

The XYZ of ABC 2010 Citizen Survey

Please complete this questionnaire if you are the adult (age 18 or older) in the household who most recently had a birthday. The adult's year of birth does not matter. Please select the response (by circling the number or checking the box) that most closely represents your opinion for each question. Your responses are anonymous and will be reported in group form only.

1. Please rate each of the following aspects of quality of life in ABC:

	<i>Excellent</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>	<i>Don't know</i>
ABC as a place to live	1	2	3	4	5
Your neighborhood as a place to live	1	2	3	4	5
ABC as a place to raise children	1	2	3	4	5
ABC as a place to work	1	2	3	4	5
ABC as a place to retire	1	2	3	4	5
The overall quality of life in ABC	1	2	3	4	5

2. Please rate each of the following characteristics as they relate to ABC as a whole:

	<i>Excellent</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>	<i>Don't know</i>
Sense of community	1	2	3	4	5
Openness and acceptance of the community toward people of diverse backgrounds	1	2	3	4	5
Overall appearance of ABC	1	2	3	4	5
Cleanliness of ABC	1	2	3	4	5
Overall quality of new development in ABC	1	2	3	4	5
Variety of housing options	1	2	3	4	5
Overall quality of business and service establishments in ABC	1	2	3	4	5
Shopping opportunities	1	2	3	4	5
Opportunities to attend cultural activities	1	2	3	4	5
Recreational opportunities	1	2	3	4	5
Employment opportunities	1	2	3	4	5
Educational opportunities	1	2	3	4	5
Opportunities to participate in social events and activities	1	2	3	4	5
Opportunities to participate in religious or spiritual events and activities ..	1	2	3	4	5
Opportunities to volunteer	1	2	3	4	5
Opportunities to participate in community matters	1	2	3	4	5
Ease of car travel in ABC	1	2	3	4	5
Ease of bus travel in ABC	1	2	3	4	5
Ease of rail or subway travel in ABC	1	2	3	4	5
Ease of bicycle travel in ABC	1	2	3	4	5
Ease of walking in ABC	1	2	3	4	5
Availability of paths and walking trails	1	2	3	4	5
Traffic flow on major streets	1	2	3	4	5
Amount of public parking	1	2	3	4	5
Availability of affordable quality housing	1	2	3	4	5
Availability of affordable quality child care	1	2	3	4	5
Availability of affordable quality health care	1	2	3	4	5
Availability of affordable quality food	1	2	3	4	5
Availability of preventative health services	1	2	3	4	5
Air quality	1	2	3	4	5
Quality of overall natural environment in ABC	1	2	3	4	5
Overall image or reputation of ABC	1	2	3	4	5

3. Please rate the speed of growth in the following categories in ABC over the past 2 years:

	<i>Much too slow</i>	<i>Somewhat too slow</i>	<i>Right amount</i>	<i>Somewhat too fast</i>	<i>Much too fast</i>	<i>Don't know</i>
Population growth	1	2	3	4	5	6
Retail growth (stores, restaurants, etc.)	1	2	3	4	5	6
Jobs growth	1	2	3	4	5	6

4. To what degree, if at all, are run down buildings, weed lots or junk vehicles a problem in ABC?

- Not a problem
 Minor problem
 Moderate problem
 Major problem
 Don't know

5. Please rate how safe or unsafe you feel from the following in ABC:

	Very safe	Somewhat safe	Neither safe nor unsafe	Somewhat unsafe	Very unsafe	Don't know
Violent crime (e.g., rape, assault, robbery)	1	2	3	4	5	6
Property crimes (e.g., burglary, theft).....	1	2	3	4	5	6
Environmental hazards, including toxic waste.....	1	2	3	4	5	6

6. Please rate how safe or unsafe you feel:

	Very safe	Somewhat safe	Neither safe nor unsafe	Somewhat unsafe	Very unsafe	Don't know
In your neighborhood during the day.....	1	2	3	4	5	6
In your neighborhood after dark.....	1	2	3	4	5	6
In ABC's downtown area during the day	1	2	3	4	5	6
In ABC's downtown area after dark.....	1	2	3	4	5	6

7. During the past twelve months, were you or anyone in your household the victim of any crime?

- No → Go to Question 9
 Yes → Go to Question 8
 Don't know → Go to Question 9

8. If yes, was this crime (these crimes) reported to the police?

- No
 Yes
 Don't know

9. In the last 12 months, about how many times, if ever, have you or other household members participated in the following activities in ABC?

	Never	Once or twice	3 to 12 times	13 to 26 times	More than 26 times
Used ABC public libraries or their services	1	2	3	4	5
Used ABC recreation centers	1	2	3	4	5
Participated in a recreation program or activity	1	2	3	4	5
Visited a neighborhood park or XYZ park	1	2	3	4	5
Ridden a local bus within ABC	1	2	3	4	5
Attended a meeting of local elected officials or other local public meeting	1	2	3	4	5
Watched a meeting of local elected officials or other XYZ-sponsored public meeting on cable television, the Internet or other media.....	1	2	3	4	5
Read ABC Newsletter.....	1	2	3	4	5
Visited the XYZ of ABC Web site (at www. __.com)	1	2	3	4	5
Recycled used paper, cans or bottles from your home.....	1	2	3	4	5
Volunteered your time to some group or activity in ABC.....	1	2	3	4	5
Participated in religious or spiritual activities in ABC	1	2	3	4	5
Participated in a club or civic group in ABC.....	1	2	3	4	5
Provided help to a friend or neighbor	1	2	3	4	5

10. About how often, if at all, do you talk to or visit with your immediate neighbors (people who live in the 10 or 20 households that are closest to you)?

