



# TRANSIT USER SURVEY 2006

## ENTER TO WIN A FREE DVD PLAYER\* Plus Get a Free BayTransit Ride

BayTransit would like to hear from its customers about their experience with our services on **Lancaster County bus routes**.

Please complete only one copy of this survey, and thank you for participating and for helping to make BayTransit better.

\* NOTE: Once you have completed the survey, if you would like to enter a drawing for a chance to win a Free DVD Player, complete the form at the bottom of this survey. Also, whether you win the DVD Player or not, you will get a free BayTransit ride for completing the survey.

### 1. On what bus did you receive this survey?

Date & Time \_\_\_\_\_  
Pick-up Location \_\_\_\_\_

### 2. How long have you been riding BayTransit?

- Less than a year 24%
- 1-2 years 29%
- 3-4 years 33%
- 5+ years 14%

### 3. What is the purpose of your trip today?

- School 0%
- Work 66%
- Shopping 13%
- Personal Business 4%
- Medical/Dental 13%
- Social/Recreation 4%
- Senior Center 0%
- Other \_\_\_\_\_

### 4. For what other purposes do you use BayTransit? (Check all that apply)

- School 0%
- Work 21%
- Shopping 21%
- Personal Business 23%
- Medical/Dental 7%
- Social/Recreation 2%
- Senior Center 2%
- Other \_\_\_\_\_

### 5. How many one-way bus trips do you make each week? (Count a round trip as two trips)

- 1 or less 10%
- 2-5 times/week 66%
- 6-9 times/week 10%
- 10 or more/week 14%

### 6. Compared to last year, are you riding...

- More 66%
- Less 10%
- The same 24%

### 7. Where did you first hear about BayTransit?

- Newspapers 15%
- Radio 15%
- TV 0%
- Drivers 12%
- Telephone 2%
- Website 0%
- Schedules/Brochures 4%
- Friends/Relatives 46%
- Other \_\_\_\_\_ 4% From seeing buses

### 8. Could you have made this trip if BayTransit were not available in Lancaster County?

- Yes 0%
- No 76%
- Yes, but with inconvenience 24%

### 9. If BayTransit had a fixed route from White Stone to Kilmarnock to Lively, and back, at the same times every day, would you use BayTransit buses more or less than you do now?

- More 70%
- Less 20%
- Same = 10%

Why? More reliable, timely service, etc.

Please continue survey on the other side

**10. How do you rate BayTransit's bus service for each of the following?**

SEE ATTACHED

	GREAT	OK	POOR
Service Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scheduling a Trip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dispatcher Friendliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buses are On-Time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service Frequency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Places Served	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interior Bus Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driver Courtesy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service in General	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**11. Please rate the following factors in how you think they would affect people's use of public transit service.**

SEE ATTACHED

	IMPORTANT	NOT IMPORTANT
More Frequent Service	<input type="checkbox"/>	<input type="checkbox"/>
More Information	<input type="checkbox"/>	<input type="checkbox"/>
Better Connections	<input type="checkbox"/>	<input type="checkbox"/>
More Weekend Service	<input type="checkbox"/>	<input type="checkbox"/>
More Evening Service	<input type="checkbox"/>	<input type="checkbox"/>
Service to More Places	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>

**12. Do you have a valid driver's license?**

- Yes 38%
- No 62%

**13. Was a car available for this trip?**

- Yes 14%
- No 86%

**14. If a car was available, what is the most important reason why you did not use the car?**

- Car Maintenance Costs 27%
- Gas Prices 59%
- Parking Costs 0%
- Traffic Congestion 7%
- Other \_\_\_\_\_ 7% Not Specified

**15. How many vehicles does your household own or lease?**

- None 36%
- One 32%
- Two 27%
- Three or more 5%

**16. Your gender:**

- Male 19%
- Female 81%

**17. Your age:**

- Under 18 0%
- 18-29 10%
- 30-44 40%
- 45-64 45%
- 65+ 5%

**18. What is the single most important improvement that you would suggest for BayTransit bus service in Lancaster County (including areas that should be served)?**

More Service = 70%; Be on time = 10%; Perfect as is = 5%; Offer free service = 5%; Dispatchers need to be more familiar with area = 5%; Better communication = 5%

*After completing this survey, please return it to the bus driver at the end of your bus trip.*

*Thank you for your participation.*

**ENTER TO WIN A FREE DVD PLAYER**

**REGISTER TO WIN!** As a thank you for **FULLY COMPLETING** this survey and returning it to the bus driver while you are on this bus, you will be registered for a chance to **WIN A FREE DVD PLAYER**. Please fill in your contact information below if you are interested in the drawing. Your answers to the survey will be kept confidential. If you win the drawing, you will be notified by September 30, 2006. Also, whether you win the DVD Player or not, you will get a free BayTransit ride for completing the survey.

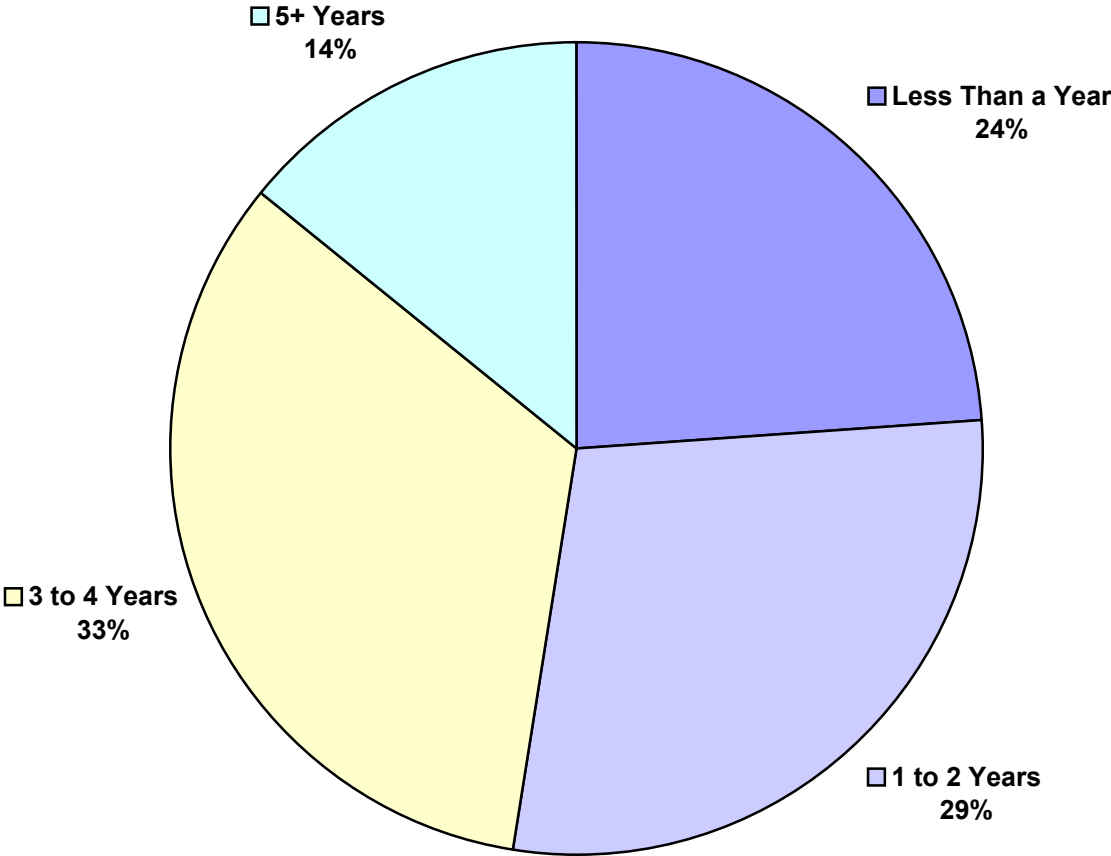
NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

