F	25	1	0	on	N	0		Y	G
Laddell Dr.	850	30	2	2	N	G	25	0	0	on	N	0		Y	G
Laddell Ct.	250	30	2	2	N	G	25	0	0	on	N	0		Y	G
Oberon Dr.	500	35	2	2	N	G	25	1	0	on	Y	0		Y	G
Titania Ct.	100	35	2	2	N	G	25	0	0	on	Y	0		Y	G
Mayhew Way	2950	40	2	2	Y	G	30	2	0	on	Y	0		Y	G
Leonic Ln.	550	25	2	2	N	G	25	1	0	on	N	0		Y	G
Pionest Ave.	1050	25	2	2	N	F	25	2	0	on	N	0		Y	G
Hail Ln.	1000	25	2	2	N	G	25	1	0	off	N	0		Y	G
Front Ave.	1100	25	2	2	N	G	25	1	0	off	N	0		Y	G
Gobel Way	450	25	2	2	N	F	25	0	0	off	N	0		Y	G
N. Main St.	3800	70	2	4	Y	G	25	0	3	2hr	Y	4		Y	G
Oak Park Blvd.	4000	30	2	2	Y	G	25	0	2	none	N	0		Y	G
Pinnam Blvd.	2000	40	2	2	Y	G	25	0	1	on	Y	4		Y	G
Treat Blvd.	5500	90	2	6	Y	G	40	0	7	none	Y	4		Y	G
Bancroft Rd.	4350	60	2	4	Y	G	35	0	4	none	Y	4		Y	G
Jones Rd.	3000	60	2	4	Y	G	35	0	2	none	N	0		Y	G
Baukirk Ave.	3200	40	2	4	Y	G	35	0	3	none	Y	4		Y	G
Oak Rd.	4300	60	2	4	Y	G	30	0	6	none	Y	4		Y	G
Wayne Dr.	700	45	2	4	Y	G	25	0	2	none	N	0		Y	G
Haven Ln.	650	15	2	1	N	F	25	0	0	none	N	0		Y	G
Lumber Ct.	300	20	2	1	N	F	25	0	0	none	N	0		Y	G
Cedarbrook Ct.	400	40	2	2	N	F	25	0	0	off	N	0		Y	G
Elmwood Dr.	1300	35	2	2	N	G	25	1	0	off	N	0		Y	G
Ravenwood Dr.	350	30	2	2	N	G	25	0	0	off	N	0		Y	G
Maywood Dr.	0	0	2	2	N	G	25	0	0	off	N	0		Y	G
Birch Dr.	350	30	2	2	N	G	25	0	0	off	N	0		Y	G
Elmwood Ct.	500	35	2	2	N	G	25	0	0	off	N	0		Y	G
Sheppard Rd.	900	30	2	2	N	G	25	1	0	off	N	0		Y	G
Jillian Ct.	400	25	2	2	N	G	25	0	0	off	Y	0		Y	G
Sheppard Ct.	500	35	2	2	N	G	25	1	0	on	Y	0		Y	G
Candétero Dr.	2600	40	2	2	N	G	25	4	1	none	Y	4		Y	G
N. Oak Dr.	700	45	2	2	N	G	25	0	0	on	Y	4		Y	G
Scemas Ln.	0	0	2	2	N	G	25	0	0	off	Y	0		Y	G

Pleasant Hill: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk Year/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
N. Creek Cr.	2000	45	2	2	N	G	25	0	0	off	Y	0		Y	G
N. Creek Pl.	200	45	2	2	N	G	25	0	0	off	Y	0		Y	G
Olmo Way	950	35	2	2	N	G	25	2	0	off	Y	0		Y	G
Pomar Way	1200	35	2	2	N	G	25	1	1	off	Y	0		Y	G
Candelero CL	950	40	2	2	N	G	25	0	0	on	Y	3	2	Y	G
Candelero Pl.	400	40	2	2	N	G	25	0	0	on	Y	3	2	Y	G
Countrywood CL	1300	40	2	2	N	G	25	1	0	on	Y	3	2	Y	G
Jones Rd.	3000	40	2	2	Y	G	35	0	2	none	N	0		Y	G
Parnell CL	700	15	2	2	N	F	25	0	0	off	N	0		Y	G
Robbie Rd.	600	40	2	2	N	F	25	0	0	none	N	0		Y	G

Summary of North San Francisco Site Description

APARTMENTS

There are one-hundred and ninety-seven (197) apartment complexes in the North San Francisco survey area with approximately 3,330 units. Apartment complexes are scattered throughout the survey area with the greatest concentration of apartments along Broderick (29 apartment complexes and 852 units). Baker, the next block to the west of Broderick has 8 complexes and 227 units. McAllister, Golden Gate, Fulton, and Grove run east/west past Broderick and Baker which run north/south. There are 9 apartment complexes and 233 units on McAllister, 11 apartments and 171 units along Golden Gate, 10 apartments and 145 units on Fulton, and 6 apartments and 65 units on Grove. This area is bordered by Fell on the south with seven complexes and 90 units; Masonic to the east having 6 apartments and 70 units; and on the north, Turk with 9 apartments and 116 units.

BART

There is no BART service in this study area.

BUS SERVICE

North San Francisco has 20 bus routes serving the survey area. There are peak express buses leaving at seven (7) minute intervals from 6:52 a.m. to 8:37 a.m. and from 4:30 p.m. to 6:20 p.m. An express to Richmond leaves beginning at 5:05 p.m. continuing at approximately 10 minute intervals through 6:22 p.m. In the Financial District buses leave and arrive at 6 minute intervals throughout the day and at 4 minute intervals during the peak commute. Other lines travel at approximately 30 minute intervals during the off peak.

BUSINESS

There are approximately 470 businesses located within the North San Francisco survey area. Included in this is the University of San Francisco, two hospitals, two medical centers, two hospital annexes and a convalescent hospital as well as a cooking school, two mortuary schools, two pre-schools, a nursery school, and an elementary school. Also included are 27 churches and two child care centers along with a wide assortment of retail outlets and services (thirty-seven (37) liquor stores and bars, eight gas stations, and seventeen drycleaners).

