



Upper Valley Transportation Survey

This survey will help inform the Community Transportation Transitions project, which seeks to learn more about community transportation needs and develop plans for projects that encourage cleaner, more equitable transportation.

Your Transportation Story

Tell us about your community, how you get around, the places you go, and the places you don't go.

What town do you live in?

What is your nearest major roadway?

How long (in years) have you lived in your current town?

Which transportation options are easily available to you from your residence?

- Public Transit
- Walking
- Biking
- E-biking
- Carshare
- Personal gas vehicle
- Personal electric vehicle
- Other

What transportation options do you have access to in your community?

When you're traveling to and from work, appointments, the store, shops, and other places you frequent, which transportation options can you use to go between these destinations?

- Public Transit
- Walking
- Biking
- E-biking

- Carshare
- Personal gas vehicle
- Personal electric vehicle
- Other

What transportation options do you use?

- Public Transit
- Walking
- Biking
- E-biking
- Carshare
- Personal gas vehicle
- Personal electric vehicle
- Other

Which places do you most often need to leave your home to get to?

- Work
- School
- Healthcare facility
- Grocery store
- Recreational/social sites
- Shops/restaurants
- Other

How many trips to the above locations do you make per week in total?

How long (in minutes) do your trips typically take?

How satisfied are you with your transportation options?

- Very dissatisfied

- Dissatisfied
- Neutral
- Satisfied
- Very satisfied

Is transportation a significant cost to your family?

- Yes
- No

How much does transportation influence your decisions about the below?

	Strong influence	Slight influence	No influence
Where you live*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
What you do*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Where you go*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Are you familiar with any community programs that can help with transportation burden?

- Yes, and I use them
- Yes, and I do not use them
- No

What are places you haven't been able to get to and why?

What Would Be Helpful? What Would You Prefer?

If you could change anything about your transportation options, what would it be?

- Safer options
- Cheaper options

- Faster options
- More sustainable options
- More options that don't rely upon a personal vehicle
- More electric options
- Knowledge of services available
- Knowledge of opportunities to influence policy
- Other

What would be most helpful?

- Better sidewalks
- Better sidewalk snow removal
- Safer crosswalks
- Better street lighting
- More bike lanes
- Bike lane snow removal
- Slower car traffic
- Having your own bike
- Having your own e-bike
- Having your own gas car
- Having your own electric car
- More parking
- Having buses come more often
- Having a free or reduced bus pass
- Having a connection for a van pool or shared ride
- Having a valid driver's license
- Increased COVID safety precautions

Walking, biking, riding the bus, and using an electrified vehicle or bike/scooter are examples of transportation options that are cleaner for the environment. How important are clean transportation options for you?

- Not important at all
- Somewhat unimportant
- Neutral
- Somewhat important
- Very important

In an ideal world, rate your preference for each mode of transportation (1 being low preference and 5 being high preference).

	1	2	3	4	5
Bus*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bike*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Electric bike or scooter*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Walking or using a mobility device*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Carpool*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal gas vehicle*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal electric vehicle*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What are your barriers or concerns related to electric vehicles such as electric buses, electric cars, and electric bicycles?

- Too expensive
- Battery safety
- Don't know how to use them
- Unavailable or lack of options for purchase
- Lack of charging options
- Degree of environmental friendliness
- Weather
- Does not fit my needs (such as too small or not powerful enough)
- Other

Demographics

Do you have a driver's license?

- Yes
- No
- No, but I had one in the past

Do you have access to a reliable vehicle?

- Yes
- No

How many vehicles does your household own?

What do you use to find information on transportation?

- Community forums
- Public transit website
- Public transit ap
- Town website
- Department of Transportation website
- Friends/family/neighbors
- Other

How many people live in your household?

How old are you?

Are you in school?

- Yes
- No

What is your highest level of education?

If currently enrolled, highest degree received.

- No schooling completed
- Some high school, no diploma
- High school graduate, diploma or GED
- Some college credit, no degree
- Trade/technical/vocational training
- Associate degree
- Bachelor's degree
- Master's degree
- Doctorate degree
- Professional degree (e.g. JD or MD)

Are you currently employed?

- Yes
- No

What is your total household income?

- \$0 - \$30,000
- \$30,001 - \$60,000
- \$60,001 - \$90,000
- \$90,001 - \$120,000
- \$120,001+

What is your gender?

- Man
- Non-binary
- Woman
- Other

Do you identify as cisgender or transgender?

- Cisgender
- Transgender
- Other

How do you identify your sexual orientation?

- Asexual
- Bisexual
- Gay
- Heterosexual or straight
- Lesbian
- Pansexual
- Queer
- Other

What race do you identify as?

- Alaska Native or Native American
- Asian
- Black or Native American
- Native Hawaiian or Pacific Islander
- White

- Other

Do you identify as Hispanic or Latino?

- Yes
- No

Do you or anyone in your household have a medical condition or disability that makes it difficult for you/them to get around?

- Yes, myself
- Yes, someone in my household
- No

Contact Information for Gift Card

If you would like to be reimbursed via gift card for taking this survey, please answer the questions below.

Would you like to receive a \$50 gift card?

- Yes
- No