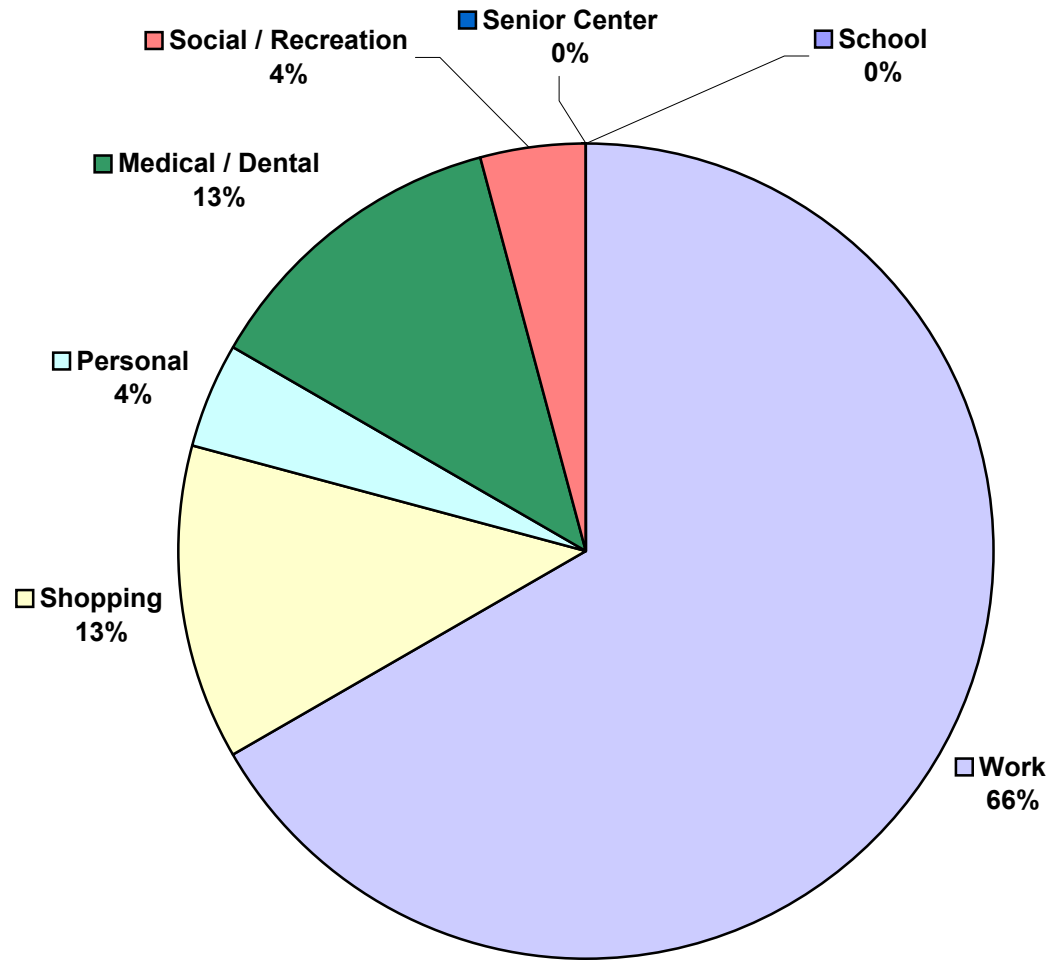
PHONE NUMBER: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

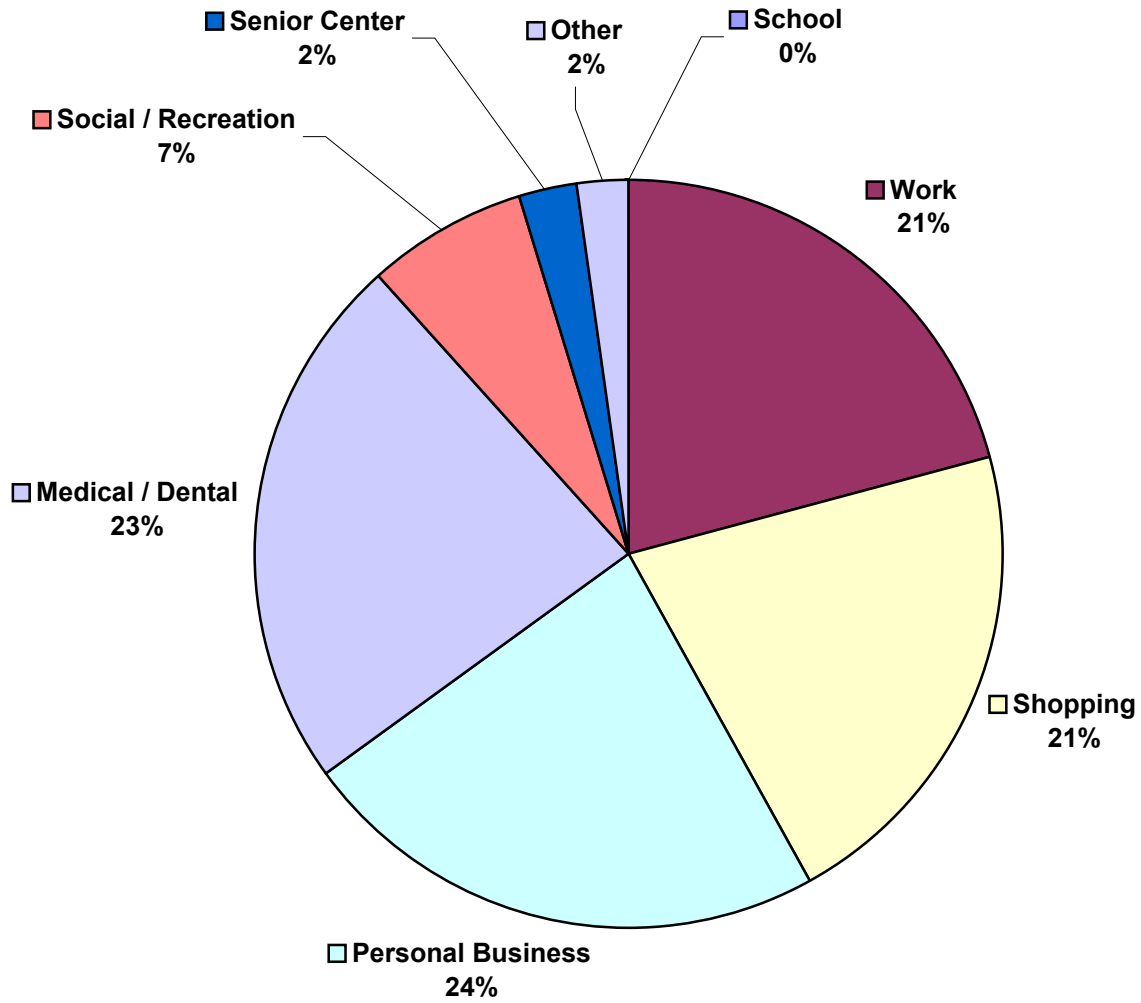
## 2. How Long Using BayTransit?