Main business locations are along Geary Boulevard, running east and west, and along Divisadero Street, running north and south. Other businesses are located along California between Spruce and Laurel, at the corner of Presidio Avenue and California Street, and near the University of San Francisco along Masonic Avenue near Fulton and McAllister Streets. There are also two small business locations at the western border of the survey area along Arguello Boulevard.

PARKS

This site is north of and adjacent to Golden Gate Park. There are several public areas scattered throughout the survey site. However, none are designated as parks.

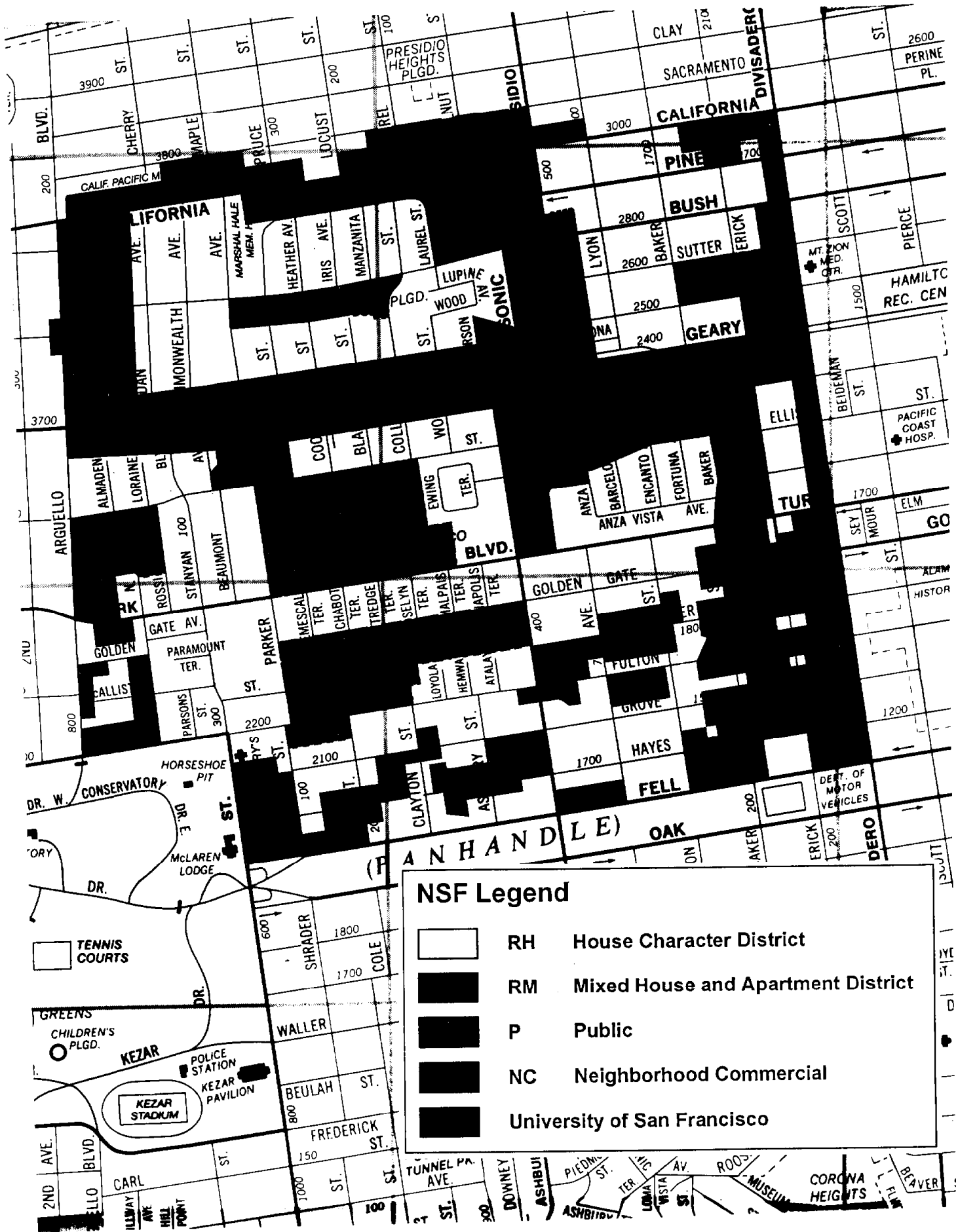
SCHOOLS

There are no public schools located in the survey area.

SINGLE FAMILY RESIDENTIAL

Single family residential neighborhoods are interspersed with multi family, commercial and public areas. There is less area designated as single family residential in the North San Francisco Survey area than in any of the other Bay Area survey sites.

NORTH SAN FRANCISCO SURVEY SITE



NSF Legend

	RH	House Character District
	RM	Mixed House and Apartment District
	P	Public
	NC	Neighborhood Commercial
		University of San Francisco

