



Employee General Survey

Montgomery County Commuter Services, in cooperation with your employer, is conducting this survey to find ways to improve County transportation.

Complete the survey to enter prize drawings for gift cards and a Grand Prize (if permitted by your employer).

Note: If you work for more than one employer, complete this survey for the employer that gave you the survey link.

i. Please type your employer's address in the text box provided:
* 2. Please type your employer in the box provided.
* 3. What is your <u>home</u> ZIP code?
* 4. What is your one-way commuting <u>distance</u> to work in miles? Please enter a whole number only.
* 5. What is your one-way commuting <u>time</u> to work in minutes? Please enter a whole number only.

* 6. What time do you typically arrive and depart from work?
Arrival Time
Time AM/PM hh mm - 💠
Departure Time
Time AM/PM hh mm - •
* 7. What options best represent your work schedule for this employer? Include telework in the days worked.
Employed full-time
Employed part-time
Other (please specify)
* 8. How many days per week do you work?
○ 1 Day
O 2 Days
○ 3 Days
O 4 Days
○ 5 Days
○ 6 Days
○ 7 Days

		Work at my regular employment location		Regulai	Regular day off		Telework (e.g. full workday at home or a location)		Work at client site or business travel a full work day		
Monday		\bigcirc			\bigcirc		\bigcirc				
Tuesday		\circ		\bigcirc		\bigcirc			\bigcirc		
Wednesday		\bigcirc		\bigcirc					\bigcirc		
Thursday		\bigcirc		\bigcirc		\bigcirc			\bigcirc		
Friday		\bigcirc			\bigcirc		\bigcirc		\bigcirc		
Saturday					\circ		\bigcirc		\bigcirc		
Sunday		\bigcirc					\bigcirc		\bigcirc		
										and separat the	
	Drive alone	Drive carpool or vanpool	Ride carpool or vanpool		Metrobus or Commuter bus	Metrorail	MARC, VRE, or AMTRAK commuter train	Walk	Bike or e- scooter	and separat the differen modes	
Monday		carpool or	carpool or		or Commuter	Metrorail	VRE, or AMTRAK commuter	Walk	e-	and separat the differen modes with a semi- colon	
Tuesday	alone	carpool or	carpool or		or Commuter bus		VRE, or AMTRAK commuter		e- scooter	and separat the differen modes with a semi- colon ";")	
Tuesday Wednesday	alone	carpool or vanpool	carpool or vanpool		or Commuter bus		VRE, or AMTRAK commuter	0	e- scooter	separat the differen modes with a semi- colon ";")	
Tuesday	alone	carpool or vanpool	carpool or vanpool	bus	or Commuter bus		VRE, or AMTRAK commuter	0	e- scooter	and separat the differen modes with a semi-colon ";")	
Tuesday Wednesday	alone	carpool or vanpool	carpool or vanpool	bus	or Commuter bus		VRE, or AMTRAK commuter	0	e- scooter	and separat the differen modes with a semi-colon ";")	
Tuesday Wednesday Thursday Friday Saturday	alone O O O	carpool or vanpool	carpool or vanpool	bus O O O	or Commuter bus		VRE, or AMTRAK commuter train	0 0 0	e- scooter	and separat the differen modes with a semi-colon ";")	
Tuesday Wednesday Thursday Friday	alone O O O	carpool or vanpool	carpool or vanpool	bus O O O	or Commuter bus		VRE, or AMTRAK commuter train	0 0 0	e- scooter	and separat the differen modes with a semi-colon ";")	

* 9. Check the most typical weekly schedule you have for this employer. Only choose one

* 11. For each mode of travel, indicate how many days per <u>month</u> you use it as your primary mode of travel. This should be your longest mode of travel for your commute. Please enter numbers only.
Drive Alone
Drive Carpool or vanpool
Ride carpool or vanpool
Ride-On bus
Metrobus or commuter bus
Metrorail
MARC, VRE, or AMTRAK commuter train
Walk
Bike or e-scooter
Other
12. If carpooling or vanpooling, how many passengers are in the vehicle? Include yourself in the count and only enter in numbers.
13. If you drive to work, where do you park at this location?
O In a lot or garage at my work location
O In a public lot or garage off-site
On the street
O Do not know
Other (please specify)

○ No charge, I park for free				
Yes, I pay for parking a total pe	r month of \$ (Pl	lease enter a nu	ımber only with	no symbols)
15. Does your employer offer any cansit or vanpooling to get to work ou receive the benefit or not.				
	Available and I receive it	Available but I don't receive it	Not available	Don't know
Employer-paid monthly cransit/vanpool fare (e.g. SmartBenefits/value added by employer to SmarTrip card, FranShare, TRANServe, etc.)	\bigcirc	0	0	0
Pre-tax payroll deduction for cransit/vanpool expenses	\circ	\bigcirc	\bigcirc	\bigcirc
Employer Paid Vanpool or Shuttle	\bigcirc			\bigcirc
Commuter bus	\bigcirc	\bigcirc	\bigcirc	\bigcirc
ther transit/vanpool financial benefit 6. If your employer matches your patches they	<u>ore-tax</u> payroll	. deduction fo		npool, what
17. How much transit or vanpool benefit you receive without requ loaded by your employer directly	iring a contrib	ution from yo		
\$0, I don't receive a transit or v	anpool benefit			
Yes, I receive this amount per r	nonth (\$) (Pleas	se estimate and	l only enter a ni	umber)

18. For each service, indicate if it would encourage you t use that type of transportation. For example, check "Yes information for transit," if that service would encourage transit more often.	s" for "Rou	ute/schedule)
	Yes	No	Maybe
Assistance to find a carpool or vanpool partner	\bigcirc	\bigcirc	\bigcirc
Free, reserved and convenient parking for carpools or vanpools	\bigcirc	\bigcirc	\bigcirc
Monthly payment or reimbursement equal to your vanpool cost	\bigcirc	\bigcirc	\bigcirc
Pre-tax payroll deduction equal to your vanpool cost	\bigcirc	\bigcirc	\bigcirc
Monthly payment or reimbursement equal to your transit cost	\bigcirc	\bigcirc	\bigcirc
Pre-tax payroll deduction equal to your transit cost	\bigcirc	\bigcirc	\bigcirc
Route / schedule information for transit	\bigcirc		
Bus stop located within a 5-minute walk of home/work	\bigcirc	\bigcirc	\bigcirc
Guaranteed Ride Home in case of emergency for carpool, vanpool, transit users, bicyclists and walkers	\bigcirc	\bigcirc	\bigcirc
Shared micro-mobility services – bikes, e-bikes, e-scooters	\bigcirc	\bigcirc	\bigcirc
Secure locker or other storage at work for bicycle	\bigcirc	\bigcirc	\bigcirc
Free or discounted membership for employees who use Capital Bikeshare or shared e-scooters to get to work or to/from transit	\bigcirc	\bigcirc	\bigcirc
Access to carshare vehicles (e.g., Zipcar, car2go) for personal trips during the workday for carpool/vanpool/transit users, cyclists or walkers.	\bigcirc	\circ	\circ
19. Please provide any response you would like to share Montgomery County or around the Washington metroporthese could include comments about issues addressed suggestions for actions the County and others could takarea.	olitan regi in the sui	on. rvey as well	as





Employee General Survey

To be entered into the weekly prize drawings for:
Multiple \$25 gift cards A Grand Prize of a \$250 gift card from Montgomery County Commuter Services
Please fill out the remaining contact information.
20. First and Last Name
21. Phone Number (Please provide numbers only, no spaces or characters)
22. Email





Employee General Survey

Information Request (Optional)

Please complete this section only if you would like to receive free information on carpooling, vanpooling, transit, biking or walking, the Guaranteed Ride Home program (GRH) or other alternatives to driving alone.

23. Please send me the following information/schedules on these modes of transportation.
Transit Options
Guaranteed Ride Home
Bicycling
Bikeshare or e-scooters
Other (please specify)
24. I'm interested in being a
Carpool Driver
Carpool Rider
☐ Vanpool Driver
☐ Vanpool Rider