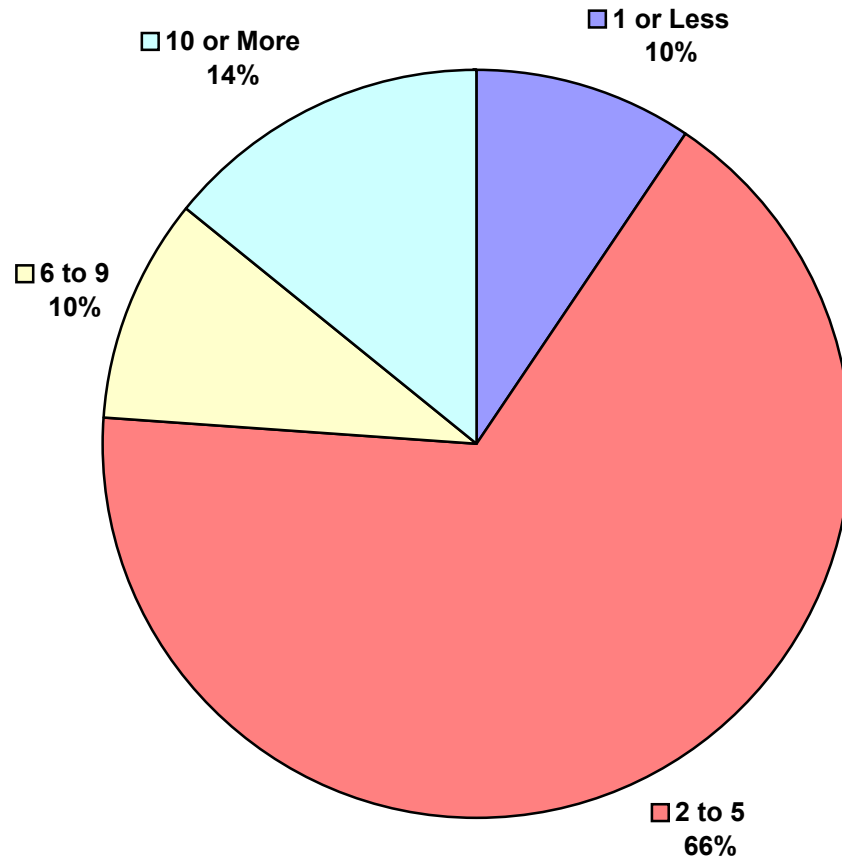
### 3. Purpose of Trip Today?



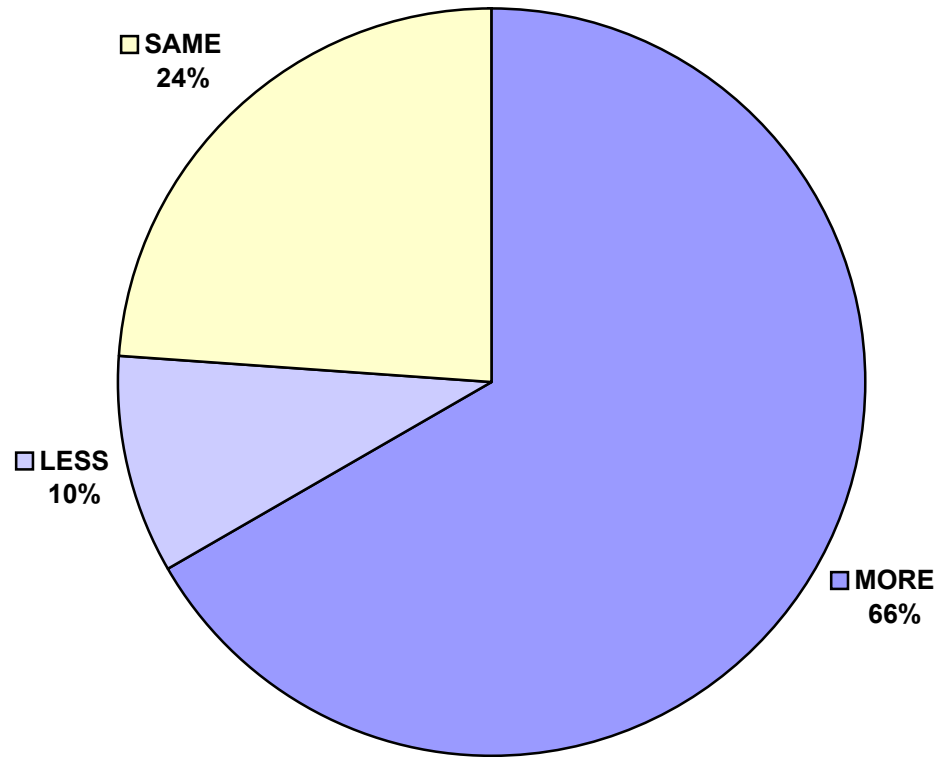
#### 4. Other Uses of BayTransit?



