TRANSPORTATION ACCESS STUDIES OF BUSINESS DISTRICTS Transportation Access Survey

The Boston Region Metropolitan Planning Organization (MPO) is studying how changing travel behavior is affecting how customers travel to and from business districts. This survey asks business owners and managers about their customers' travel and shopping choices. It will take approximately 5–10 minutes to complete. Please complete this survey by April 5, 2019, to have your response included in our analysis.

Please contact Andrew Clark at aclark@ctps.org or 857-702-3660 with any questions. Feel free to share this survey with other businesses in your area that may be interested in helping with this effort.

We appreciate your help with this study.

D=:								
	ness type:							
[]	Bakery, café, coffee shop	[] Movie theater, performance venue						
[]	Bank, financial service	[] Pharmacy, laundromat, household service						
[]	Beer/wine/liquor store	[] Restaurant: quick-service						
[]	Convenience store	[] Restaurant: sit-down, bar						
[]	Grocery store, specialty food shop	[] Retail, clothing, household goods						
[]	Gym, yoga/fitness center	[] Salon, barber, spa						
[]	Other (specify)							
Wha	t are your hours of operation? Weekday:	Weekend:						
Whe	n is the busiest time of day for your bu Weekday:	siness? Weekend:						
What is the busiest day of the week for your business? (Check all that apply.)								
M	[] [] [] onday Tuesday Wednesday	[]	у					
On a	average, how many customers does yo Weekday:	• •						

How much $\underline{\mathit{time}}$ does a customer	typically spend at your busing	ness?
Weekday:	Weekend:	
How much <i>money</i> does a custom Weekday:	ner typically spend at your bu Weekend:	
During your busiest times, what p transportation?	ercentage of your customers	s arrive by the following means of
	Weekday	Weekend
Drive:	%	%
Dropped off:	%	%
Walk:	%	%
Bike:	%	%
Bus:	%	%
Commuter rail:	%	%
Rapid transit (subway or light rail):	%%	%
Other (specify):	%%	%
What percentage of your customed Please provide the following infor located.	%	
City or town:		
Nearest major intersection:		
Please share any other information your business below.	on about trends or issues reg	parding how your patrons access

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•	•	will survey customers in person at selected Would you be willing to let us survey your
	[] Yes	[] No
[If yes] Thank you for being willing to information below.	let us survey your c	customers. Please provide your contact
		uring the week of April 16, 2019, to schedule nich will take place between April 22 and May
Contact name:		
Contact email:		
Business name:		
Business address:		