

## Traffic Calming Survey

This is a Survey regarding the traffic in Solera Oak Valley Greens Association.

***This Survey is one per person.***

Please answer each question by checking the box that closely expresses your opinion.

The answers are based on a scale of 1 – 5 with 1 being none to 5 being serious. At the end of the Survey, please provide any concerns or other comments regarding the Traffic in Solera. Thank you on this very important topic. Your opinion matters.

### **Traffic is not a problem in Solera**

    

None                  Normal                  Serious

### **Drivers Stop at Stop Signs**

    

Never                  Sometime                  Always

### **Drivers Roll through Stop Signs**

    

Never                  Sometime                  Always

### **Drivers do not attempt to Stop at Stop Signs at all.**

    

Never                  Sometime                  Always

### **Speed is an issue**

    

Never                  Sometime                  Always

### **Flashing Stop Signs would be helpful to make people stop at the intersections.**

    

No                  Maybe                  Yes (Please turn over to continue.)

**Speed Cushions have been recommended by traffic experts. They are custom made for our streets and will allow space for Fire Trucks to drive over them without a reduction in speed.**

**Should Speed Cushions be installed on our main streets?**

                      

No                      Maybe                      Yes

**Should some other type of device be installed on our main streets?**

                      

No                      Maybe                      Yes

**Check the box(s) that apply to you within Solera:**

**I am a Pedestrian most of the time**

**I drive a less than 8 times a week**

**I drive between 8 and 14 times a week**

**I drive more than 15 times a week**

We appreciate the time spent on replying to this survey. Please use the space below to write your comments, suggestions, concerns. If you need more space, please attach another sheet. At the bottom of the page, please list your name and address. There will be a box in the Mailroom to deposit this survey. Thank you for your participation.

Name: \_\_\_\_\_ Address \_\_\_\_\_