



# Carroll County Transportation Public Opinion Survey

Carroll County is currently conducting a Transit Development Plan. The purpose of this study is to develop a five-year plan for public transportation services in the County. An important task for this effort is to solicit input from residents concerning their transit needs. This survey is one method that is being used to obtain this important public input.

*Thank you for taking the time to complete the following brief survey!*

1. Please use the table below to indicate your current **primary** mode of transportation for the following trip purposes. Check the boxes that correspond with how you **usually** travel for the trips that apply to you.

	<i>Modes:</i>						
<i>Trip Purposes:</i>	Drive Myself	Ride with Family/Friends	Public Transportation	Bicycle	Walk	Taxi	Other
Work							
Medical							
Social/ Recreational							
School							
Shopping/Errands							

2a. Transportation is a problem for me in getting to: *(Please check all that apply.)*  
 Work       Medical Services       School       Social/Recreational       Shopping/Errands  
 Other: \_\_\_\_\_       Transportation is not a problem for me

2b. How is it a problem? \_\_\_\_\_  
 \_\_\_\_\_

3. Are you aware of the public transportation services that are provided in Carroll County (by Carroll Area Transit System - CATS)?

a. Fixed-route Shuttle Service (TrailBlazer)       Yes       No

b. Demand-response Door-to-Door Service       Yes       No

4. Do you currently use public transportation?  Yes  No *(If you checked "No", please skip to Question #6.)*

5. If yes, how often do you use public transportation?

4 times per week or more       Once a week       Once a month

2-3 times per week       2-3 times per month       Less than once a month

6. If you do not use public transportation, why not? *(Please check all that apply.)*

Don't know if service is available.       No service near my home/work/school.

The fare is expensive.       Buses/vans are unreliable/late.

I have limited mobility/hard for me to use the bus.       The hours of operation are too limited.

Work requires me to have a car.       Have to wait too long for the bus/van.

Need my car before/after work/school.       Trip is too long/takes too much time.

Need my car for emergencies/overtime.       Other: \_\_\_\_\_

7. Would you use public transportation services in Carroll County on a regular basis if there was a service that met your travel needs?     Probably yes       Probably not       Not sure

8. Do you think there is a need for additional or improved public transportation in Carroll County?  
 Yes  No (If you checked "No", please skip to Question #11.)
9. If you checked "Yes" for Question #8 above, please indicate *where within Carroll County* (i.e., areas/towns) there is a need for additional or improved public transportation services?  
 \_\_\_\_\_
10. Please indicate the service improvements you think are most important (Check up to three):  
 Service later in the evenings  Higher frequency service  Improved on-time performance  
 Service earlier in the mornings  Saturday service  Sunday service  
 Coordinated timed transfers between shuttles  Bus shelters and benches at stops  
 Improved trip reservation process  Improved access to transit information  
 Faster, more direct routing between your origin and destination  Cleaner buses  
 Other: \_\_\_\_\_
11. Please indicate if you think there is a need for intra-regional services between Carroll County and other jurisdictions within the region?  
 To City of Baltimore  To Fort Meade  To Owings Mills/Reisterstown  
 To/from: \_\_\_\_\_  No need for intra-regional services
12. What are your needs for transportation out of Carroll County? (Check all that apply.)  
 Medical  Employment  Social/Recreation  Other: \_\_\_\_\_
13. Would you use volunteer driver transportation, where a volunteer driver uses his or her own car to transport you between your origin and destination?  Yes  No
14. Would you consider volunteering to provide transportation – particularly for medical trips – if your mileage was reimbursed, where fellow residents have no other transportation available?  Yes  No
15. Please indicate your zip code of residence: \_\_\_\_\_
16. Do you have a valid driver's license?  Yes  No
17. How many working cars/trucks/SUVs/motorcycles are in your household?  
 0  1  2  3  4 or more
18. Please indicate your age group.  
 Under 12 years old  18-25 years old  56-64 years old  
 12-17 years old  26-55 years old  65 years old or older
19. Which of the following best describes your current employment status? (You may check more than one.)  
 Employed, full-time  Student, full-time  Unemployed  Employed, part-time  
 Student, part-time  Retired  Homemaker  Other
20. Please provide your comments regarding the need for improved public transportation in Carroll County.  
 \_\_\_\_\_  
 \_\_\_\_\_

Completed Surveys may be returned to:

KFH Group, 4920 Elm Street, Suite 350, Bethesda, MD 20814 or faxed to (301) 951-0026