

[Agency/Org conducting survey logo]



## Community Transportation Needs Assessment – Resident Survey

[Organization] is conducting a transportation needs assessment survey to hear from [City/Community] residents on their current travel behavior and preferences for future transportation enhancements and projects. This survey is an effort to improve transportation options in [city/community].

Please answer the following questions about your personal and household transportation needs. This survey takes about [xx] minutes to complete, and all personally-identifiable information will be confidential. You are free to skip questions you do not feel comfortable answering.

*This survey is adapted from a template developed through the State of California’s Clean Mobility Options Voucher Pilot Program (CMO) which provides funding for under-resourced communities in California to conduct community transportation needs assessments and implement zero-emission shared mobility projects to increase access to safe, reliable, convenient, and affordable transportation options. CMO is part of California Climate Investments, a statewide initiative that puts billions of Cap-and-Trade dollars to work reducing greenhouse gas emissions, strengthening the economy, and improving public health and the environment – particularly in disadvantaged communities.*

Consent:

I understand the purpose of the survey and that all my information will be held confidential. I also understand I am free to stop at any time and skip any questions I am not comfortable answering. To request that your personal information be deleted, contact [Organization Contact].

Yes, I understand

1) It is generally easy for me to get to where I need to go:

- Strongly agree    Agree    Neutral    Disagree    Strongly disagree

Why or why not?

**[Variant: This question can be asked first, or some variant can be asked later in the survey after closed-ended questions have been answered.]**

2) Do you have a driver's license?

- Yes    No

**[Variant: If this question is not the right one for the community, there are other questions to learn about access to vehicles and driving habits, or rely on follow-up engagement to find out more about driver licenses]**

3) How many usable cars does your household (family members/roommates) have access to?

- 0    1    2 or more

4) How do you think having access to a personal vehicle affects your quality of life?

(Please choose up to three of the following)

- Able to get a job or a better job    Makes me more independent  
 Able to make more money    Able to access services I need  
 Able to have a better social life    I can save money  
 It is an expensive part of my life  
 Other \_\_\_\_\_

5) If you do not own or lease a car, please indicate why (check all that apply):

- I can access everything I need without a car    I can't afford to purchase and/or repair a car  
 I can't afford gas or insurance    I don't have a license

- Parking is expensive
- Other \_\_\_\_\_

6) Is it hard to find a parking spot on the street where you live?

- Always
- Most of the time
- Sometimes
- Rarely
- Never
- I don't know

7) Do you use public transit (e.g., bus, light rail) regularly?

- Yes
- No

8) If not, please indicate why (check all that apply):

- It takes too long
- It doesn't arrive often enough
- It doesn't take me where I need to go
- I don't feel safe
- The fare is too expensive
- There is not enough parking at the station
- The parking at the station is too expensive
- No stops or pick-ups close to me
- Other \_\_\_\_\_

9) How often has public transit been late in the last week?

- 0 Times
- 1-2 Times
- 3-4 Times
- 5 or more times

10) How long does it take you to get to a transit stop from your home?

- 0-5 Minutes
- 5-10 Minutes
- 10-15 Minutes
- 15-20 Minutes
- 20+ Minutes

**[Variant: Can also ask how the respondent gets to transit, i.e., walk, bike, skateboard, uber/lyft etc.]**

11) Do you use ride-hailing (e.g., Lyft/Uber) regularly?

- Yes
- No

12) If not, please indicate why (check all that apply):

- Cars are usually not available
- I have to wait too long to get picked up
- I don't feel safe
- The fare is too expensive
- I don't know how
- I can't use my phone for that
- Other \_\_\_\_\_

13) How do you most often pay for transportation such as public transit, rideshare and similar services?

(check all that apply):

- Smartphone
- Cell phone (not a smartphone, e.g. flip phone)
- Phone data plan
- Credit card
- Debit card
- Bank account
- Prepaid cash cards

14) Do you worry about being stopped by law enforcement when biking, walking, or using public transportation?

- Always
- Most of the time
- Sometimes
- Rarely
- Never
- I don't know

15) Please indicate which transportation options you would consider using, if they were readily available and affordable:

	Would Use	Unsure	Would not Use
Drive alone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive with others (e.g., co-workers, family friends, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carpool service (e.g. Waze, Scoop) If yes, which? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bus or light rail/metro train	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bicycle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk/roll	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uber/Lyft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taxi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Car-share (e.g. Zipcar) If yes, which? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bike-share (e.g. Lime, Jump) If yes, which? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scotershare (e.g., Lime, Bird) If yes, which? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16) Would you be interested in carsharing?

**Carsharing:** A mobility option where you can share a car with others within your neighborhood. You pay by the minute, use by the hour, or pay a monthly fee for the service. The service covers fuel, insurance, and maintenance.

Yes  Probably  Not sure  Probably not  Definitely not

17) If so, what would you be willing to pay to rent a car for one hour?

Between \$5-\$10  Between \$7-\$12  Over \$12

**[Variant: This pair of questions can be asked about any mode, i.e., fixed route service, ride-hailing, etc.]**

18) If a free or low-cost shuttle service was available to a common destination (such as a grocery store) on a regular basis (e.g., once a week), would you be interested?

Yes  Probably  Not sure  Probably not  Definitely not

19) If so, what is the maximum you would be willing to pay per ride for shuttle service?

Between \$5-\$10  Between \$7-\$12  Over \$12

20) Would you like to receive updates on this program? We may also send invitations to future surveys, or information about free transportation benefits you qualify for.

Yes  No

21) What is the best way for you to receive updates on this program? We may send invitations for future surveys, or information about free transportation benefits you qualify for.

Phone Call  Text Message  Email  US Mail

Phone number (optional): \_\_\_\_\_

Can receive text messages at this phone number

Email (optional): \_\_\_\_\_

22) What is the best time to contact you?

Weekdays  Weekends

23) Which social media platform(s) do you use regularly? (check all that apply):

Facebook

Twitter

Instagram

Snapchat

Other: \_\_\_\_\_

24) Is there anything else you would like to tell us or ask us?

Include 3-5 demographic, geographic questions based on desired populations. You may want to expand or limit choices depending on your community, but always base your answers around what you want to know.

1) How would you describe your race/ethnicity? (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Middle Eastern                              |
| <input type="checkbox"/> Asian                             | <input type="checkbox"/> Native Hawaiian or Pacific Islander         |
| <input type="checkbox"/> Black or African American         | <input type="checkbox"/> South Asian (e.g., Indian, Pakistani, etc.) |
| <input type="checkbox"/> Caucasian/White                   | <input type="checkbox"/> Other _____                                 |
| <input type="checkbox"/> Hispanic or Latino                |  |

2) What is your primary language (i.e., the language you speak most of the time)? \_\_\_\_\_

3) What is your age?

- Under 18    18-25    25-35    36-45    46-55    56-65    Over 66

4) To which gender identity do you most often identify?

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/> Non-Binary | <input type="checkbox"/> Female               |
| <input type="checkbox"/> Male       | <input type="checkbox"/> Prefer not to answer |
|                                     | <input type="checkbox"/> Other _____          |

