

Guanella Pass Visitor Survey 2014



ID: _____

Date: _____

Time: _____ AM/PM

Binder #: _____

Location: Bierstadt / Square Top

Weather: Sunny / Partly / Overcast / Raining

Special Event: No/Yes _____

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A. Trip Description

The questions in this section ask about your current trip to Guanella Pass. Please ask the surveyor to show you a map of the area, if you need it to help answer the questions.

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

1. **Including yourself, how many people are there in your personal group on this trip to Guanella Pass? (Enter number of people.)**

Number of people: _____

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

2. **Are there any children under the age of 16 in your personal group on this trip to Guanella Pass? (Check one box.)**

Yes (Number of children): _____

No

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

3. **Which of the following activities did you do during this trip to Guanella Pass? (Check one box for each item.)**

	Did on this Trip	Did Not Do on this Trip
A. Day hiking to Mt. Bierstadt summit		
B. Day hiking to Square Top Lakes		
C. Day hiking on Rosalie Trail		
D. Day hiking to Mt. Evans via Mt. Bierstadt		
E. Walking/Short hike (less than 1 hour)		
F. Overnight backpacking (# of nights): _____		
G. Picnicking		
H. Scenic driving		
I. Fishing		
J. Horseback riding		
K. Road biking		
L. Other (Please specify): _____		

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

4. What of the activities listed in Question 3 is your primary activity on this trip to Guanella Pass? (Enter letter of primary activity or check the box.)

Letter of primary activity:_____

OR

I do not have a primary activity on this trip to Guanella Pass.

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

5. Which of the following other locations on Guanella Pass Road have you/will you visit today? (Check one box for each location.)

	Have Visited Today	Plan to Visit Today	Don't Plan to Visit Today
Hiking Trails at Silver Dollar Lake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hiking Trails at Silverdale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hiking Trails at Abyss Lake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Picnic Area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clear Lake Campground (# of nights):_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roadside Campsite (# of nights): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please specify):_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IF YOU HIKED PART OR ALL OF THE WAY TO THE SUMMIT OF MT. BIERSTADT TODAY CONTINUE TO THE NEXT SECTION; OTHERWISE SKIP TO SECTION C

B. Hike to Mt. Bierstadt Summit

The questions in this section ask about your hike to the Mt. Bierstadt summit today. If you did not hike

part or all of the way to the Mt. Bierstadt summit today, skip to Section C of the questionnaire.

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

6. Did you hike part or all of the way to the summit of Mt. Bierstadt today? (Check one box.)

Yes, I hiked part of the way to the summit

Yes, I hiked all of the way to the summit

No (SKIP TO QUESTION 12 in SECTION C)

Topic Area 3-Crowding and Visitor Experience Quality

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

7. Did you think it was crowded at any point during your hike to Mt. Bierstadt today? (Check all that apply.)

Yes, it was crowded some or all of the time I was on the trail

Yes, it was crowded some or all of the time I was on the summit

No, it wasn't crowded at any point during my hike

Topic Area 3-Crowding and Visitor Experience Quality

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

8. Did the presence of other people on the trail make you feel rushed or slow you down at any point during your hike to Mt. Bierstadt today? (Check one box.)

Yes

No

Topic Area 3-Crowding and Visitor Experience Quality

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

9. Did you feel like the number of other people around you increased your risk or other people's risk of being injured at any point during your hike to Mt. Bierstadt today? (Check all that apply.)

Yes, I felt this way some or all of the time I was on the trail

Yes, I felt this way some or all of the time I was on the summit

No, I didn't feel this way at any point during my hike

For the next question, please ask the surveyor to show you the photos he/she has of people on the summit of Mt. Bierstadt.

Topic Area 3-Crowding and Visitor Experience Quality

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

10. Which photo shows the maximum number of people you could see at one time on Mt. Bierstadt without thinking it was crowded? (Enter photo number or check the box.)

Photo number: _____

OR

I don't think it looks crowded in any of the photos.

Topic Area 4-Attitudes and Opinions about Services, Facilities, and Management

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

11. Should the number of people allowed to hike to the summit of Mt. Bierstadt each day be limited if it is needed to prevent crowding, even if it means you might have to change your plans about when to hike? (Check one box.)

Yes

No

C. Travel and Parking

The next set of questions asks about your travel to and parking at Guanella Pass on this trip.

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0145)

12. Which route did you use to travel to Guanella Pass on this trip? (Refer to the surveyor's route map and check one box.)

From I-70 in Georgetown (#1 on route map)
 From Highway 285 in Grant (#2 on route map)
 Other (Please specify):_____

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

13. In how many vehicles did you and your personal group travel to Guanella Pass on this trip? (Enter number of vehicles.)