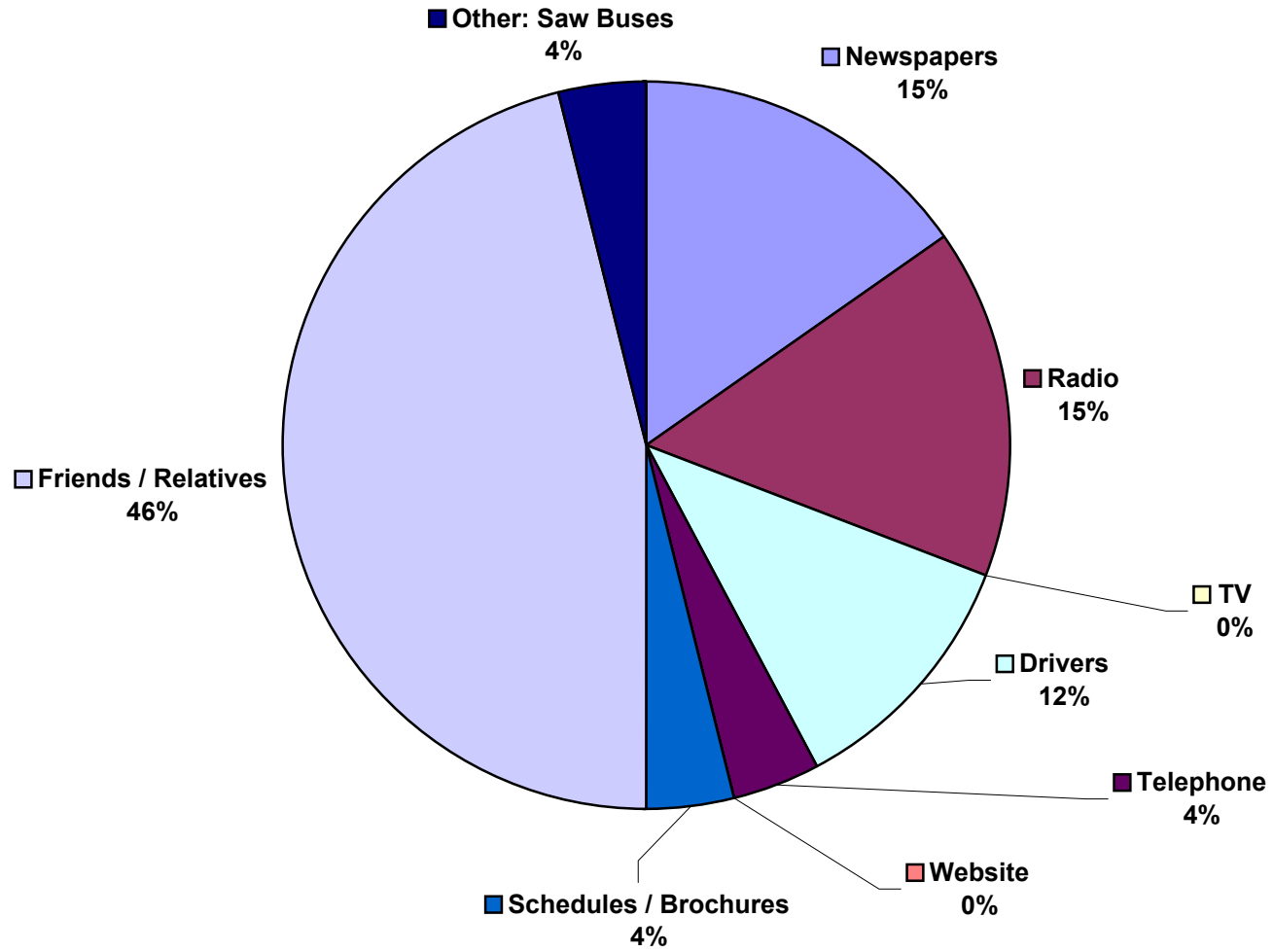
### 5. Number of Weekly One-way Trips?



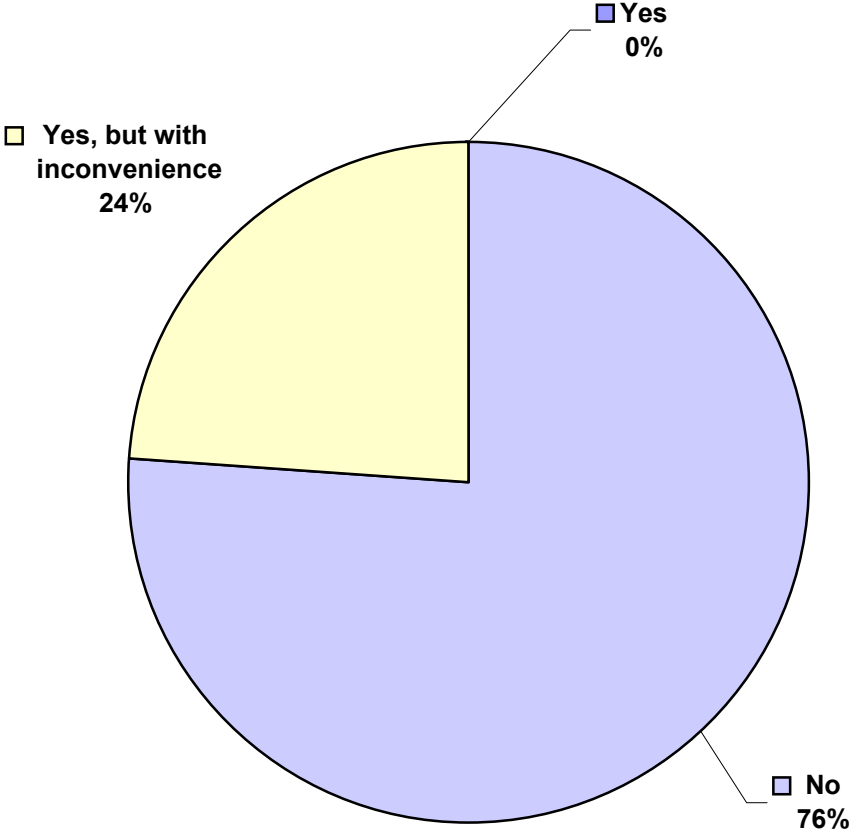
### 6. Use Compared to Last Year?



