

1. TODAY'S DATE



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).

PLEASE RETURN THIS SURVEY WITHIN ONE WEEK TO THE PERSON WHO GAVE IT TO YOU.

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

EMPLOYER OR ORGANIZATION NAME

,	What is your <u>home</u> ZIP Code?									
,	What is your one-way commuting distance	and	ltim	e to	get t	to w	ork?		miles	minute
	What time do you typically arrive at and le AM or PM)	ave	this	worl	k loc	atior	ո? (P	lease	e enter the	time and ci
	Arrive at work AM PM (circle o	one)		Le	ave	worl	<		_ AM PM	(circle one)
	What options best represents your work so worked. (Check all that apply)	ched	ule f	or th	nis e	mplo	yer:	? Incl	ude telewo	ork in the da
	O Employed full-time									
	O Employed part-time						-	-		
	O Other schedule (Specify)			_ н	low i	many	v dav	s pe	r week?	
	Check the most typical way you travel to w your commute.	vork.		sho	uld l	be th	ne lo	nges		
		vork.	(Cho	s sho	uld l		ne lo	nges	t mode of t	travel for
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	your commute.	M	(Che	eck C Each W	One E	be th Butto umn) F	on in	s	t mode of t Average days per	If carpooli
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,	Drive alone Drive carpool or vanpool	M O O	(Che	eck C Each W	One E	Buttoumn) F	on in	s	t mode of t Average days per	If carpooli
,	Drive alone Drive carpool or vanpool Ride carpool or vanpool	M O O	(Che	eck C Each W	One E	Butto umn) F	on in	s	t mode of t Average days per	If carpooli
,	Drive alone Drive carpool or vanpool Ride carpool or vanpool Ride-On bus Metrobus/Commuter bus Metrorail	M O O O	(Che	eck C Each	One E	Buttoumn) F	on in	s	t mode of t Average days per	If carpooli
,	Drive alone Drive carpool or vanpool Ride carpool or vanpool Ride-On bus Metrobus/Commuter bus Metrorail MARC, VRE, or AMTRAK commuter train	M O O O O O O O O	(Che	eck C Each	T O O O O O O O	Buttoumn) F	on in	s	t mode of t Average days per	If carpooli
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8. If you drive	If you drive to work, how much do you pay to park at this location? (Please choose only one option								
O No cl	harge, I park for free								
○ Yes, I	pay for parking at \$	per:	day / month (cire	cle one)					
vanpooling	Does your employer offer any of the following monthly financial benefits to use transit or vanpooling to get to work? For each, please indicate the dollar amount available and if so, if you receive the benefit or not.								
			Available and I	Available, but I	No	t D	on't		
TRANSIT/\	/ANPOOL FINANCIAL	BENEFIT	receive it	DON'T receive it	availa	ble k	now		
(e.g. Smart	paid monthly transit/va tBenefits/value added t p card, TranShare, TRAI	oy employer	\$						
Pre-tax parexpenses	yroll deduction for tran	sit/vanpool	\$						
Employer I	Paid Vanpool or Shuttle	!	\$						
Commuter	bus		\$						
	sit/vanpool financial be	•	\$						
	If your employer matches your pre-tax payroll deduction for transit, how much do they offer?								
-	rtation. For example, o ourage you to start us		-		r trans	sit," if th	nat		
CARPOOL	/ VANPOOL SERVICES	S			Yes	Maybe	No		
	to find a carpool or va					,,,,,,,			
	Free, reserved and convenient parking for carpools or vanpools								
Monthly p	Monthly payment or reimbursement equal to your vanpool cost								
Pre-tax pa	Pre-tax payroll deduction equal to your <u>vanpool</u> cost								
TRANSIT S					Yes	Maybe	No		
	Monthly payment or reimbursement equal to your <u>transit</u> cost								
Pre-tax payroll deduction equal to your <u>transit</u> cost Route / schedule information for transit									
	<u>Bus</u> stop located within a 5-minute walk of home/work OTHER SERVICES								
Guarantee		in case of emergency for carpool, vanpoo		l, transit users,	les	Maybe	No		
	Shared micro-mobility services – bikes, e-bikes, scooters								
	Secure locker or other storage at work for <u>bicycle</u>								
	counted membership for to get to work or to/fro	• •	vho use Capital B	ikeshare or shared					
<u> </u>	carshare vehicles (e.g., and carpool/vanpool/trans			during the					

Continue to the next page of this survey to be entered to win a Grand Prize of a \$250 gift card!





or ad	around the Washington me dressed in the survey as we	ide any comments you would like to share about transportation in Montgomery Coun he Washington metropolitan region. These could include comments about issues in the survey as well as suggestions for actions the County and others could take to						
lm	prove commuting in the are	ea.						
Thank	you for completing the surv	voul						
		vey: vey will be entered into weekly prize dra	awings for:					
	Multiple \$25 gift cards	rey will be circled into its com, print	wings io					
		card from Montgomery County Commute	er Services.					
	•	ur name and a phone number below. You		rρ				
		d to information you provide for the prize		C				
Name_		Phone number	er					
	would like to receive our new	wsletter, including transportation update	es, etc., please provide your					
Email a	iddress							
		f you would like to receive free informati anteed Ride Home program (GRH) or oth		g,				
Name _				_				
Home /	Address			_				
	NUMBER	STREET	APT. NO.					
	CITY	STATE	ZIP	-				
Work P	hone Number	Work email		_				
O Tran	=	rmation / schedules (check all that interesting O Bikeshare o						
Car /Va	anpool Matchlist - I can / pre	refer to be a (check all that interest you) Either Vanpool: O Driver O R	Didor () Fither					