North San Francisco: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk Year/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Broderick St.	3100	40	2	2	N	G	25	7	2	Y	Y	10			
St. Joseph Ave.	1550	60	2	2	Y	G	25	3	1	Y	Y	6			
Beaumont Ave.	900	35	2	2	N	G	25	2	0	Y	Y	10			
Parker Ave.	4200	40	2	2	Y	G	25	4	3	Y 2-hr	Y	6			
Suzyan St.	2550	50	2	2	Y	G	25	0	4	Y 2-hr	Y	10			
Hayes St.	5000	40	2	2	Y	G	25	7	4	Y 2-hr	Y	10			
Clayton St.	1000	45	2	2	N	G	25	3	1	Y 2-hr	Y	12			
Baker St.	2900	70	2	2	Y	G	25	5	2	Y 2-hr	Y	6			
Anza Vista Ave.	1650	50	2	2	Y	G	25	2	0	Y 2-hr	Y	6			
Vega St.	300	40	2	2	Y	F	25	0	0	Y 2-hr	Y	6			
Nido St.	500	40	2	2	Y	F	25	1	0	Y 2-hr	Y	4			
Terra Vista Ave.	1350	50	2	2	N	G	25	0	0	Y 2-hr	Y	6			
Eddy St.	700	40	2	2	Y	G	25	1	0	Y 2-hr	Y	8			
Ellis St.	700	40	2	2	N	G	25	1	0	Y 2-hr	Y	3			
Fortuna Ave.	650	40	2	2	N	F	25	0	0	Y 2-hr	Y	3			
Encanto Ave.	600	40	2	2	N	F	25	0	0	Y 2-hr	Y	3			
Barcelona Ave.	600	40	2	2	N	F	25	0	0	Y 2-hr	Y	6			
O'Farrell St.	2600	50	2	2	Y	G	25	2	4	Y 2-hr	Y	8			
Central Ave.	2000	40	2	2	N	F	25	4	2	Y 2-hr	Y	3			
Annapolis Ter.	350	50	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Tunapais Ter.	350	50	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Roselyn Ter.	350	50	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Kittredge Ter.	350	50	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Chabot Ter.	350	50	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Tennessee Ter.	350	50	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Golden Gate Ave.	1000	60	2	2	Y	G	25	5	2	Y 2-hr	Y	3			
Mc Allister St.	4100	45	2	2	N	F	25	7	1	Y 2-hr	Y	3			
Alanya Ter.	250	30	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Hemway Ter.	250	30	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Loyola Ter.	250	30	2	2	N	F	25	1	0	Y 2-hr	Y	3			
Cole St.	1000	50	2	2	N	G	25	3	1	Y 2-hr	Y	10			
Abbey St.	1000	60	2	2	N	F	25	3	1	Y 2-hr	Y	6			
Fell St.	5050	80	1	4	N	G	30	1	8	Y 2-hr	Y	10			
Schneider St.	1000	50	2	2	N	G	25	2	1	Y 2-hr	Y	12			
Grove St.	4600	50	2	2	N	F	25	7	0	Y 2-hr	Y	8			
Lorraine Ct.	350	30	2	2	N	G	25	0	0	Y 2-hr	Y	4			
Almaden Ct.	400	30	2	2	N	G	25	0	0	Y 2-hr	Y	4			
Rossi Ave.	850	30	2	2	N	G	25	0	0	Y 2-hr	Y	4			
Edward St.	850	30	2	2	N	F	25	1	0	Y 2-hr	Y	4			
Anza St.	3500	60	2	4	Y	G	25	1	3	Y 2-hr	Y	5			
Willard St.	1000	40	2	2	N	F	25	3	0	Y 2-hr	Y	6			
Golden Gate Ave.	4500	40	2	2	N	F	25	1	0	Y 2-hr	Y	6			
Paramount Ter.	250	40	2	2	N	F	25	0	0	Y 2-hr	Y	6			
Parsons St.	400	40	2	2	N	G	25	1	0	Y 2-hr	Y	8			

North San Francisco: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk Yes/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appar
Arguello Blvd.	4300	80	2	4	Y	G	25	7	0	Y 2-hr	Y	12			
Palm Ave.	1700	60	2	2	N	F	25	3	0	Y 2-hr	Y	6			
Commonwealth Ave.	1750	60	2	2	N	G	25	3	0	Y 2-hr	Y	6			
Jordan Ave.	1750	60	2	2	N	F	25	2	1	Y 2-hr	Y	6			
Spruce St	1800	30	2	2	N	G	25	2	1	Y 2-hr	Y	5	3		
Cook St	1250	30	1	1	N	G	25	1	0	Y 2-hr	Y	10			
Heather Ave.	600	35	2	2	N	G	25	0	0	Y 2-hr	Y	4			
Mayfair Dr.	1050	30	2	2	N	G	25	0	0	Y 2-hr	Y	4			
Iris Ave.	600	40	2	2	N	G	25	0	0	Y 2-hr	Y	4			
Manzanita Ave.	600	40	2	2	N	G	25	0	0	Y	Y	4			
Laurel St	7510	45	2	2	N	G	25	1	1	Y	Y	4			
Lupine Ave.	550	35	2	2	N	G	25	1	0	Y	Y	4			
Wood St	950	35	2	2	N	F	25	1	0	Y	Y	4			
Collins St	2100	35	2	2	N	F	25	1	1	Y 2-hr	Y	6			
Blake St	1150	35	2	2	N	F	25	1	0	Y 2-hr	Y	6			
Masonic Ave.	5050	90	2	6	N	G	30	8	2	Y 2-hr	Y	10			
Lyon St	4150	40	2	2	N	F	25	3	3	Y 2-hr	Y	6			
Presidio Ave.	1750	50	2	2	Y	F	25	0	5	Y 2-hr	Y	6			
Bush St	2000	50	1	3	Y	G	25	4	1	Y 2-hr	Y	10			
Sutter St	2000	35	2	2	Y	F	25	0	5	Y 2-hr	Y	6			
Pine St	2000	60	1	3	Y	F	25	2	3	Y 2-hr	Y	10			
Pont St	2000	60	2	3	Y	F	25	2	0	Y 2-hr	Y	10			
Leona Ter.	0	0	2	2	N	G	25	0	0	none	Y	3			
Garden St	500	20	1	1	N	G	25	0	0	Y 2-hr	Y	8			
Broderick St	4750	35	2	2	N	F	25	9	5	Y 2-hr	Y	8	10		
Baker St	1800	45	2	2	F	F	25	1	5	Y 2-hr	Y	8			
Eaton Ct	0	0	2	2	N	G	25	0	0	Y 2-hr	Y	0			
Fulton St	6150	65	2	4	Y	G	30	1	8	Y 2-hr	Y	8	10		
Turk Blvd.	6100	65	2	4	Y	G	25	0	5	Y metered	Y	10			
Geary Blvd.	4900	100	2	6	Y	G	25	1	8	Y 2-hr	Y	10			
Euclid Ave.	3900	50	2	2	Y	G	25	5	3	Y 2-hr	Y	10			
California St	5750	80	2	4	Y	G	25	0	10	Y 2-hr	Y	10			
Divisadero St	5300	100	2	4	Y	G	25	0	13	Y metered	Y	6	8		
Emerson St	500	30	2	2	N	G	25	1	0	Y 2-hr	Y	10			
Ewing Ter.	1400	35	2	2	N	G	25	0	0	Y 2-hr	Y	3			

Summary of South San Francisco Site Description

APARTMENTS

This site contains 20 apartment complexes with a total of 403 units. Most apartments are located along Monterey Boulevard at the southeast border of the survey area. The largest apartment complex, with 144 units is on Woodside Avenue at the northwest border of the survey area.

BART

BART is located at the far southeast of the survey area just north of Highway 280, and is surrounded by commercial development.