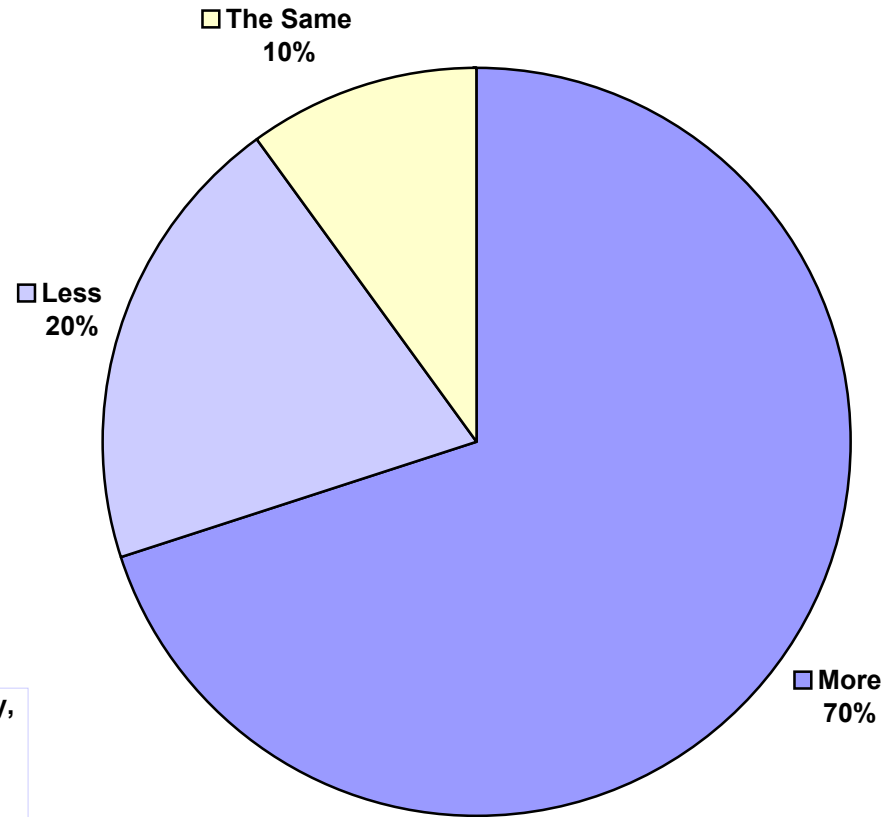
### 7. Where Did You Hear About BayTransit?



**8. Could You Have Made the Trip Without BayTransit?**



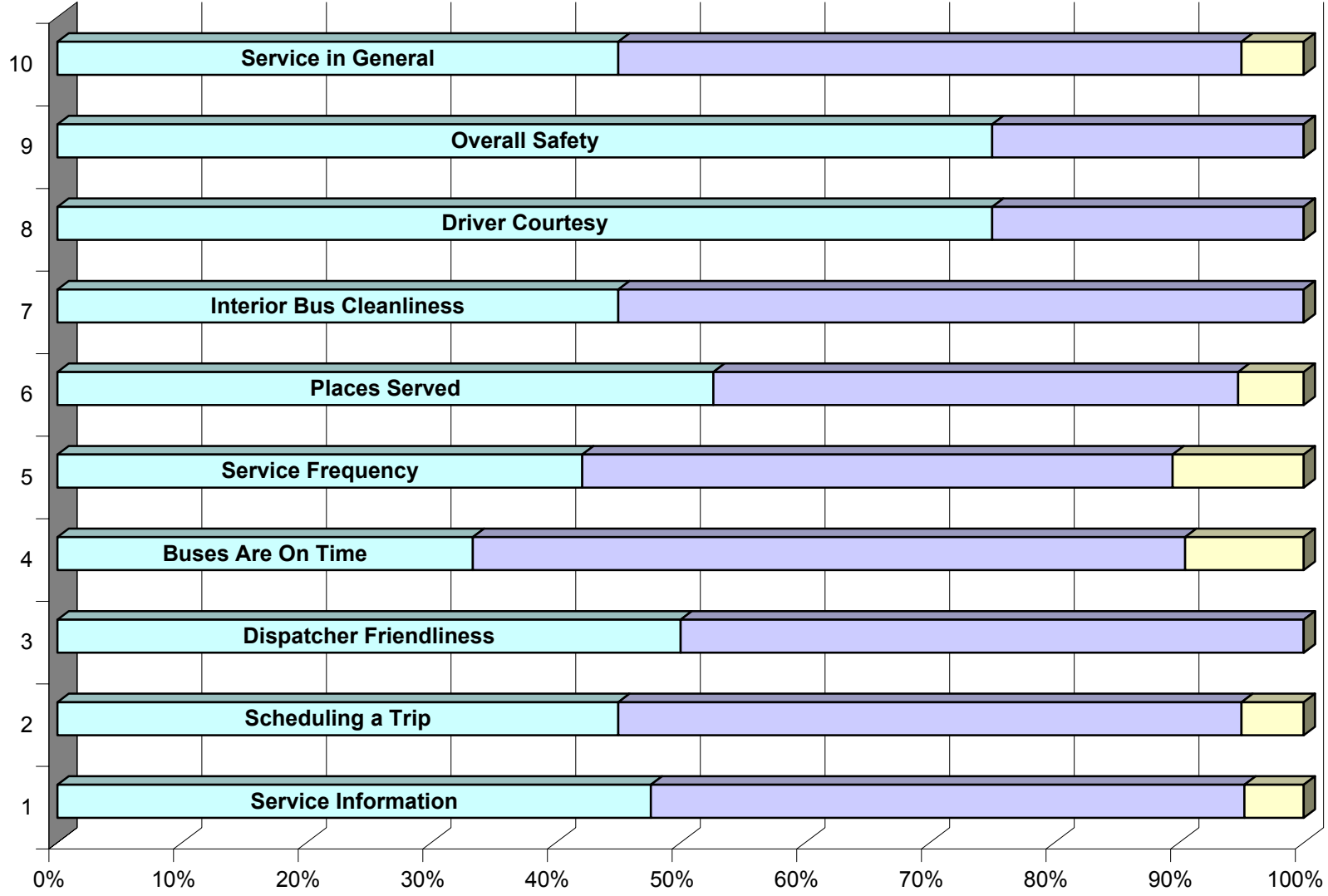
### 9. Use Fixed Route?



