



Public Meeting Comment Sheet May 2, 2005

After you have received all the information presented tonight, please take a few moments to give us your input by completing this sheet*. We are interested in learning what your transportation concerns are for Boone County.

*All information collected will be kept **totally confidential** and used for planning purposes only.

1. How did you hear about the public meeting? email message newspaper radio
 TV brochure flier organization announcement website friend

2. Were you exposed to any new ideas or concerns tonight? Yes No

3. List anything else this study should consider. _____

Please circle a number from the scale to rate the following:	Terrible	Poor	Adequate	Good	Excellent
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4. How would you rate the overall transportation system (highways and transit) Boone County?	1	2	3	4	5
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5. How would you rate each of the following conditions?	Terrible	Poor	Adequate	Good	Excellent
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|--|---|---|---|---|---|
| <input type="checkbox"/> General access to points around Boone County | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Access to and from Interstates (I-71/ I-75 and I-275) | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Bike paths and facilities | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Cost of travel | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Roadway/Streetscape appearance and/or maintenance | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Sidewalks and other pedestrian amenities | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Signal coordination | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Traffic congestion | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Transit options and services | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Travel safety | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Travel time | 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> Other: _____ | 1 | 2 | 3 | 4 | 5 |

Please write-in any other condition we missed that you think is important and rank it.

6. Go back to Question #5 and place an "X" in the box next to the issue YOU think is **THE MOST IMPORTANT TRANSPORTATION ISSUE (pick one)** for Boone County.

7. Please share with us any additional transportation issues that are important to you. _____

Tell Us About Yourself

8. Do you live in Boone County? _____ YES _____ NO

9. Do you work in Boone County? _____ YES _____ NO

10. Place an "X" next to what you use most to get around?

_____ Car _____ Bus _____ Walk _____ Taxi _____ Bicycle _____ Other: _____

11. If you travel mostly by car, what would encourage you to leave your car at home? _____

Your responses to #12 through #19 are **OPTIONAL**. ALL INFORMATION will remain totally **CONFIDENTIAL**.

12. Check one: _____ Mr. _____ Miss _____ Ms. _____ Mrs.

13. Name: _____

14. Address: _____

15. City, State: _____

16. Zip: _____

17. Phone Number: _____

18. E-mail: _____

19. Representing (organization, company, etc.): _____

20. May we contact you to discuss your comments? _____ YES _____ NO

Thank you. Your comments are important to us and will help in the development of this transportation plan. When you've completed this sheet, please **drop it off at the registration table before you leave**. Or, if you'd like more time, you may mail or fax it to:

BOONE COUNTY TRANSPORTATION STUDY
OKI Regional Council of Governments
720 E. Pete Rose Way, Suite 420
Cincinnati, OH 45202
Fax: 513-621-9325

For more information about this study,
please visit www.boonecountyky.org/BCTS
or call **(513) 621-6300**.

Thank you for your participation.