BUS SERVICE

This survey area has one bus line serving it at approximately one-half hour intervals throughout the day during the week, and at approximately one hour intervals during the week-end.

BUSINESS

There are eighty-seven (87) businesses located in this survey area, including five churches. Most businesses are located along Monterey Boulevard at the southern boundary of the site, along Portola at the northeast, and surrounding the BART station at Glen Park and Circular Avenue. There is a higher proportion of dry cleaners (8) and gas stations (5) in this survey area than in other survey areas.

PARKS

With seven (7) parks, this survey area has more parks than the other survey areas. Mt. Davidson Park is located in the center of the survey site, several smaller parks are scattered throughout the area and one larger park stretches along O'Shaughnessy Boulevard.

SCHOOLS





This survey site has five schools within its borders, also the greatest number of schools of any other survey site.

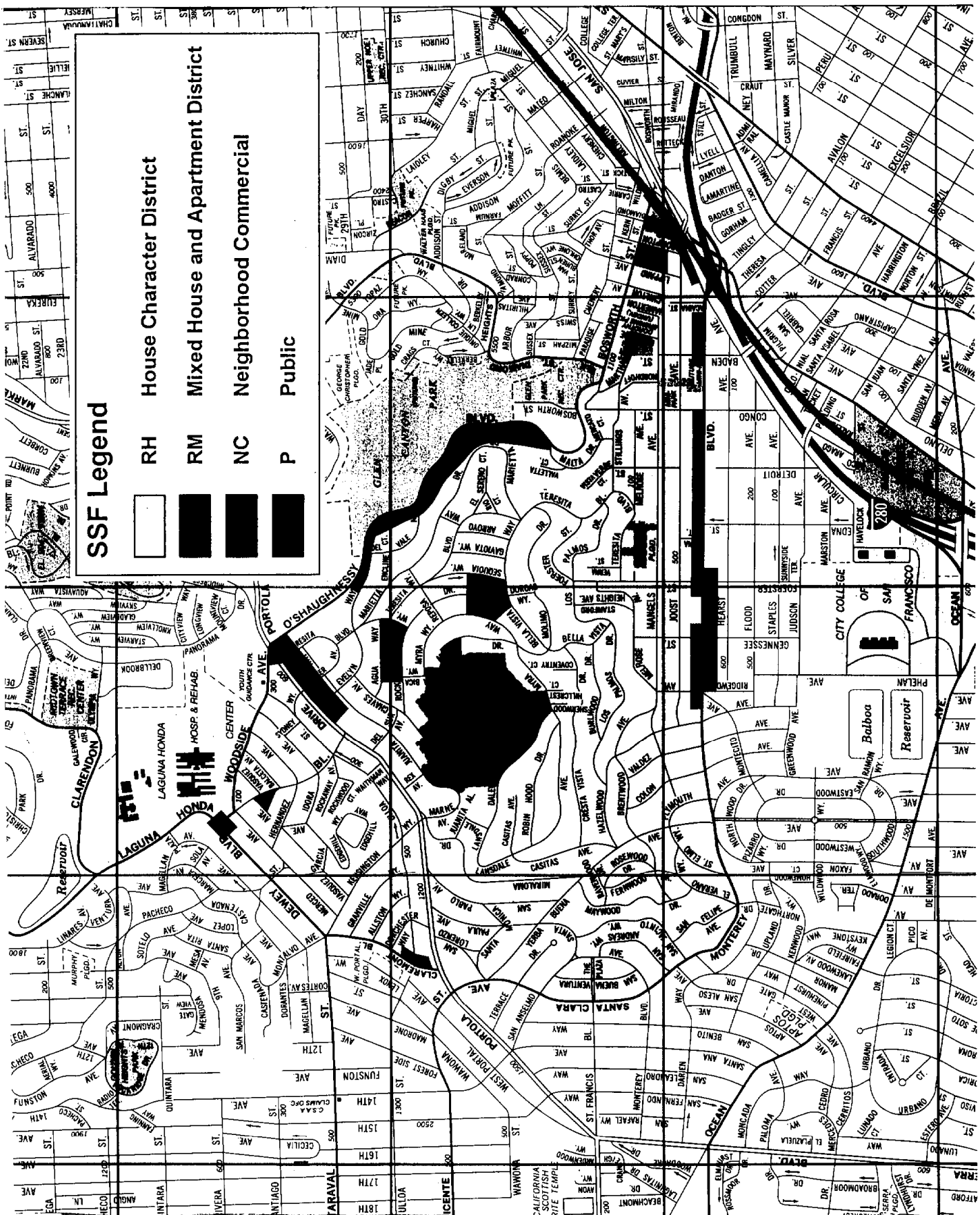
SINGLE FAMILY RESIDENTIAL

This site is predominantly single family residences with few multi-family areas and commercial districts.

SOUTH SAN FRANCISCO SURVEY SITE

SSF Legend

-  House Character District
-  Mixed House and Apartment District
-  Neighborhood Commercial
-  Public



