

Community Transportation Survey

Purpose:

The City is evaluating transportation services to ensure they meet the needs of our community. Your input will help us understand how to improve accessibility, efficiency, and safety.

1. General Information

1. **Do you currently use any local transportation services (e.g., Brown Cab)?**
 - ☐ Yes
 - ☐ No
2. **If yes, how often do you use these services?**
 - ☐ Daily
 - ☐ A few times a week
 - ☐ A few times a month
 - ☐ Rarely
3. **What is your primary reason for using transportation services? (Select all that apply)**
 - ☐ Medical appointments
 - ☐ Work
 - ☐ Shopping
 - ☐ School
 - ☐ Social or recreational activities
 - ☐ Other (please specify): _____

2. Service Evaluation

4. **Are the current hours of operation convenient for your needs?**
 - ☐ Yes
 - ☐ No
 - If no, what hours or days would better serve you?

5. **Have you ever experienced difficulty scheduling a ride when needed?**
 - ☐ Yes
 - ☐ No
 - If yes, please describe:

6. **Do you feel safe using the current transportation services?**
 - ☐ Yes
 - ☐ No

- If no, what safety improvements would you suggest?
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7. How many of your rides are scheduled 24 hours in advance?

- ☐ All of them
- ☐ Most of them
- ☐ Half of them
- ☐ A few of them
- ☐ None of them

3. Future Needs and Preferences

8. Which of the following improvements would be most beneficial to you? (Select all that apply)

- a. ☐ Extended service hours
- b. ☐ Extended service area
- c. ☐ Lower cost or free service
- d. ☐ Enhanced safety measures (e.g., cameras in vehicles)
- e. ☐ More accessible vehicles
- f. ☐ Other (please specify): _____

9. Would you support the City exploring partnerships with other organizations to expand transportation options?

- a. ☐ Yes
- b. ☐ No
- c. ☐ Not sure

10. Are you aware of any local organizations or businesses that might be interested in partnering to provide or support transportation services?

- a. ☐ Yes (please specify): _____
- b. ☐ No

4. Demographic (Optional)

11. What is your age group?

- ☐ Under 18
 - ☐ 18–34
 - ☐ 35–54
 - ☐ 55–74
 - ☐ 75 or older
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12. Additional comments or suggestions: