

Appendix B: Customer Survey



Please take a few minutes to complete this survey. Your answers and suggestions will help improve the transportation service you receive.

Thank you!

1. Name of bus/van/taxi service for which you are providing comments:

2. How do you rate your present bus/van service? (check answers below for each part)

	Poor	Fair	Good	Very Good
Appearance of buses/vans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendliness of drivers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appearance of drivers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-time reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hours of operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time it takes to travel from place to place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bus/van goes where you need it to go	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driver safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendliness of office staff/dispatcher when you call for service or help using the system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. How often do you ride?

- Less than once a month Once a month
 Twice a month Once a week
 Several times a week Daily

4. What is the primary reason for riding?

- Employment Shopping Social, visit friend/relative
 Medical School Recreation
 Other (please specify) _____

5. Gender : Female Male

6. Age in Years: _____

7. Ethnicity (check all that apply):

- American Indian/Alaska Native Hispanic/Latino
 Asian / Pacific Islander White/Caucasian
 Black/African American Other: _____

8. Where do you live?

- Anchor Point Kasilof Seward
 Clam Gulch Kenai Soldotna
 Funny River Nikiski Sterling
 Kalifornsky Salamatof
 Other (specify) _____

9. What is your total HOUSEHOLD income? (Include all income for all members of your household)

- Less than \$7,500 per year \$35,000 - \$44,999 per year
 \$7,500 - \$14,999 per year \$50,000 - \$74,999 per year
 \$15,000 - \$34,999 per year \$75,000 or more per year

10. How many vehicles in operating condition does your household have?

- None One Two Three or more

11. What would you most like to see improved about your present bus service? Please also use this space for any comments you may have.

PLEASE CONTINUE ON THE OTHER SIDE →