South San Francisco: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk year/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Acevia St.	400	25	2	0	N	F	25	1	0	Y 2hr	Y	12			
Agua Way	1000	30	2	2	N	G	25	1	0	Y	Y	4			
Allison Way	700	30	2	2	N	F	25	1	0	Y 2hr	Y	3			
Arroyo Way	900	35	2	1	N	G	25	0	0	Y	Y	4			
Balden St.	900	45	2	2	N	F	25	2	0	Y	Y	6			
Balceta Ave.	950	35	2	2	N	G	25	2	0	Y	Y	3	3		
Bella Vista Way	2950	35	2	2	N	F	25	1	0	Y	Y	4			
Bonworth St.	2050	60	2	4	Y	F	25/35	3	1	Y	Y	6			
Brentwood Ave.	2900	35	2	2	N	G	25	1	0	Y	Y	4			
Brompton Ave.	500	25	1	2	N	F	25	2	0	Y 4hr	Y	12			
Burkwood Dr.	1200	35	2	2	N	F	25	0	0	Y	Y	4			
Burnside Ave.	350	45	2	2	N	F	25	0	0	Y	Y	6			
Caimitas Ave.	2150	45	2	2	N	F	25	1	0	Y	Y	4			
Chaves Ave.	1150	30	2	2	N	G	25	0	0	Y	Y	4			
Chilton Ave.	500	40	2	2	N	G	25	1	0	Y 2hr	Y	5			
Circular Ave.	1250	30	2	2	Y	F	25	0	0	Y off Street	Y	3			
Claremont Blvd.	1500	45	2	2	Y	G	25	3	0	Y	Y	3			
Colon Ave.	1200	35	2	2	N	F	25	1	0	Y	Y	4			
Conroy St.	1800	40	2	2	N	F	25	3	0	Y	Y	6			
Coventry Ct.	300	45	2	2	N	F	25	0	0	Y	Y	4			
2700	2700	45	2	2	N	F	25	0	0	Y	Y	4			
Cresta Vista Dr.	1750	50	2	2	N	G	25	0	0	Y	Y	4			
Dalewood Way	600	30	2	2	N	G	25	2	0	Y	Y	4			
Del Sur Ave.	1000	35	2	2	N	G	25	1	0	Y	Y	4			
Del Vale Ave.	1600	45	2	2	N	F	25	0	0	Y	Y	6			
Detroit St.	1900	60	2	4	Y	G	25	2	1	Y 2hr	Y	3	4		
Dewey Blvd.	400	30	2	2	Y	G	25	0	1	Y metered	Y	6			
Diamond St.	300	0	2	2	N	G	25	0	0	Y	Y	4			
Dorcas Way	600	35	2	2	N	G	25	0	0	Y	Y	4			
Dorchester Way	2050	20	2	2	N	G	25	3	0	Y 2hr	Y	4			
Edgehill Way	600	35	2	2	N	F	25	0	0	N	Y	3			
Edna St.	250	35	2	2	N	G	25	1	0	Y	Y	6			
El Serrano Ct.	600	35	2	2	N	G	25	0	0	Y	Y	4			
El Verano Way	1250	40	2	2	N	G	25	2	0	Y	Y	4			
Enclave Ct.	600	35	2	2	N	G	25	0	0	Y	Y	4			
Evelyn Way	2250	30	2	2	Y (1)	G	25	1	2	Y	Y	3			
Fernwood Dr.	1000	40	2	2	N	G	25	2	0	Y	Y	4			
Foerster St.	2650	45	2	2	N	G	25	2	0	Y	Y	4			
Fowler Ave.	850	30	2	2	N	F	25	2	1	Y	Y	4			
Garcia Ave.	600	35	2	2	N	G	25	1	0	Y	Y	4			
Gaviota Way	650	35	2	2	N	G	25	2	0	Y	Y	3	3		
Genesee St.	850	45	2	2	N	F	25	0	0	Y	Y	4			
Genesee St.	1150	30	2	2	N	G	25	2	0	Y	Y	3			
Granville Way	250	45	2	2	N	F	25	0	0	Y	Y	6			
Hamerton Ave.	1250	35	2	2	N	F	25	0	0	Y	Y	4			
Hazelwood Ave.			2	2	N	F	25	4	0	Y	Y	4			

South San Francisco: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Ave	Sidewalk Yes/no	Sidewalk Width	Shelwalk Set Back	Light	Road Appear
Hernandez Ave.	1800	35	2	2	N	G	25	2	1	Y 4hr	Y	3			
Hillcrest Cl	200	35	2	2	N	F	25	0	0	Y	Y	4			
Idora Ave.	2000	35	2	2	N	G	25	4	0	Y 4hr	Y	4			
Isols Way	250	30	2	2	N	G	25	1	0	Y	Y	4			
Josol Ave.	6050	45	2	2	N	F	25	1	0	Y 2hr	Y	6			
Juanita Way	2250	35	2	2	N	G	25	0	0	Y	Y	4			
Kennington Way	1800	20	2	1	N	F	25	3	0	Y 2hr	Y	4			
La Bica Way	250	30	2	2	N	G	25	0	0	Y	Y	4			
Laguna Honda Blvd.	2000	60	2	2	Y (L)	G	25	2	1	Y 4hr	Y	4			
Lanefale Ave.	1900	0	2	2	N	G	25	0	0	Y	Y	4			
Lippard Ave.	600	25	1	2	N	F	25	1	0	Y 4hr	Y	12			
Los Palms Dr.	4600	45	2	2	N	F	25	0	0	Y	Y	4			
Malta Dr.	1150	0	2	2	Y	G	25	2	0	Y	Y	6			
Mangels Ave.	6150	45	2	2	N	F	25	2	0	Y	Y	4			
Manetta Dr.	3900	35	2	2	N	G	25	2	0	Y	Y	4			
Mame Ave.	800	40	2	2	N	P	25	0	0	Y	Y	4			
Martha Ave.	1700	30	2	2	N	G	25	2	0	Y	Y	6			
Maywood Dr.	2250	40	2	2	N	F	25	1	0	Y	Y	6			
Melrose Ave.	100	35	2	2	N	G	25	0	0	Y	Y	4			
Mercedo Cl	1800	35	2	2	N	G	25	1	0	Y	Y	3	3		
Merced Ave.	2700	40	2	2	Y (I)	G	25	1	1	Y	Y	3			
Miss Loma Dr.	3150	35	2	2	N	F	25	1	0	Y	Y	4			
Molimo Dr.	9500	60	2	4	Y	F	30	6	2	Y 2hr	Y	6			
Monterey Blvd.	2950	35	2	2	N	F	25	0	0	Y	Y	4			
Myra Way	500	45	2	2	N	F	25	0	0	Y	Y	6			
Nordoff St	6600	40	2	4	Y	G	25/35	0	0	Y	Y	4			
O'Shaughnessy Blvd.	500	35	1	1	N	G	25	1	1	Y 4hr	Y	4			
Omar Way	350	35	2	2	Y	G	25	1	0	Y	Y	3	3		
Pacheco St	700	40	2	2	Y (GR)	G	25	2	0	Y	Y	4			
Plymouth Way	5200	60	2	4	Y	G	25	1	4	Y 2hr	Y	3	4		
Portola Dr.	550	30	2	2	N	F	25	1	0	Y	Y	4			
Ravenwood Dr.	800	30	2	2	N	G	25	1	0	Y	Y	4			
Reposon Way	300	50	2	2	N	G	25	1	0	Y	Y	4			
Rex Ave.	600	40	2	2	N	F	25	1	0	Y	Y	4			
Ridgewood Ave.	250	35	2	2	N	G	25	0	0	Y	Y	4			
Rio Cl	1600	0	2	2	N	G	25	0	0	Y	Y	4			
Robin Hood Dr.	750	30	2	2	N	G	25	1	0	Y	Y	3			
Rockaway Ave.	1500	30	2	2	N	G	25	0	0	Y	Y	4			
Rockdale Dr.	500	30	2	2	N	G	25	0	0	Y	Y	3			
Rockwood Cl	800	30	2	2	N	G	25	0	0	Y	Y	4			
Rosewood Dr.	1150	25	2	2	Y 40	G	25	1	0	Y	Y	3	5		
San Andreas Way	1700	45	2	2	N	G	25	2	0	Y	Y	3	5		
San Anselmo Ave.	1050	25	2	2	N	G	25	0	0	Y	Y	3	6		GR
San Buena Ventura			2	2	N	G	25	0	0	Y	Y	3			