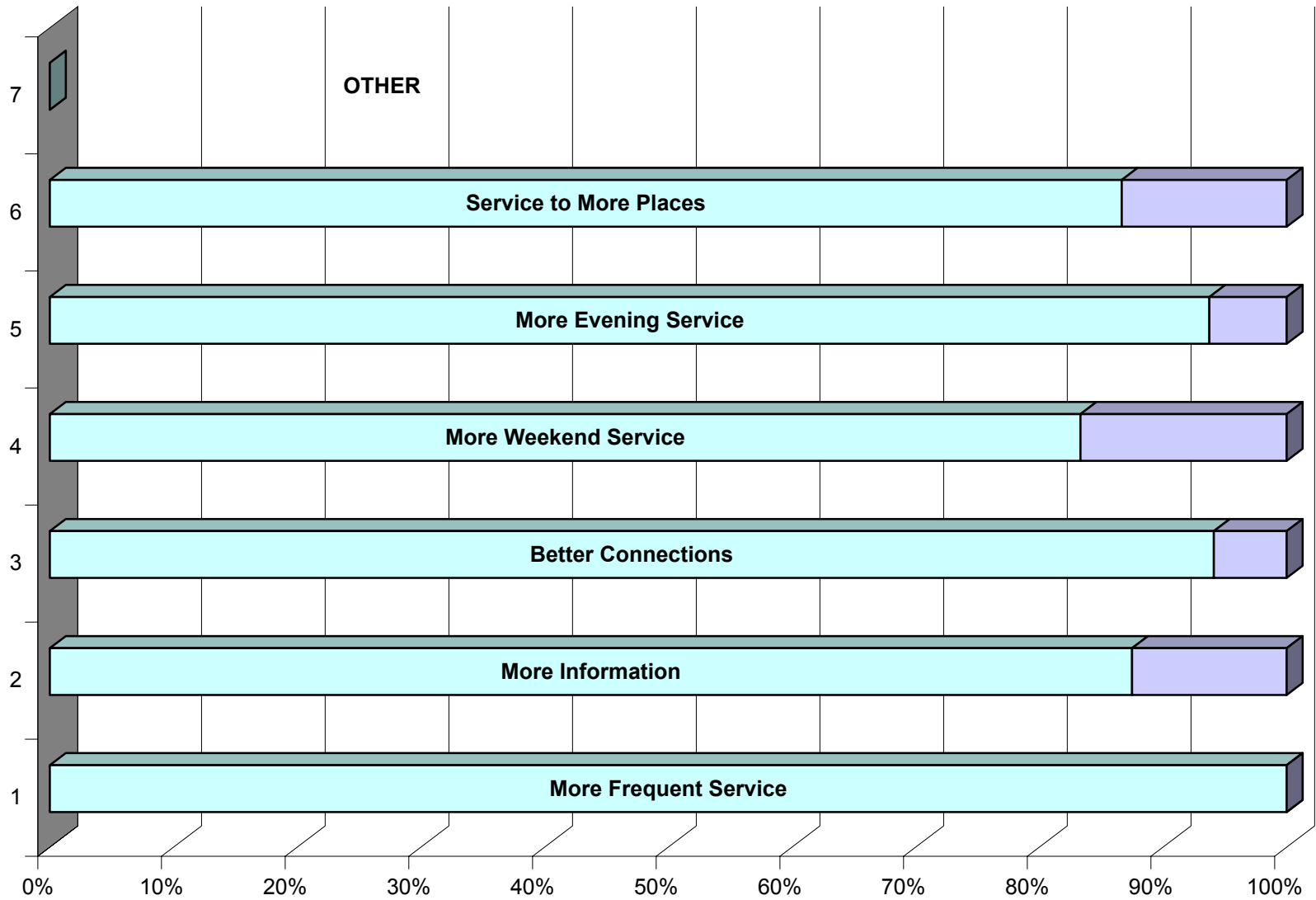
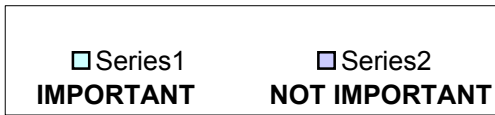
Why? More reliable, timely,  
etc.

# 10. Rating BayTransit Service

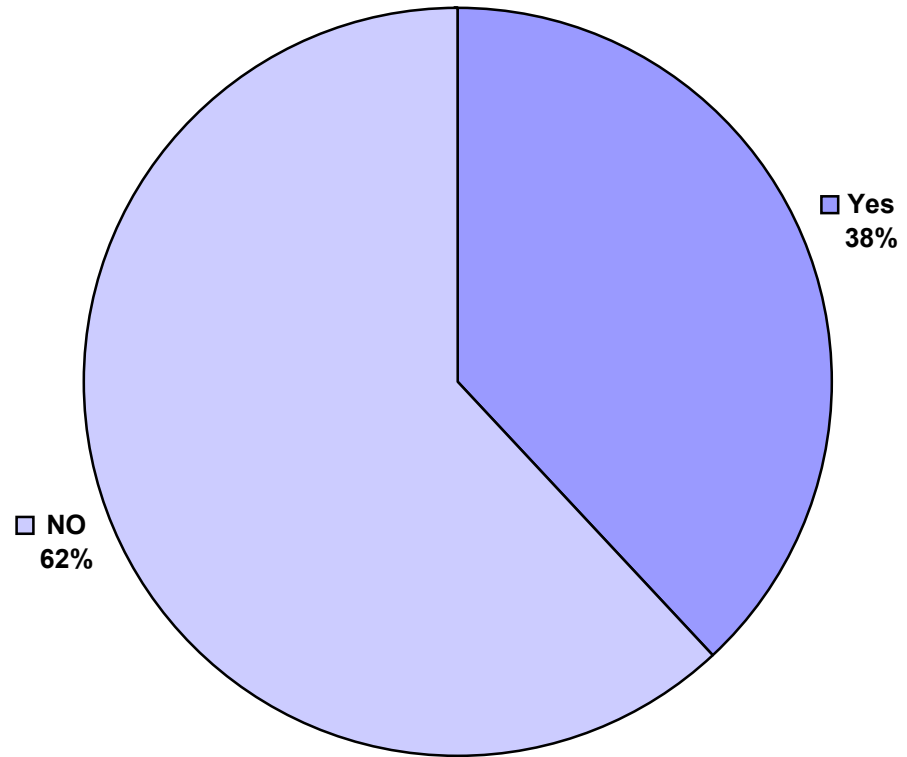
Series1 GREAT  
Series2 OK  
Series3 POOR



