CSID

Dear Anne,

I am interested in participating in the transit behavior study (SRL#1107) and have completed the form below.

Name

Is the address below your current address? ❑ Yes ❑ No

ADDR

CITY,STATE, ZIP

Telephone Number Alternate Phone Number

This is my:

* Home phone
* Cell phone
* Work phone

This is my:

* Home phone
* Cell phone
* Work phone

E-mail address

1. Do you work or go to school outside the home?
* Yes
* No →SKIP TO Q.3
1. Please give the location (either the street address or cross-streets) of your work or school:

Street

City, State, ZIP

1. In a typical week, how many times do you go to your nearest Chicago Transit Authority (CTA) rail station, or within half a mile of that station?
* 0 times
* Less than 1 time
* Between 1 and 2 times
* 3 or more times

This collection of information is voluntary and will be used to gauge potential travel-behavior response to far-reaching improvements in the pedestrian, cycling, and transit environments of neighborhoods. Public reporting burden is estimated to average 1 hour and 45 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2125-XXXX (state OMB #). Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Highway Administration, 1200 New Jersey Avenue, SE, Washington, DC 20590.