South San Francisco: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Aid	Sidewalk Yes/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
San Felipe Ave.	950	30	2	2	N	G	25	1	0	Y	Y	4			
San Jacinto Way	1700	30	2	2	N	G	25	2	0	Y	Y	4			
San Lorenzo Ave.	850	40	2	2	Y (1)	G	25	2	0	Y	Y	3			GR
San Pablo Ave.	1750	30	2	2	N	G	25	2	0	Y	Y	6			
Santa Clara Ave.	2600	40	2	2	Y	G	25	4	1	Y 2hr	Y	4	10		GR
Santa Monica Ave.	1200	25	2	2	Y	G	25	0	0	Y	Y	3	6		GR
Santa Paula Ave.	1400	45	2	2	N	G	25	2	0	Y	Y	3	5		GR
Sequoia Way	1150	35	2	1	N	G	25	2	0	Y	Y	4			
Sherwood Ct.	200	35	2	2	N	F	25	0	0	Y	Y	4			
St. Elmo Way	1000	40	2	2	N	G	25	2	0	Y	Y	4			GR
St. Frances Blvd.	550	80	2	2	N	G	25	1	0	Y	Y	3	6		
Stanford Heights	800	45	2	2	N	F	25	1	0	Y	Y	4			
Stillingr Ave.	1450	40	2	2	N	P	25	0	0	Y	Y	6			
Sydney Way	600	35	2	2	N	G	25	1	0	Y 4hr	Y	4			
Territa Blvd.	6550	50	2	2	Y (1)	G	25	3	0	Y	Y	6			GR
Terraces Dr.	700	25	2	2	N	G	25	1	0	Y	Y	3	10		
Ulloa St.	4100	35	2	2	N	G	25	5	0	Y 2hr	Y	3			
Valdez Ave.	1000	35	2	2	N	F	25	1	0	Y	Y	4			
Valdita Ct.	300	0	2	2	Y	G	25	0	0	Y	Y	4			
Vasquez Ave.	2050	35	2	2	N	G	25	2	0	Y	Y	3	3		
Verna St.	400	25	2	2	N	G	25	0	0	Y	Y	4			
Vista Verde Ct.	400	35	2	2	N	F	25	0	0	Y	Y	6			
Waikman Way	200	35	2	2	N	P	25	1	0	Y	Y	3			
Woodrife Ave.	2200	60	2	4	Y	G	35	0	3	Y 2hr	Y	4			
Yerba Buena Ave.	3550	40	2	2	N	G	25	4	0	Y	Y	4			

Summary of San Jose Site Description

APARTMENTS

There are three (3) apartment complexes in the San Jose study area, with 390 units. All three complexes have more than 100 units each. In each of the other survey sites there is a mix of large and small apartment complexes with small complexes prevailing. All complexes are located together on Branham Drive and the Almaden Expressway along the eastern border of the survey site.

BART

San Jose has no BART service.

BUS SERVICE

This site is served by four (4) bus routes. Buses arrive at approximately 30 minute (ranging from 26 to 39 minutes) intervals from 6:26 a.m. to 10:14 a.m. and 3:53 p.m. to 7:16 p.m. Service intervals during the middle of the day are approximately 60 minutes. Week-end service is provided at sixty (60) minute intervals on some lines and at thirty (30) minute intervals on others.

BUSINESS

This survey area has 96 businesses, including 7 churches. Commercial areas are designated at the northeast and southwest and southeast corners of the survey area and along Branham Boulevard at the southern border of the survey area. Business are concentrated in three (3) of the four (4) corners of the survey area and along a major east/west street.

PARKS

The San Jose survey area has one park, Moore Park, located on Hillsdale and Cherry Boulevards, near the center of the northern site border.

SCHOOLS

There are two elementary schools in the survey area. They are Reed Elementary School on Jacob Avenue which runs through the center western portion of the survey area, and Valley View Elementary School on Kimberly Drive in the northeast quadrant of the survey area. Valley View Elementary school also has a pre-school and daycare center.

SINGLE FAMILY RESIDENCES

This site is predominantly single family residences with a low residential density. The only apartments are concentrated along four (4) blocks near the expressway.

