

Community Walking and Bicycling Audit Tool

The tool consists of three parts:

- **Part 1: Audit Tool.** A two-sided audit tool to score the features in the area being reviewed.
- **Part 2: Audit Map.** A two-sided map with a sample on one side and space on the other side to paste the area being reviewed and make notes and references on specific features.
- **Part 3: Reference Guide.** A seven-page reference list to assist with completing the 2-page audit and/or to record more detail on what you see as part of the audit.

DIRECTIONS:

The benefits of walking and bicycling include improved health, cleaner air and more social interaction in the community. Walking and bicycling audits can help identify key intersections or areas where physical and environmental changes could make a big difference in improving opportunities to be more physically active. This tool can guide you on what to look for in selecting and evaluating site(s).

Key Steps:

1. **Identify key players** who should be involved. The list of key players may vary depending on your goals, but a list of possible members could include: Public health officials, city planners, law enforcement, school representatives and neighborhood or community groups. Depending on who is initiating this effort and what you hope to see as an outcome, you should have a variety of stakeholders at the table when you start considering sites you want to audit.
2. **Site Selection.** Your sites can be chosen for a specific goal, like instituting a Safe Routes to School program at the elementary school or a broader goal of making the community more pedestrian and bicycling friendly. Depending on your goals and resources, you may have to limit the audit to just a few sites, so you want to choose sites that are pivotal to your goals. That might mean an area where a connecting trail could increase walker and biker numbers a great deal because it would provide a bridge over a stream or it could mean an approach area to a school that has high traffic volume that needs to be slowed or requires providing a different route for walkers and bikers. Another important consideration for site selection is whether there are areas where access to walking and bicycling is limited due to lack of resources or safety issues (real or perceived), or where residents have limited access to other modes of transportation. In any case, you want key players involved to maximize your chance of selecting sites wisely.
3. **Audit Team.** Ideally, each audit should be done by at least two people. Having two people allows for easier recording and provides for some give and take about what each person is seeing. If possible, the team should consist of people with a variety of skill sets or experiences (e.g. pair a “health” person with a “planning” person).

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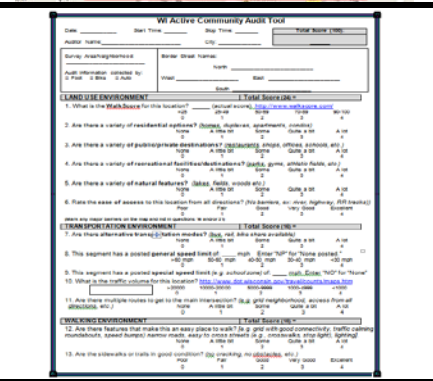
4. **How to Audit.** You can use the audit tools in whatever manner works for you. If you have two reviewers auditing a site, the recommended distribution of duties would be for one person to record on the two-sided audit tool, and the other person provide background information from the seven-page reference document and record on major features on the map. Consider using photos, videos and voice memos to supplement your audit results.

5. **Using the Audit Tools.**

Audit Area
 The suggested audit area is a two block radius around the key intersection that is the center point. Because the area a block or two off of a major street could be considerably different than the main street that you are looking at, use the main intersection as the deciding factor if a score could either go up or down for each question.



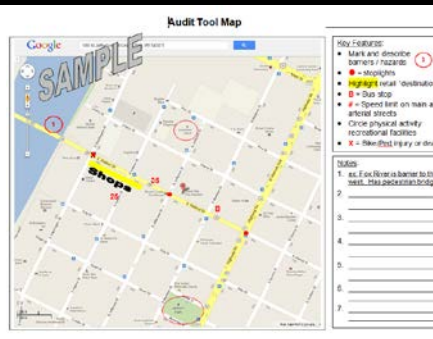
Audit Tool
 The two-sided audit tool is the main recording document while you are out evaluating the route. You can make marks on the document as you tour the route and then meet afterwards with your partner to record your final answer and score for each question. Two of the questions (#1 & #10) require an online search which you can do before or after touring the route.



Scoring Example:

LAND USE ENVIRONMENT	Total Score (24) = 15
1. What is the WalkScore for this location? _____ (actual score) http://www.walkscore.com/	
<25 25-49 50-69 70-89 90-100 0 1 2 3 4	3
2. Are there a variety of residential options ? (homes, duplexes, apartments, condos)	
None A little bit Some Quite a bit A lot 0 1 2 3 4	2
3-6. + questions 3-6. Score each section as you go and place the total for the section at the top.	

Audit Map
 The map is a way to visually mark key areas from your audit. You will need to go online and copy and paste a map of your audit area (ex. Google or Bing maps) prior to doing the audit. While on the audit, mark any key aspects of the area right on the map. This will assist you in your final scoring and will help others looking at the results to see where the key aspects are that you recorded.



Reference Guide (use is optional)
 The seven-page reference guide provides additional information for each of the 28 questions. The guide can be used prior to the audit as a learning tool, during the audit to clarify the criteria or after the audit to help select a final score for each item.

WI Active Community Audit Tool

Date: _____ Start Time: _____ Stop Time: _____

Total Score (100):

Auditor Name: _____ City: _____

Survey Area/Neighborhood: _____

Border Street Names:

North _____

Audit information collected by:

Foot Bike Auto

West _____ East _____

South _____

LAND USE ENVIRONMENT

Total Score (24) =

1. What is the [WalkScore](http://www.walkscore.com/) for this location? _____ (actual score) <http://www.walkscore.com/>

<25	25-49	50-69	70-89	90-100
0	1	2	3	4
2. Are there a variety of **residential options?** (*homes, duplexes, apartments, condos*)

None	A little bit	Some	Quite a bit	A lot
0	1	2	3	4
3. Are there a variety of **public/private destinations?** (*restaurants, shops, offices, schools, etc.*)

None	A little bit	Some	Quite a bit	A lot
0	1	2	3	4
4. Are there a variety of **recreational facilities/destinations?** (*parks, gyms, athletic fields, etc.*)

None	A little bit	Some	Quite a bit	A lot
0	1	2	3	4
5. Are there a variety of **natural features?** (*lakes, fields, woods etc.*)

None	A little bit	Some	Quite a bit	A lot
0	1	2	3	4
6. Rate the **ease of access** to this location from all directions? (*No barriers, ex: river, highway, RR tracks*)

Poor	Fair	Good	Very Good	Excellent
0	1	2	3	4

(Mark any major barriers on the map and list in questions 16 and/or 21)

TRANSPORTATION ENVIRONMENT

Total Score (16) =

7. Are there **alternative transportation modes?** (*bus, rail, bike share available*)

None	A little bit	Some	Quite a bit	A lot
0	1	2	3	4
8. This segment has a posted **general speed limit** of: _____ mph Enter "NP" for "None posted."

>60 mph	50-60 mph	40-50 mph	30-40 mph	<30 mph
0	1	2	3	4
9. This segment has a posted **special speed limit** (*e.g. school zone*) of: _____ mph Enter "NO" for "None"
10. What is the **traffic volume** for this location? <https://wisconsin.gov/Pages/projects/data-plan/traf-counts/default.aspx>

	>20000	10000-20000	5000-9999	1000-4999	<1000
	0	1	2	3	4
11. Are there multiple routes to get to the main intersection? (*e.g. grid neighborhood, access from all directions, etc.*)

None	A little bit	Some	Quite a bit	A lot
0	1	2	3	4

WALKING ENVIRONMENT

Total Score (16) =

12. Are there features that make this an easy place to walk? (*e.g. grid with good connectivity, traffic calming roundabouts, speed bumps, narrow roads, lighting, easy to cross streets e.g., crosswalks and stop light*)

None	A little bit	Some	Quite a bit	A lot
0	1	2	3	4
13. Are the sidewalks or trails in good condition? (*no cracking, no obstacles, etc.*)

Poor	Fair	Good	Very Good	Excellent
0	1	2	3	4

14. Are intersections easy to navigate? (*can see traffic, signals, signs, space, etc.*)
- | | | | | |
|------|------|------|-----------|-----------|
| Poor | Fair | Good | Very Good | Excellent |
| 0 | 1 | 2 | 3 | 4 |
15. Are there buffers between pedestrians and traffic? (*terraces, parking, bike lane, etc.*)
- | | | | | |
|------|------|------|-----------|-----------|
| Poor | Fair | Good | Very Good | Excellent |
| 0 | 1 | 2 | 3 | 4 |
16. List any key walking issues or problems (ex: bridge) encountered and their location:
1. _____
 2. _____
 3. _____
 4. _____
 5. _____

BICYCLING ENVIRONMENT	Total Score (16) =
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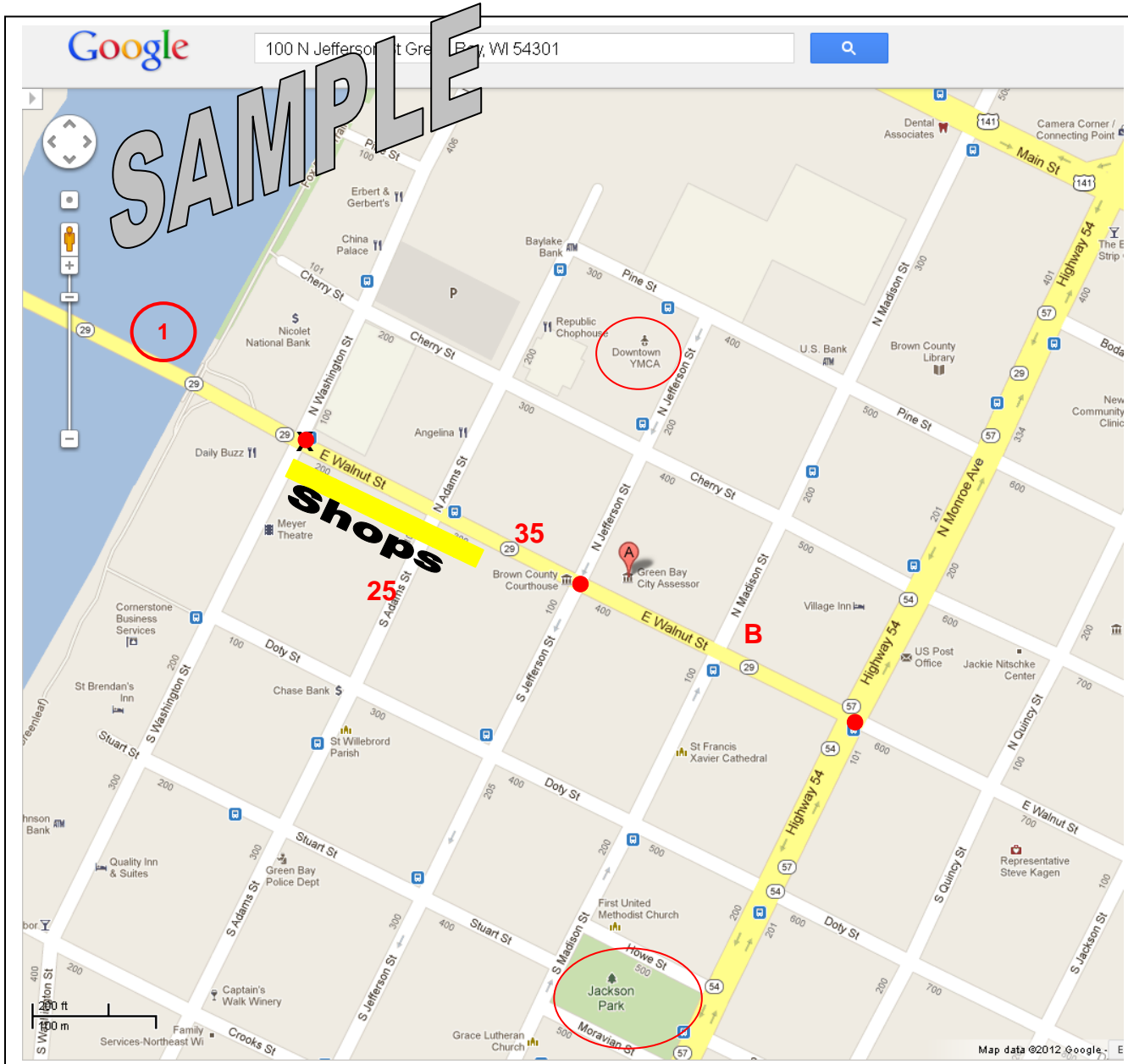
17. Are there features that make this an easy place to bike? (*bike lanes, signs, bike racks, few hazards, etc.*)
- | | | | | |
|------|--------------|------|-------------|-------|
| None | A little bit | Some | Quite a bit | A lot |
| 0 | 1 | 2 | 3 | 4 |
18. Is the surface that you rode on in good condition? (*no potholes, debris, bad surface, etc.*)
- | | | | | |
|------|------|------|-----------|-----------|
| Poor | Fair | Good | Very Good | Excellent |
| 0 | 1 | 2 | 3 | 4 |
19. Are intersections easy to navigate? (*can see traffic, signals, signs space, etc.*)
- | | | | | |
|------|------|------|-----------|-----------|
| Poor | Fair | Good | Very Good | Excellent |
| 0 | 1 | 2 | 3 | 4 |
20. Are there accommodations for all wheeled devices? (*curb cuts, wheelchair access, etc.*)
- | | | | | |
|------|------|------|-----------|-----------|
| Poor | Fair | Good | Very Good | Excellent |
| 0 | 1 | 2 | 3 | 4 |
21. List any key bicycling issues or problems (ex: bridge) encountered and their location:
1. _____
 2. _____
 3. _____
 4. _____
 5. _____

FACILITIES & AESTHETICS	Total Score (28) =
------------------------------------	---------------------------

22. Is there **recreational equipment** visible (playground equipment, sports equipment, etc.)?
- | | | | | |
|------|--------------|------|-------------|-------|
| None | A little bit | Some | Quite a bit | A lot |
| 0 | 1 | 2 | 3 | 4 |
23. Are there **service amenities** visible (restrooms, water fountains, vending, etc.)?
- | | | | | |
|------|--------------|------|-------------|-------|
| None | A little bit | Some | Quite a bit | A lot |
| 0 | 1 | 2 | 3 | 4 |
24. Are **attractive features** visible (e.g. architectural design, building variety, pedestrian and bicycle traffic, vegetation, signage)?
- | | | | | |
|------|--------------|------|-------------|-------|
| None | A little bit | Some | Quite a bit | A lot |
| 0 | 1 | 2 | 3 | 4 |
25. Are **comfort features** visible (e.g. shade trees, benches, etc.) ?
- | | | | | |
|------|--------------|------|-------------|-------|
| None | A little bit | Some | Quite a bit | A lot |
| 0 | 1 | 2 | 3 | 4 |
26. Is **air or noise pollution** visible (e.g. diesel fumes, factory emissions, trains, constructions)?
- | | | | | |
|-------|-------------|------|--------------|------|
| A lot | Quite a bit | Some | A little bit | None |
| 0 | 1 | 2 | 3 | 4 |
27. Is the **physical environment safe and attractive** (no debris, no graffiti, no crime, etc.)?
- | | | | | |
|------|--------------|------|-------------|-------|
| None | A little bit | Some | Quite a bit | A lot |
| 0 | 1 | 2 | 3 | 4 |
28. Are **people visible** (kids, adults, older adults)?
- | | | | | |
|------|--------------|------|-------------|-------|
| None | A little bit | Some | Quite a bit | A lot |
| 0 | 1 | 2 | 3 | 4 |

Audit Tool Map

Location _____



Key Features:

- Mark and describe barriers / hazards 1
- ● = stoplights
- ■ = retail “destinations”
- **B** = Bus stop
- **#** = Speed limit on main and arterial streets
- ○ = Circle physical activity recreational facilities
- **X** = Bike/Ped injury or death

Notes:

1. ex: Fox River is barrier to the west. Has pedestrian bridge.
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Audit Tool Map

(Insert map of area)

Location: _____

Key Features:

- Mark and describe barriers / hazards
- ● = stoplights
- Highlight retail “destinations”
- B = Bus stop
- # = Speed limit on main and arterial streets
- Circle physical activity recreational facilities
- X = Bike/Ped injury or death

Notes:

1. ex: Fox River is barrier to the west. Has pedestrian bridge.
2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

WI Active Community Reference Guide for Walk/Bike Audits (optional)

Date: _____ Start Time: _____ Stop Time: _____

Total Score (100):

Auditor Name: _____ City: _____

Survey Area/Neighborhood: _____ Audit information collected by: <input type="checkbox"/> Foot <input type="checkbox"/> Bike <input type="checkbox"/> Auto	Border Street Names: North _____ West _____ East _____ South _____
------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------

Date: _____ Start Time: _____ Stop Time: _____

LAND USE ENVIRONMENT

1. What is the **WalkScore** for this location? _____ (actual score) <http://www.walkscore.com/>
 Note: WalkScore provides a general idea of how many destinations (stores, schools, etc.) are nearby, which is one measure of how “walkable” the area is. You should view this score as just one measure toward your total score for the audit. However, you could use this score in the following ways in implementing change:

A low score would mean that the area has a limited number of nearby destinations to walk or bike to. This is one factor that should be considered with all the other components in deciding what to do as a whole for the neighborhood. Specifically in terms of how a low Walkscore might influence their strategies, a neighborhood group might focus on things like:

- Keeping sidewalks in good repair
- Establishing trails and paths thru the neighborhood
- Emphasizing walking as exercise vs. walking to do errands, etc.
- Promoting safety within the neighborhood

Whereas, if you have a higher WalkScore, you might emphasize strategies such as:

- Improving links to the existing destinations
- Promoting local, neighborhood businesses
- Improving storefront appeal

2. Are **residential and non-residential land uses** visible in this **segment**? **Yes** **No**

2a. What types of buildings or features are present in this **segment**?

Types of residential destinations	Visible	Not Visible
	Yes	No
a. Single-family home?	<input type="checkbox"/>	<input type="checkbox"/>
b. Two-, three-, four-, five-, or six-family home (“walk-ups”)?	<input type="checkbox"/>	<input type="checkbox"/>
c. Apartment building/complex or condominium?	<input type="checkbox"/>	<input type="checkbox"/>
d. Apartment over retail in multi-story building?	<input type="checkbox"/>	<input type="checkbox"/>
e. Mobile home or trailer?	<input type="checkbox"/>	<input type="checkbox"/>
f. Mobile home or trailer park/community?	<input type="checkbox"/>	<input type="checkbox"/>
g. Other? Specify: _____	<input type="checkbox"/>	<input type="checkbox"/>

3. What **types of public/private destinations** are visible in this **segment?** (Land Use Diversity)

Types of commercial destinations	<u>Visible</u>	<u>Not Visible</u>
a. Gas station (i.e., any destination that sells gasoline)?	<input type="checkbox"/>	<input type="checkbox"/>
b. Fast food restaurant?	<input type="checkbox"/>	<input type="checkbox"/>
c. Other restaurant?	<input type="checkbox"/>	<input type="checkbox"/>
d. Convenience or small grocery store?	<input type="checkbox"/>	<input type="checkbox"/>
e. Supermarket?	<input type="checkbox"/>	<input type="checkbox"/>
f. Bank or credit union?	<input type="checkbox"/>	<input type="checkbox"/>
g. Pharmacy or drug store?	<input type="checkbox"/>	<input type="checkbox"/>
h. Coffee shop (e.g., Starbuck's)?	<input type="checkbox"/>	<input type="checkbox"/>
i. Movie theater?	<input type="checkbox"/>	<input type="checkbox"/>
j. Hotel or motel?	<input type="checkbox"/>	<input type="checkbox"/>
k. Indoor mall or super center (e.g., Super Walmart)?	<input type="checkbox"/>	<input type="checkbox"/>
l. Strip mall or shopping center (i.e., multiple shops in same area)?	<input type="checkbox"/>	<input type="checkbox"/>
m. Department store or "big box" store (e.g., Home Depot, Sears)?	<input type="checkbox"/>	<input type="checkbox"/>
n. Warehouses, factories, or industrial buildings?	<input type="checkbox"/>	<input type="checkbox"/>
o. Office buildings?	<input type="checkbox"/>	<input type="checkbox"/>
p. Bar? Liquor store?	<input type="checkbox"/>	<input type="checkbox"/>
q. Other retail (e.g., bakery, card shop, video rental, florist)?	<input type="checkbox"/>	<input type="checkbox"/>
r. Other services (e.g., beautician, lawyer, accountant)?	<input type="checkbox"/>	<input type="checkbox"/>
s. Post office?	<input type="checkbox"/>	<input type="checkbox"/>
t. Library?	<input type="checkbox"/>	<input type="checkbox"/>
u. Place of worship (e.g., church, synagogue, convent, chapel)?	<input type="checkbox"/>	<input type="checkbox"/>
v. Day care or preschool?	<input type="checkbox"/>	<input type="checkbox"/>
w. School?	<input type="checkbox"/>	<input type="checkbox"/>
x. Health or social services (e.g., hospital, care facility, health dept)?	<input type="checkbox"/>	<input type="checkbox"/>
y. Airport, train station, bus station, or other transportation facility?	<input type="checkbox"/>	<input type="checkbox"/>
z. Community Center?	<input type="checkbox"/>	<input type="checkbox"/>
aa. Other (courthouse, utilities, real estate, military)?	<input type="checkbox"/>	<input type="checkbox"/>
Specify: _____		

4. What **types of recreational facilities/destinations** are visible in this **segment?** (Land Use Diversity)

Types of recreational facilities/destinations	<u>Visible</u>	<u>Not Visible</u>
a. Indoor fitness facility (e.g., YMCA, Bally's, New Lady Fitness)?	<input type="checkbox"/>	<input type="checkbox"/>
b. Park?	<input type="checkbox"/>	<input type="checkbox"/>
c. Playground (i.e., park or school)?	<input type="checkbox"/>	<input type="checkbox"/>
d. Outdoor pool?	<input type="checkbox"/>	<input type="checkbox"/>
e. Beach?	<input type="checkbox"/>	<input type="checkbox"/>
f. Golf course?	<input type="checkbox"/>	<input type="checkbox"/>
g. Sports/playing field, basketball or tennis court (i.e., park/school)?	<input type="checkbox"/>	<input type="checkbox"/>
h. Sports track (i.e., park or school)?	<input type="checkbox"/>	<input type="checkbox"/>
i. Marina?	<input type="checkbox"/>	<input type="checkbox"/>

- j. Community gardens?
- k. Theater?
- j. Other recreational facility? Specify: _____

5. What **types of natural features** are visible in this **segment**? (Land Use Diversity)

Type of feature	<u>Visible</u>	<u>Not Visible</u>
a. Large body of water (e.g., lake, large river)?	<input type="checkbox"/>	<input type="checkbox"/>
b. Small body of water (e.g., pond, stream)?	<input type="checkbox"/>	<input type="checkbox"/>
c. Open natural space (e.g., wooded area, swamp, meadow – not a vacant lot)?	<input type="checkbox"/>	<input type="checkbox"/>

6. Is there **easy access** to and from this location or are there major barriers preventing access to or from this area?

Access features	<u>Visible</u>	<u>Not Visible</u>
a. Body of water (river, pond, etc.) prevents or limits access?	<input type="checkbox"/>	<input type="checkbox"/>
b. High speed highway borders this neighborhood & limits access?	<input type="checkbox"/>	<input type="checkbox"/>
c. Railroad tracks with frequent traffic cuts thru this neighborhood?	<input type="checkbox"/>	<input type="checkbox"/>
d. Other _____		

TRANSPORTATION ENVIRONMENT

7. Is **availability of alternative transportation modes** visible in this **segment**?

	<u>Yes</u>	<u>No</u>
Bus service	<input type="checkbox"/>	<input type="checkbox"/>
Rail service	<input type="checkbox"/>	<input type="checkbox"/>
Bike share (ex. B-Cycle)	<input type="checkbox"/>	<input type="checkbox"/>

8. This segment has a posted **general speed limit** of: _____ mph Enter "NP" for "None posted."

9. This segment has a posted **special speed limit** of: _____ mph Enter "NP" for "None posted."

10. What is the **traffic volume** for this location? <https://wisconsin.gov/Pages/projects/data-plan/traf-counts/default.aspx>

	>20,000	10,000-20,000	5,000-9,999	1,000-4,999	<1,000
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Are there multiple routes to get to the main intersection? (e.g. *grid neighborhood, access from all directions, etc.*)

	<u>Visible</u>	<u>Not Visible</u>
a. Grid neighborhood with intersections every block	<input type="checkbox"/>	<input type="checkbox"/>
b. Access from all directions with good connections	<input type="checkbox"/>	<input type="checkbox"/>
c. Special features to improve access (e.g. trails, paths, bridge, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

WALKING ENVIRONMENT

12. Please indicate your answer to the following statements about **walking characteristics** for this segment. (List any specific hazards and their locations in Q16.)

Rating Criteria	<u>Yes</u>	<u>No</u>
a. Is the street type less than or equal to two narrow lanes?	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the segment have other street design characteristics to reduce volume or speed (e.g., roundabouts)?	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the segment have traffic calming devices to reduce volume or speed (e.g., traffic signals, speed humps)?	<input type="checkbox"/>	<input type="checkbox"/>
d. Does the segment have crossing aids for pedestrians and bicyclists to cross the street safely. (e.g., crosswalks, stop light, overpass, traffic island, curb extension)?	<input type="checkbox"/>	<input type="checkbox"/>
e. Does the segment have street lighting for sidewalks, street shoulders, and/or bike lanes at night?	<input type="checkbox"/>	<input type="checkbox"/>
f. Does the segment have a railroad track, bridge, tunnel, highway, or overpass?	<input type="checkbox"/>	<input type="checkbox"/>

13. Are the sidewalks or trails in good condition and do you have room to walk?

	<u>Yes</u>	<u>No</u>
a. No sidewalks, paths, or shoulders	<input type="checkbox"/>	<input type="checkbox"/>
b. Sidewalks or paths started and stopped	<input type="checkbox"/>	<input type="checkbox"/>
c. Sidewalks are broken or cracked	<input type="checkbox"/>	<input type="checkbox"/>
d. Sidewalks were blocked with poles, signs, shrubbery, dumpsters, etc.,	<input type="checkbox"/>	<input type="checkbox"/>
e. Too much traffic	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

14. Was it easy to cross streets?

	<u>Yes</u>	<u>No</u>
a. Road was too wide	<input type="checkbox"/>	<input type="checkbox"/>
b. Traffic signals made us wait too long or did not give us enough time to cross	<input type="checkbox"/>	<input type="checkbox"/>
c. Needed striped crosswalks or traffic signals in order to cross without risk	<input type="checkbox"/>	<input type="checkbox"/>
d. Parked cars blocked our view of traffic	<input type="checkbox"/>	<input type="checkbox"/>
e. Trees or plants blocked our view of traffic	<input type="checkbox"/>	<input type="checkbox"/>
f. Needed curb ramps or ramps needed repair	<input type="checkbox"/>	<input type="checkbox"/>
g. Aggressive drivers (e.g., speeding, not giving pedestrians/bicyclists right-of-way)?made crossing dangerous	<input type="checkbox"/>	<input type="checkbox"/>
h. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

15. Are there buffers between pedestrians and traffic?

	<u>Yes</u>	<u>No</u>
a. Terraces	<input type="checkbox"/>	<input type="checkbox"/>
b. Bike lanes	<input type="checkbox"/>	<input type="checkbox"/>
c. On street parking	<input type="checkbox"/>	<input type="checkbox"/>

16. List any key walking issues or problems encountered and their location:

<u>Issue</u>	<u>Location</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

BICYCLING ENVIRONMENT

17. Did you have a place to bicycle safely ...

On the road, sharing the road with motor vehicles?	<u>Yes</u>	<u>No</u>
a. No space for bicyclists to ride	<input type="checkbox"/>	<input type="checkbox"/>
b. Bicycle lane or paved shoulder disappeared	<input type="checkbox"/>	<input type="checkbox"/>
c. Heavy and/or fast-moving traffic	<input type="checkbox"/>	<input type="checkbox"/>
d. Too many trucks or buses	<input type="checkbox"/>	<input type="checkbox"/>
e. No space for bicyclists on bridges or in tunnels	<input type="checkbox"/>	<input type="checkbox"/>
f. Poorly lighted roadways	<input type="checkbox"/>	<input type="checkbox"/>
g. Other problems: _____		

On an off-road path or trail, where motor vehicles were not allowed?	<u>Yes</u>	<u>No</u>
a. Path ended abruptly	<input type="checkbox"/>	<input type="checkbox"/>
b. Path didn't go where I wanted to go	<input type="checkbox"/>	<input type="checkbox"/>
c. Path intersected with roads that were difficult to cross	<input type="checkbox"/>	<input type="checkbox"/>
d. Path was crowded	<input type="checkbox"/>	<input type="checkbox"/>
e. Path was unsafe because of sharp turns or dangerous downhills	<input type="checkbox"/>	<input type="checkbox"/>
f. Path was uncomfortable because of too many hills	<input type="checkbox"/>	<input type="checkbox"/>
g. Path was poorly lighted	<input type="checkbox"/>	<input type="checkbox"/>
h. Other problems: _____		

(List any specific hazards and their locations in Q21)

18. How was the surface that you rode on? The road or path had:

	<u>Yes</u>	<u>No</u>
a. Potholes	<input type="checkbox"/>	<input type="checkbox"/>
b. Cracked or broken pavement	<input type="checkbox"/>	<input type="checkbox"/>
c. Debris (e.g. broken glass, sand, gravel, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
d. Dangerous drain grates, utility covers, or metal plates	<input type="checkbox"/>	<input type="checkbox"/>
e. Uneven surface or gaps	<input type="checkbox"/>	<input type="checkbox"/>
f. Slippery surfaces when wet (e.g. bridge decks, construction plates, road markings)	<input type="checkbox"/>	<input type="checkbox"/>
g. Bumpy or angled railroad tracks	<input type="checkbox"/>	<input type="checkbox"/>
h. Rumble strips	<input type="checkbox"/>	<input type="checkbox"/>
i. Too hilly	<input type="checkbox"/>	<input type="checkbox"/>
j. Other problems: _____		

19. How were the intersections you rode through?

- | | <u>Yes</u> | <u>No</u> |
|--------------------------------------------------------|--------------------------|--------------------------|
| a. Had to wait too long to cross intersection | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Couldn't see crossing traffic | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Signal didn't give me enough time to cross the road | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Signal didn't change for a bicycle | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Unsure where or how to ride through intersection | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Other problems: _____ | <input type="checkbox"/> | <input type="checkbox"/> |

20. Are there accommodations and support for all wheeled devices?

- | | <u>Yes</u> | <u>No</u> |
|---------------------------------------------------------|--------------------------|--------------------------|
| a. Curb cuts | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Wheelchair access | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Bike parking / racks | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Maps, signs, or road markings to help me find my way | <input type="checkbox"/> | <input type="checkbox"/> |
| e. A way to take my bicycle with me on the bus | <input type="checkbox"/> | <input type="checkbox"/> |

21. List any key bicycling issues or problems encountered and their location:

- | <u>Issue</u> | <u>Location</u> |
|--------------|-----------------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

FACILITIES & AESTHETICS

FACILITIES

22. What **types of recreational equipment** are visible in this **segment**?

- | Type of equipment | <u>Visible</u> | <u>Not Visible</u> |
|-----------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| a. Playground equipment (e.g., swings, slide) | <input type="checkbox"/> | <input type="checkbox"/> |
| b. "Complete" sports equipment (i.e., all necessary elements are visible – posts, nets, etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| c. "Incomplete" sports equipment (i.e., missing elements) | <input type="checkbox"/> | <input type="checkbox"/> |

23. What **types of service amenities** are visible in this **segment**?

- | Type of service amenity | <u>Visible</u> | <u>Not Visible</u> |
|--------------------------------|--------------------------|--------------------------|
| a. Equipment rental | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Sports stands/seating | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Picnic tables and/or grills | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Water fountains | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Restrooms | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Vending machines | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Public telephones | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Trash bins | <input type="checkbox"/> | <input type="checkbox"/> |

AESTHETICS

24. Are **attractive features** visible in this **segment**?

Presence of attractive features (e.g. architectural design, building variety, pedestrian and bicycle traffic, vegetation, signage)?

No attractive features	A few attractive features	Some attractive features	A lot of attractive features
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

25. Are **comfort features** visible in this **segment**?

Presence of comfort features (e.g. shade trees, benches, or other types of amenities)?

No attractive features	A few attractive features	Some attractive features	A lot of attractive features
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

26. a. Is **air pollution** visible or detectable through odors in this **segment**?

Yes **No**

b. Is **noise pollution** audible in this **segment**? (e.g. trains, construction, etc)

Yes **No**

27. Is the **physical environment safe and attractive** in this **segment**?

Rating Criteria

- a. Is there debris such as whole or broken beer or liquor bottles or cans visible in streets, sidewalks, yards, or alleys?
- b. Is there graffiti in the buildings, signs or walls?
- c. Are there a lot of empty store fronts or abandoned housing?
- d. Are there abandoned cars?
- e. Are there known crime issues associated with this segment?
- f. Are there stray dogs or animals in the segment)?

<u>Yes</u>	<u>No</u>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

SOCIAL ENVIRONMENT

28. Are **people** visible in this **segment**?

Rating Criteria

- a. Are there any people visible in this segment?
- b. Are there any children visible in this segment (i.e., <age 13)
- c. Are there children engaging in active behaviors (e.g., playing a sport, running, climbing)?
- d. Are there any teenagers or adults visible in this segment (i.e., 13 to 65 years old)?
- e. Are there teenagers or adults engaging in active behaviors (e.g., walking, bicycling, playing a sport)?
- f. Are there any older adults visible in this segment (i.e., 65 years or older)?
- g. Are there older adults engaging in active behaviors (e.g., walking, bicycling, jogging, playing a sport)?

<u>None</u>	<u>a Few</u>	<u>Some</u>	<u>a Lot</u>
	(1-5)	(6-10)	(>10)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>