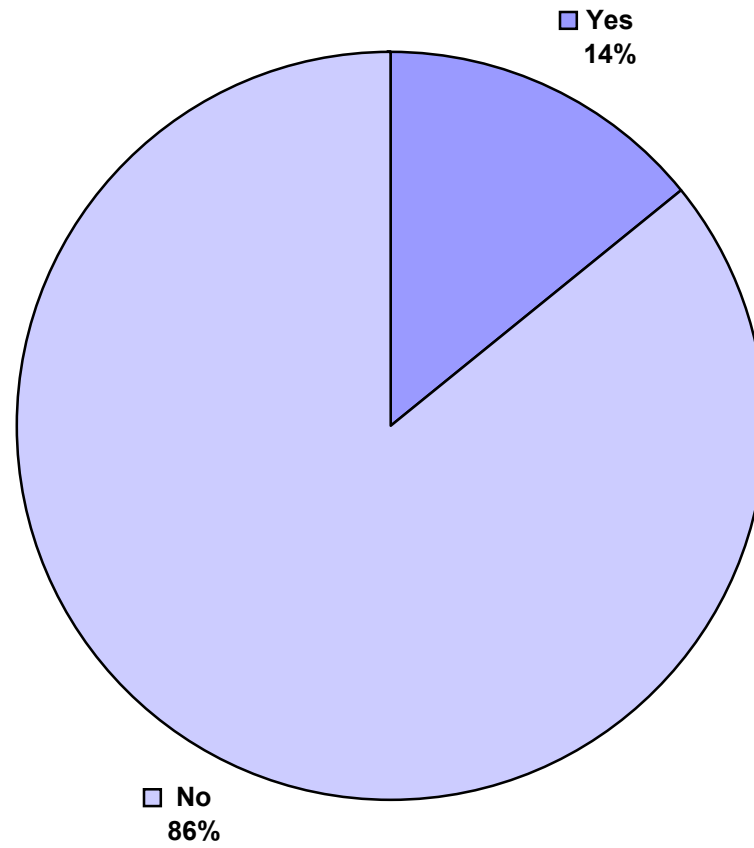
# 11. Important Factors in Public Transit Service Use



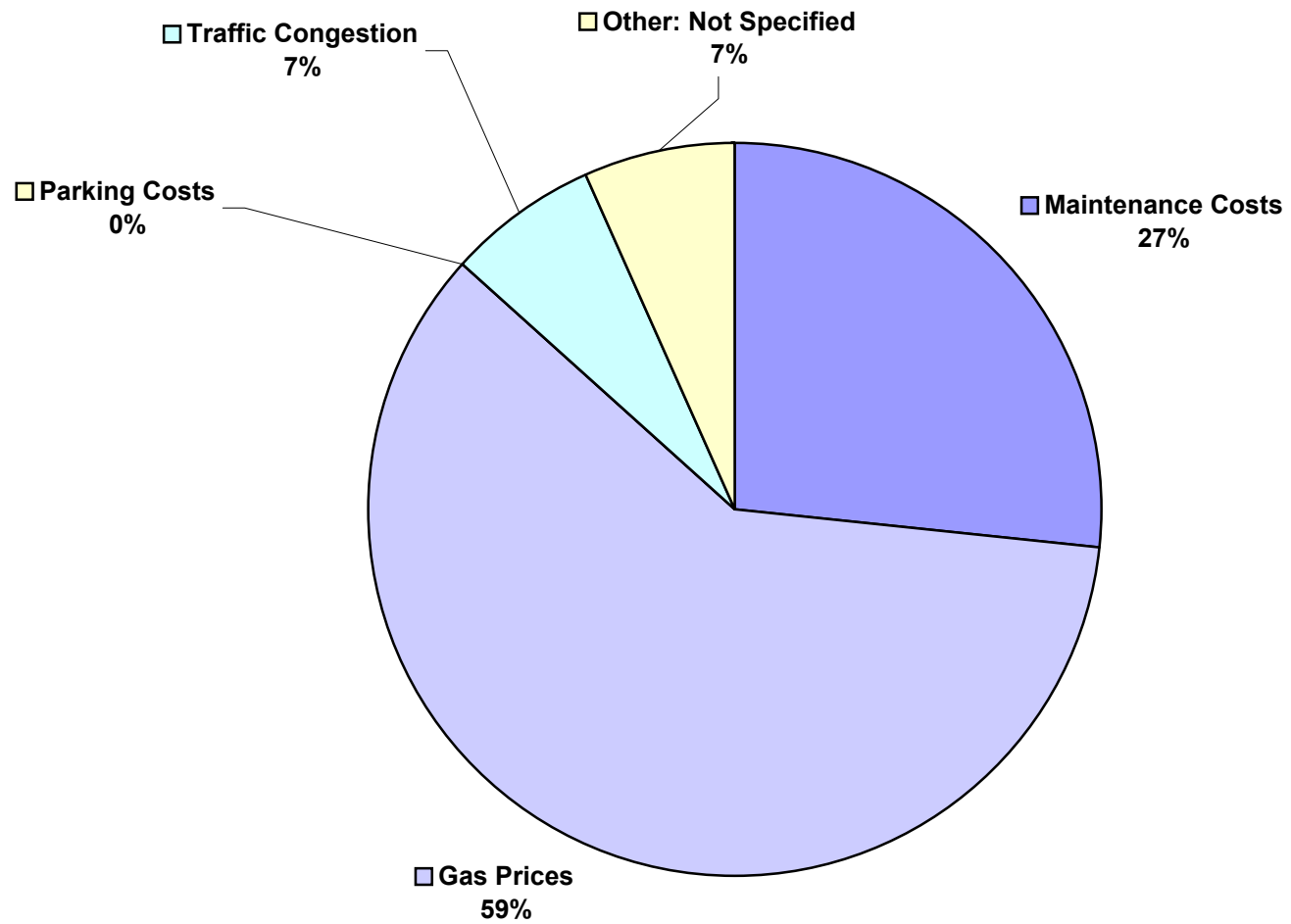
**12. Do You Have a Valid Driver's License?**