SAN JOSE SURVEY SITE

B - 21

San Jose: Site Description

Name	Length (feet)	Width (feet)	Twoway	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk Yes/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Hilldale Ave.	7900	120	Y	6	Y	G	40	0	3	N. side on street	Y	3	4	Y	G
Newberry Dr.	1150	40	Y	2	N	G	25	1	0	on street	Y	6	4	Y	G
Meridian Ave.	4800	80	Y	4	Y	G	35	0	3	none	Y	3	5	Y	G
Branham Ln.	6850	80	Y	4	Y	G	35	0	5	none	Y	3	5	Y	G
Almaden Rd.	1700	25	Y	2	Y	G	45	0	1	none	Y	3	5	Y	G
Cheshire Dr.	1100	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Ryan Ave.	3950	30	Y	2	N	G	25	4	0	on street	Y	3	4	Y	G
Jacob Ave.	2850	30	Y	2	Y	G	30	1	1	on street	Y	3	4	Y	G
Willowpark Dr.	1000	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Willowood Dr.	1000	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Willowgate Dr.	2000	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Willowbrook Dr.	2000	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Willowdale Dr.	2000	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Willowview Dr.	1150	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Willowmont Ave.	4350	30	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Jarvis Ave.	1000	40	Y	2	Y	G	30	2	2	on street	Y	3	4	Y	G
Blossomview Dr.	4250	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Chambers Dr.	1550	30	Y	2	N	G	25	0	0	on street	Y	3	4	Y	G
Wilcox Ave.	700	30	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Corning Dr.	650	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Esalmo Ave.	950	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Corno Ln.	200	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Gaylor Ln.	200	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Elgin Ln.	200	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Beacon Ln.	200	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Cardin Ave.	700	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Bald Eagle Way	800	30	Y	2	N	G	25	1	0	on street	Y	3	4	Y	G
Pinail Ct.	150	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Sagehen Ct.	150	30	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Monterey Dr.	1900	30	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Cherry Ave.	4400	60	Y	3	Y	G	30	1	2	on street	Y	3	4	Y	G
Kipling Ct.	400	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Cherry Ave.	400	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Los Palos Way	750	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Los Palos Ct.	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Casa Grande Ct.	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Casa Grande Way	950	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
El Coral Way	900	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
El Coral Ct.	250	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Stark Way	150	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Yolanda Ct.	200	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Gaucho Ct.	200	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Adobe Ct.	150	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Marka Ave.	1100	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G

San Jose: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Att	Sidewalk Yes/no	Sidewalk Width	Sidewalk Set Back	Light	Road Apppear
Hugo Ln.	300	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Quinlan Ln.	500	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Quartz Way	550	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Kimberly Ct	300	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Kimberly Dr.	3850	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Church Dr.	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Fairhaven Dr.	800	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Fairhaven Ct	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Fairhaven CL	350	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Invois Way	2000	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Myrda Ave.	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Lupine Ct	550	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Overbrook Dr.	500	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Zisch Dr.	700	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Carlson Way	700	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Lindsay Way	1400	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Carris Lee Way	2250	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Rodney Dr.	600	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Woodcrest Dr.	600	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Woodmont Dr.	3350	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Vismont Dr.	2400	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Gardendale Dr.	2400	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Peadilly Dr.	1150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Karie Ann Way	500	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Mary Lee Way	1100	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Jenkins Ave.	1950	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Pembriidge Dr.	1600	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Pembriidge Ct.	650	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Buckingham Dr.	650	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Montmorency Ct.	350	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
George Oaks Dr.	900	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Eleton Way	1100	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Hauck Dr.	1150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Estelle Ave.	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Thompson Ave.	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Neasa Dr.	200	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Shaw Dr.	2700	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Woodson CL	200	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Jarvis Ct.	200	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Jarvis Pl.	200	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
La Heina Way	650	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Wainma Ct	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Wainma Ct	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Heanlet Pl.	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Calle de Suarda	2250	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Corte de Boleyn	200	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G

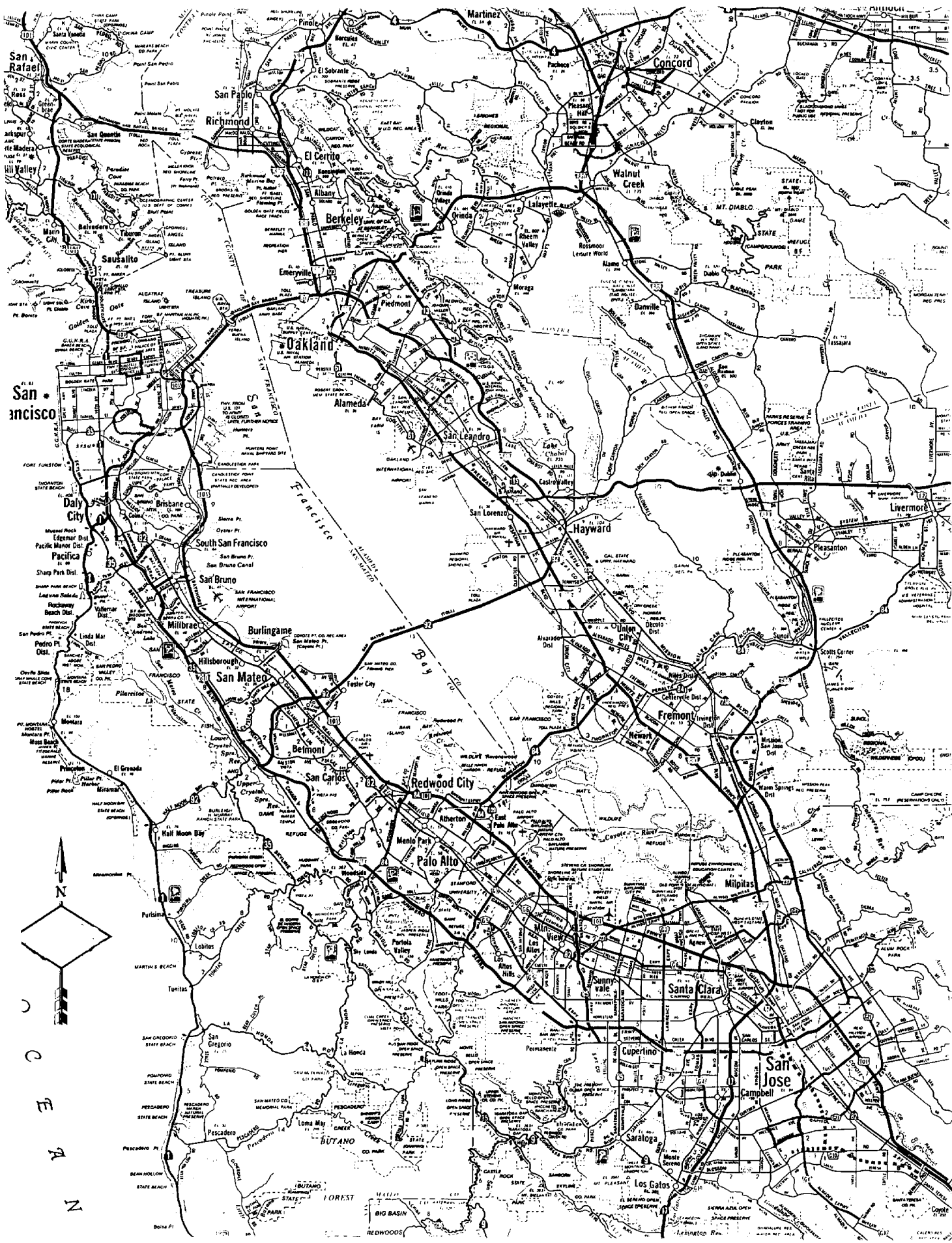
San Jose: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park At	Sidewalk Year/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
Calle de Farrar	1150	60	Y	2	Y	G	25	2	0	on street	Y	3	4	Y	G
Calle de Arroyo	400	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Calle de Azis	1200	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Corte de Tchaik	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Calle de Tosca	850	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Tempico	800	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Casa de Ponselle	850	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Corte de Moffo	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Hillbrook Dr.	1950	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Roadhunt Ave.	850	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Glencrest Dr.	950	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Glencrest Ct.	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Glencrest Way	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Hastings Ave.	850	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Hill Crest Dr.	750	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Glencrest Ct.	750	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Hillal Ave.	2850	60	Y	2	Y	G	25	3	0	on street	Y	3	4	Y	G
Duggan Dr.	600	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Silvercrest Dr.	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Coburn Ln.	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Coburny Ct.	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Rivier Dr.	800	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Glacier Dr.	2800	60	Y	2	Y	G	25	3	0	on street	Y	3	4	Y	G
Melvind Dr.	950	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Normanville Dr.	650	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Pinchurn Dr.	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Ross Park Dr.	1200	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Ross Park Ct.	150	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Courtyard Dr.	1250	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Seaney Dr.	900	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Leonardo Ave.	500	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Boysen Dr.	850	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Robb Ave.	200	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Silva Ave.	750	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Cresthaven Ln.	850	25	Y	2	Y	G	25	1	0	off street	Y	3	4	Y	G
Lizzie Ln.	450	60	Y	2	Y	G	25	1	0	on street	Y	4	4	Y	G
Propper Ave.	850	60	Y	2	Y	G	25	1	0	on street	Y	4	4	Y	G
Briarlen Dr.	2000	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Greenmoor	950	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Knolligen Way	600	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Laurelton Ct.	350	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Lynhurst Way	1350	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G
Lynhurst Ct.	350	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Renwick Ct	400	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G

