



Pinoleville Pomo Nation

2022 Transportation Plan Survey

1. What is your main form of transportation on a typical WEEKDAY? Choose one.

- Auto/Motorcycle – drive alone
- Auto – travel with at least one other person
- Walk
- Bicycle
- Transit
- Assisted Mobility (wheelchair, electric scooter, etc.)
- Other

2. In an average week, what percentage of your trips do you make using the following modes of transportation?

Personal Vehicle _____%

Carpool or Ride Share _____%

Walk _____%

Bicycle _____%

Transit _____%

3. If you have school-age children in your household, what forms of transportation do they use to and from school?
Mark all that apply.

- Auto
- Walk
- Bicycle
- School Bus
- Transit (non-school)

4. To what locations do you travel, and how often each week? Select only those types of reasons that apply to you.

	1 time Per week	2 times per week	3 times per week	4-5 times per week	6-7 times per week
Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shopping/errands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Medical appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior/Community Center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Please rate the following projects on a scale of 1-10 based on importance to you.

- Increase frequency/extend hours of existing transit service _____
- Provide transit service to remote areas of the county _____
- Maintaining/paving existing streets and roads & filling potholes _____
- Street, road, and highway projects to reduce congestion (e.g., roundabouts, turn lanes, widening) _____
- Building new roads or road connectors (e.g., Brooktrails Second Access, Orchard Avenue Extension, Windy Hollow Bridge) _____
- Improving safety and operations on local roads and highways (e.g., signals, traffic calming measures) _____
- Improving/expanding bicycle routes and paths _____
- Improving/increasing sidewalks and pedestrian walkways _____
- Streetscape and landscape projects to improve aesthetics for travelers and beautify communities _____

6. Likewise, please rate the following projects on a scale of 1-10 based on existing needs.

- Sidewalk infill in populated areas _____
- Bike lane infill in populated areas _____
- Safe Routes to Schools projects (sidewalks, bike lanes, paths in school areas) _____
- Pedestrian and bicycle facilities in commercial areas _____
- Widening sidewalks, bulb-outs, pedestrian refuge islands _____
- New bike or multi-use paths _____
- ADA compliant ramps at corners where none currently exist _____
- Bicycle Parking _____
- Recreational trails _____

7. What is the one-way distance you commute between your home and work or school?

Miles _____

8. How often do you travel out of the county and for what reasons? Select only those types of reasons that apply to you.

	1 trip per MONTH	2-3 trips per MONTH	4-5 trips per MONTH	1 trip per WEEK	2-3 trips per WEEK	4-5 trips per WEEK	6-7 trips per WEEK
Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shopping/errands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. The following is a list of issues people are sometimes concerned about. Please indicate your degree of concern about each item.

	Very serious problem	Somewhat serious problem	Not a serious problem	No opinion
Lack of parking in commercial areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not enough bike paths and lanes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition of major highways in Mendocino County	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pavement condition of local streets and roads (i.e., potholes)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Too much traffic on local streets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsafe streets, roads and highways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The need for new streets, roads and highways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not enough local bus service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. The following is a list of common reasons people do not use walking or bicycling as a mode of transportation. Please indicate if these items are barriers to you or your household members using these active modes of transportation.

	Significant Barrier	Somewhat of a barrier	Not a barrier
Lack of sidewalks or bike lanes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time constraints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic danger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime danger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel distances are too far	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. In what area of the county do you live?

- Ukiah area
- Redwood Valley/Calpella area
- Potter Valley area
- Anderson Valley area
- Willits area
- Laytonville, Leggett and North County area
- Covelo/Round Valley area
- Fort Bragg area
- Mendocino area
- Hopland area
- Point Arena area
- Gualala area
- Campeche area
- North coast area

12. Please tell us a little about yourself. Check all that apply.

- Work full-time
- Work part-time
- Full-time student

- Part-time student
- Retired
- Unemployed
- Disabled

13. Please select your age category.

- 15 years or under
- 16-25 years
- 26-40 years
- 41-60 years
- 61-80 years
- 81 and over

Please return survey to:
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