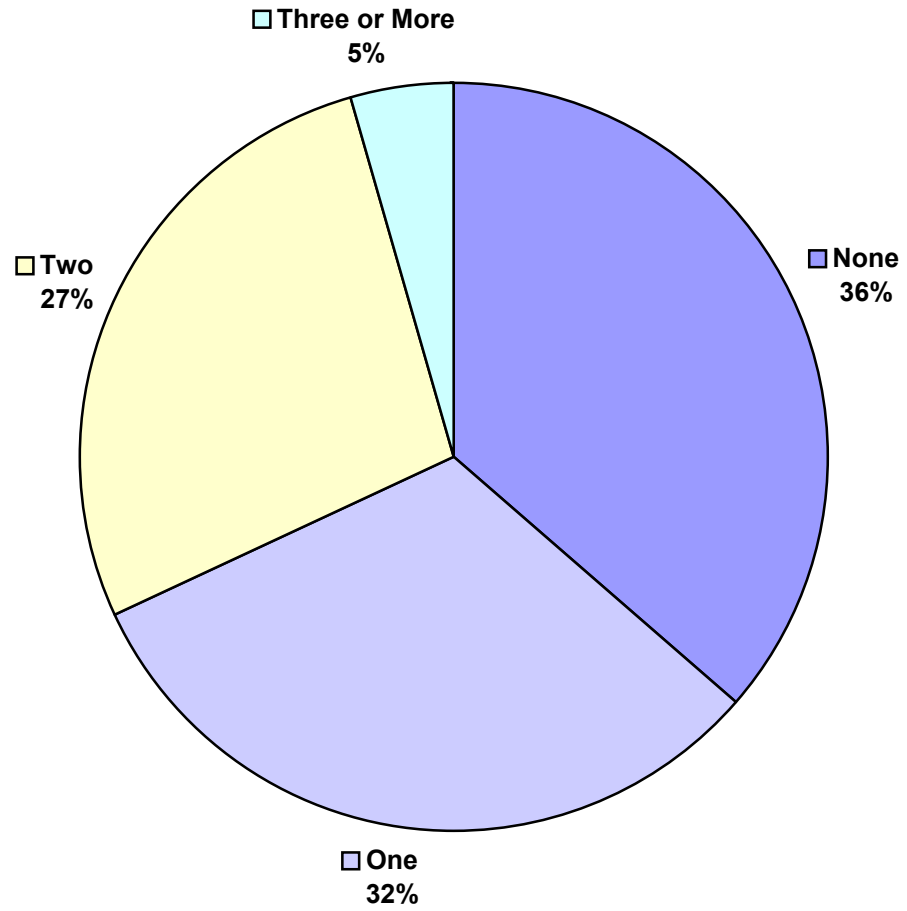
**13. Was a Car Available for This Trip?**



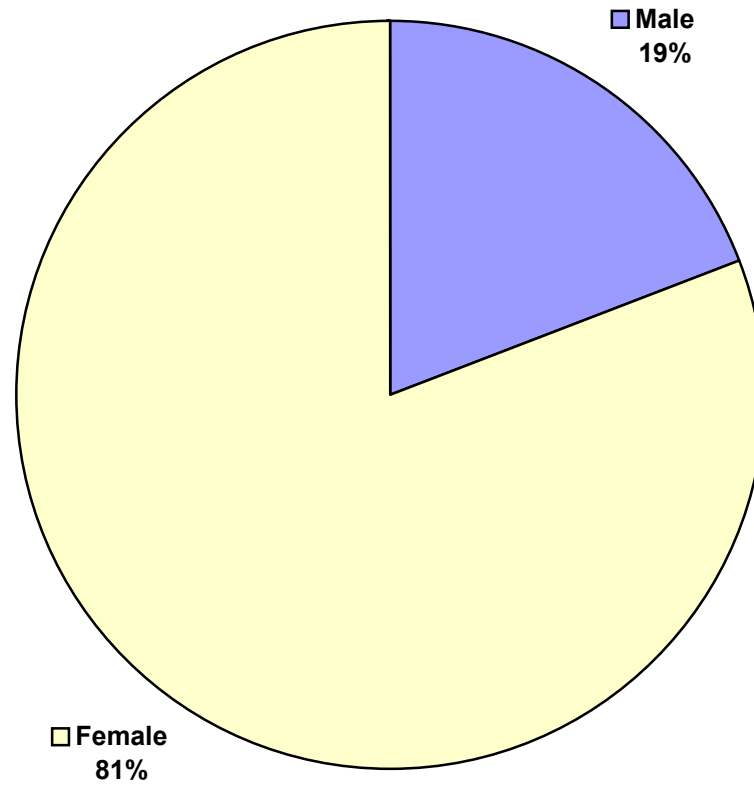
### 14. Reason for not using that available car?



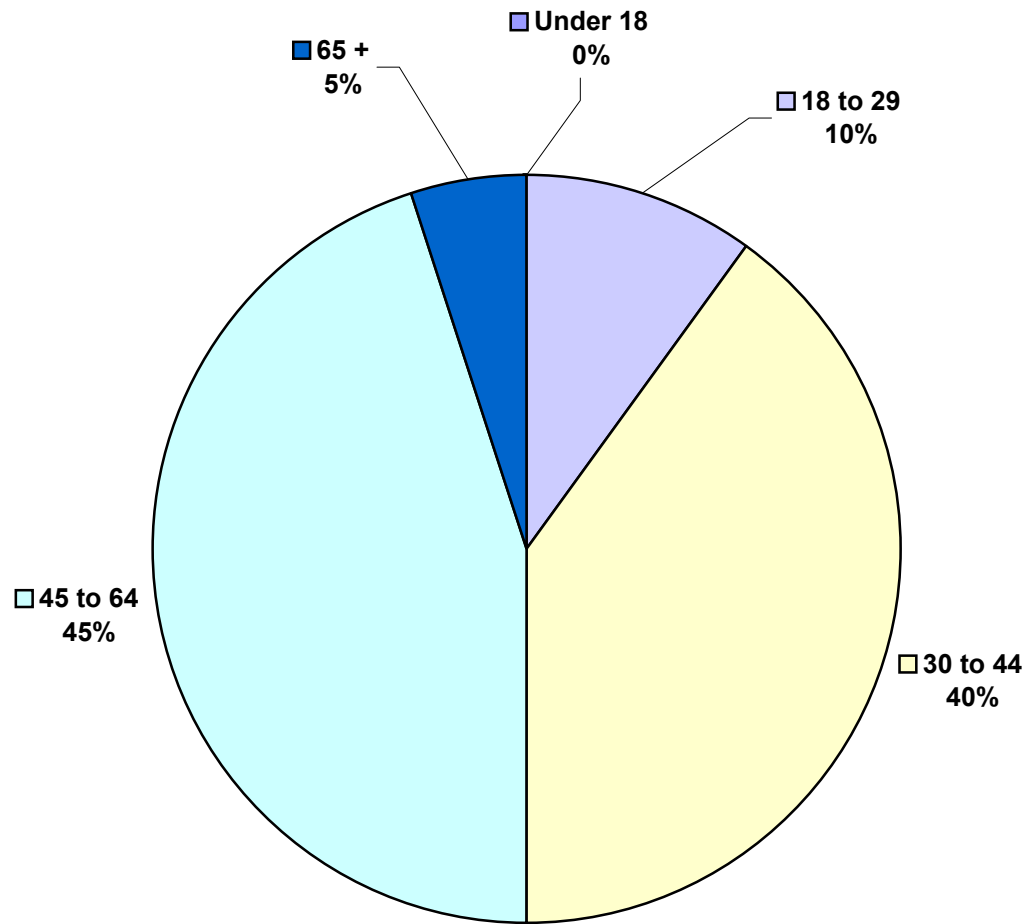
### 15. How Many Vehicles at Home?



**16. Gender?**



### 17. Age Group



### 18. Most Important Improvement Needed?