San Jose: Site Description

Name	Length (feet)	Width (feet)	Two-way	Number of Lanes	Divided	Condition	Speed Limit	Stop Signs	Stop Lights	Park Aut	Sidewalk Yes/no	Sidewalk Width	Sidewalk Set Back	Light	Road Appear
St. Croix Ct.	400	60	Y	2	Y	G	25	0	0	on street	Y	3	4	Y	G
Desin Dr.	800	60	Y	2	Y	G	25	1	0	on street	Y	3	4	Y	G

RELATIVE LOCATION OF ALL BAY AREA SURVEY SITES



Land Use and Travel Behavior

Appendix C: Survey Data Files

Contents:

Davis Survey Files	C-1
Bay Area Survey Files	C-2
Mailing Address Data Base Used for the Bay Area Household Survey and Data Files Summarizing Survey Results	C-3

Davis Survey Data Files

The data files are developed for the phases of the survey or a particular question which requires a separate file. Each phase of the survey focused on one particular segment of the study. Phase-0 is the one-page recruitment questionnaire. Phase-1 is a background questionnaire. Phase-2 is the household questionnaire, and Phase-3 is a Transportation and Urban Life questionnaire. The travel Diary is the fourth survey for the Davis pilot survey. Copies of each survey can be found in Appendix A. In order to maintain confidentiality, address files are not made available. The names of the data files for each survey are listed below. The files are available with supporting documentation.

Davis Phase-0 (Will you participate) data files:	PH0DAVIS.DBF
Davis Phase-1 (Background) data files:	BACKEXT.DBF
Davis Phase-2 (Household) data files:	PH2EXT.DBF
Davis Phase-3 (Individual) data files:	PH3AEXT.DBF, PH3BEXT1.DBF, PH3BEXT2.DBF, PH3CEXT.DBF, PH3DEXT.DBF,
Davis Trip Diary data files:	DAVISTRI.DBF,

Bay Area Survey Data Files

The data files for the Bay Area surveys are developed for the phases of the survey or a particular question which requires a separate file or a combined file. Each phase of the survey focused on one particular segment of the study. Phase-0 is the one page recruitment questionnaire. Phase-1 is the household questionnaire. Phase-2 is the individual questionnaire. The travel diary is the fourth survey for the Bay Area survey. Copies of each survey follow. As with the Davis survey, address files are not made available. The names of the data files for each survey are listed below. The files are available with supporting documentation.

Will You Participate	ARBPH0.TXT
Household Questionnaire	PH1EXT.TXT, VEH2.TXT
Personal Travel Diary	TRIP.TXT, FREQTRIP.TXT
Individual Questionnaire	PH2EXT1.TXT, PH2XT2.TXT
Combination file	HOUSE.TXT

Mailing Address Data Base Used for the Bay Area Household Survey and Data Files Summarizing Survey Results

Sample households were selected randomly from each study site based on mailing address. Mailing addresses were collected through a Florida company that provides addresses for marketing uses.

In order to develop a list of residential mailing addresses, carrier route numbers, a post office term for a specific delivery area, were needed because mail marketing firms requested carrier route numbers before furnishing a mailing list. For the Pleasant Hill and Concord sites Carrier Route Information System (CRIS) sheets were obtained by a site-visit to each post office. San Jose mailed the necessary sheets, and the CRIS information for San Francisco had to be obtained through a central Post Office facility in Memphis, Tenn.

Since the Post Office does not release individual addresses, a list of carrier route numbers for each site was developed by using detailed zoning and plot maps in conjunction with the CRIS sheets. Streets falling within each site's boundaries could be matched to a particular carrier route number and the total site-specific carrier route numbers for each of the five Bay Area sites provided the information necessary for a mail marketing firm to generate five residential mailing lists on diskettes.

Data Files

Data from the Personal Travel Diary, Household Questionnaire and Individual Questionnaires was entered using DBASE IV. DBASE was chosen for data entry for several reasons. First, data from DBASE can easily be translated into Word Perfect, ASCII files and various statistical packages. Second, the data entry screen can be customized for ease of data entry. Third, it is commonly available on most IBM and IBM compatible computers and is therefore the most compatible format available.

