GRINDLETON TRAFFIC MANAGEMENT & PARKING STUDY - MAIN STREET RESIDENT’S QUESTIONNAIRE

This questionnaire is part of a study being carried out on behalf of Grindleton Parish Council to examine traffic management and parking along Main Street. Please complete the questionnaire and return to the Clerk of the Parish Council before the 16 April, 2004.

All responses will be treated confidentially and we thank you in advance for your co-operation.

HOUSEHOLD DETAILS

1 Please indicate the number of people living at this address permanently in the following age groups:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 10 yrs</td>
<td></td>
</tr>
<tr>
<td>11 - 16 yrs</td>
<td></td>
</tr>
<tr>
<td>17 - 25 yrs</td>
<td></td>
</tr>
<tr>
<td>26 - 65 yrs</td>
<td></td>
</tr>
<tr>
<td>over 65</td>
<td></td>
</tr>
</tbody>
</table>

PARKING

2 How many cars are owned at this address? ___________________________

3 How many off-street parking spaces do you have? ___________________

4 Do you expect there to be a change in the number of cars owned at this address during the next 12 months?

   YES  __________________  NO  __________________

   If YES please give expected increase or decrease in cars __________________

5 Do you have difficulty parking at certain times of the day or week?

   YES  __________________  NO  __________________

   If YES please give details:

   __________________________________________

   __________________________________________

   __________________________________________

ROAD SAFETY

6 Are you concerned about any particular road safety issues on Main Street?

   YES  __________________  NO  __________________

   If YES, please describe below:

   __________________________________________

   __________________________________________

   __________________________________________

   __________________________________________

P.T.O.
7  Are there any road safety improvements that you would like to see carried out on Main Street?

YES  NO

If YES, please describe below:


ACCESSIBILITY

8  Do members of the household make a high number of walking trips along Main Street
e.g. daily walking trips to school or shops etc.?

YES  NO

If YES, do they experience any problems during these trips?


9  Do members of the household regularly cycle along Main Street e.g. 2-3 times per week?

YES  NO

If YES, do they experience any problems during these trips?


10 Do members of the household regularly use public transport e.g. 2-3 times per week?

YES  NO

If YES, do they experience any problems using public transport?


If you would like to make any other comments about road safety, parking or access on
Main Street, please provide in the space below or on an additional sheet.

Please provide your name and address details below:

Name  
Address  

Please hand the completed questionnaire to Mrs Renton (Clerk of Grindleton Parish Council) before
16 April, 2004.  Thank you