- Just about every day
 Several times a week
 Several times a month
 Less than several times a month

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11. Please rate the quality of each of the following services in ABC:

	<i>Excellent</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>	<i>Don't know</i>
Police services	1	2	3	4	5
Fire services	1	2	3	4	5
Ambulance or emergency medical services.....	1	2	3	4	5
Crime prevention	1	2	3	4	5
Fire prevention and education	1	2	3	4	5
Municipal courts	1	2	3	4	5
Traffic enforcement.....	1	2	3	4	5
Street repair	1	2	3	4	5
Street cleaning	1	2	3	4	5
Street lighting.....	1	2	3	4	5
Snow removal.....	1	2	3	4	5
Sidewalk maintenance	1	2	3	4	5
Traffic signal timing	1	2	3	4	5
Bus or transit services.....	1	2	3	4	5
Garbage collection.....	1	2	3	4	5
Recycling.....	1	2	3	4	5
Yard waste pick-up	1	2	3	4	5
Storm drainage.....	1	2	3	4	5
Drinking water.....	1	2	3	4	5
Sewer services	1	2	3	4	5
Power (electric and/or gas) utility	1	2	3	4	5
XYZ parks	1	2	3	4	5
Recreation programs or classes	1	2	3	4	5
Recreation centers or facilities.....	1	2	3	4	5
Land use, planning and zoning	1	2	3	4	5
Code enforcement (weeds, abandoned buildings, etc)	1	2	3	4	5
Animal control	1	2	3	4	5
Economic development	1	2	3	4	5
Health services	1	2	3	4	5
Services to seniors.....	1	2	3	4	5
Services to youth.....	1	2	3	4	5
Services to low-income people	1	2	3	4	5
Public library services	1	2	3	4	5
Public information services	1	2	3	4	5
Public schools.....	1	2	3	4	5
Cable television	1	2	3	4	5
Emergency preparedness (services that prepare the community for natural disasters or other emergency situations)	1	2	3	4	5
Preservation of natural areas such as open space, farmlands and greenbelts.....	1	2	3	4	5

12. Overall, how would you rate the quality of the services provided by each of the following?

	<i>Excellent</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>	<i>Don't know</i>
The XYZ of ABC	1	2	3	4	5
The Federal Government	1	2	3	4	5
The State Government	1	2	3	4	5
CCC County Government	1	2	3	4	5

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Our last questions are about you and your household. Again, all of your responses to this survey are completely anonymous and will be reported in group form only.

D1. Are you currently employed for pay?

- No → Go to Question D3
- Yes, full time → Go to Question D2
- Yes, part time → Go to Question D2

D2. During a typical week, how many days do you commute to work (for the longest distance of your commute) in each of the ways listed below? (Enter the total number of days, using whole numbers.)

- Motorized vehicle (e.g., car, truck, van, motorcycle, etc...) by myself days
- Motorized vehicle (e.g., car, truck, van, motorcycle, etc...) with other children or adults days
- Bus, Rail, Subway or other public transportation days
- Walk days
- Bicycle days
- Work at home days
- Other days

D3. How many years have you lived in ABC?

- Less than 2 years 11-20 years
- 2-5 years More than 20 years
- 6-10 years

D4. Which best describes the building you live in?

- One family house detached from any other houses
- House attached to one or more houses (e.g., a duplex or townhome)
- Building with two or more apartments or condominiums
- Mobile home
- Other

D5. Is this house, apartment or mobile home...

- Rented for cash or occupied without cash payment?
- Owned by you or someone in this house with a mortgage or free and clear?

D6. About how much is your monthly housing cost for the place you live (including rent, mortgage payment, property tax, property insurance and homeowners' association (HOA) fees)?

- Less than \$300 per month
- \$300 to \$599 per month
- \$600 to \$999 per month
- \$1,000 to \$1,499 per month
- \$1,500 to \$2,499 per month
- \$2,500 or more per month

D7. Do any children 17 or under live in your household?

- No Yes

D8. Are you or any other members of your household aged 65 or older?

- No Yes

D9. How much do you anticipate your household's total income before taxes will be for the current year? (Please include in your total income money from all sources for all persons living in your household.)

- Less than \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$99,999
- \$100,000 to \$149,999
- \$150,000 or more

Please respond to both question D10 and D11:

D10. Are you Spanish, Hispanic or Latino?

- No, not Spanish, Hispanic or Latino
- Yes, I consider myself to be Spanish, Hispanic or Latino

D11. What is your race? (Mark one or more races to indicate what race you consider yourself to be)

- American Indian or Alaskan Native
- Asian, Asian Indian or Pacific Islander
- Black or African American
- White
- Other

D12. In which category is your age?

- 18-24 years 55-64 years
- 25-34 years 65-74 years
- 35-44 years 75 years or older
- 45-54 years

D13. What is your sex?

- Female Male

D14. Are you registered to vote in your jurisdiction?

- No Ineligible to vote
- Yes Don't know

D15. Many people don't have time to vote in elections. Did you vote in the last general election?

- No Ineligible to vote
- Yes Don't know

D16. Do you have a cell phone?

- No Yes

D17. Do you have a land line at home?

- No Yes

D18. If you have both a cell phone and a land line, which do you consider your primary telephone number?

- Cell Land line Both

Thank you for completing this survey. Please return the completed survey in the postage paid envelope to:
National Research Center, Inc., PO Box 549, Belle Mead, NJ 08502