Number of vehicles:_____

OR

I/my personal group bicycled to Guanella Pass on this trip (SKIP TO QUESTION 18)

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

14. At approximately what time did you arrive at Guanella Pass today? (Enter time or check box.)

Approximate arrival time today:_____AM/PM (CIRCLE ONE)

OR

I arrived on a different day (Please specify date of arrival):_____

Topic Area 1-Visitor and Trip Characteristics

New question, site-specific; pre-tested in this project with volunteer participants

15. Where did you park on this trip to Guanella Pass? (Refer to the surveyor’s parking map and check one box.)

Lower parking lot (Mt. Bierstadt Trailhead)
 Upper parking lot (Square Top Lakes Trailhead)
 Along the roadside on Guanella Pass Road
 Other (Please specify):_____

Topic Area 2-Perceptions and Evaluations of Transportation-related Conditions

New question; pre-tested in this project with volunteer participants

16. Do you agree or disagree with each of the following statements about where you parked at Guanella Pass? (Check one box for each item.)

Where I parked is...	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Safe					
Convenient					

Easy to find

Close to my destination(s)

Well marked (e.g., paint striping)

My preferred parking location

In a congested parking area

Topic Area 5-Transportation-related Preferences

Pre-tested and administered in previous study (OMB Control Number 1024-0145)

17. Imagine that when you were in Georgetown or Grant (depending on your travel route) a road sign notified you that there was no more parking at Guanella Pass, but you could park and ride a shuttle bus from town. What would you do? (Check one box.)

Go directly to Guanella Pass and look for parking anyway

Park in town and take the shuttle bus to Guanella Pass

Do something else until later in the day when you could find parking at Guanella Pass, then go

Go to a different recreation area instead (Please specify): _____

Other (Please specify): _____

Topic Area 2-Perceptions and Evaluations of Transportation-related Conditions

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

18. How much parking congestion do you think there is at Guanella Pass today? (Circle one number.)

No Parking Congestion at all	Slight Parking Congestion	Moderate Parking Congestion	Extreme Parking Congestion					
1	2	3	4	5	6	7	8	9

Topic Area 4-Attitudes and Opinions about Services, Facilities, and Management

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

19. Do you agree or disagree with each of the following statements about potential actions when parking lots are full at Guanella Pass? (Check one box for each item.)

When parking lots at Guanella Pass are full people should be...	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
...allowed to drive here and park wherever they can, including on the roadside.					

...allowed to drive here to look for parking anyway, but not allowed to

park on the roadside.

...directed to park in town and ride a shuttle bus here.

...directed to other recreation areas instead of visiting Guanella Pass that day.

D. Planning Your Trip to Guanella Pass

The next set of questions asks about planning you may have done to prepare for this trip to Guanella Pass.

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0145)

20. How long ago did you decide to take this trip to Guanella Pass? (Check one box.)

Sometime today

Yesterday

In the last week

More than a week ago, but less than a month ago

A month or more before today

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

21. Which of the following sources of information did you use to plan this trip to Guanella Pass? (Check all that apply.)

Knowledge from previous visit (# of previous visits in last 3 years): _____

Family/friends/word of mouth

Website (Please specify): _____

Smartphone app

Social media (e.g., Facebook, Twitter)

Outdoor sports shop (Please specify): _____

Traveler information radio station

Travel guide/Tour book

Convention/Visitor Bureau

Television

Newspaper/Magazine article

Hotel/Motel/Campground staff

Other (please specify): _____

Topic Area 3-Crowding and Visitor Experience Quality

Pre-tested and administered in previous study (OMB Control Number 1024-0145)

22. When you planned this trip to Guanella Pass, did you think about the possibility that it might be crowded here? (Check one box.)

- Yes
- No (SKIP TO QUESTION 24)

Topic Area 3-Crowding and Visitor Experience Quality

Pre-tested and administered in previous study (OMB Control Number 1024-0145)

23. If you thought about the possibility of crowding when you planned this trip to Guanella Pass, how did it affect your trip plans? (Check all that apply.)

- It did not affect my plans
- I visited at a time of day I thought would be less crowded
- I visited on a day of the week I thought would be less crowded
- I avoided places here I thought would be crowded today
- Other (Please specify): _____

Topic Area 5-Transportation-related Preferences

Pre-tested and administered in previous OMB-approved study (OMB Control Number 1024-0224)

24. How likely would you have been to use each of the following sources of information to plan your trip to Guanella Pass, if you could have gotten information about parking and crowding conditions? (Check one box for each item.)

	Likely	Not Likely	Don't Know/Not Sure
Website			
Smartphone app			
Social media (e.g., Facebook, Twitter)			
Text updates on cellular phone/smartphone			
AM radio station			
Telephone information line (message updated daily)			
Telephone information line (live person)			
Tourist information center			
Other (Please specify): _____			

E. Background Information

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

25. What is your gender? (Check one box.)

- Male
- Female

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

26. In what year were you born?

Year born: _____

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

27. Do you live in the United States? (Check one box.)

Yes (What is your zip code? _____)

No (What country do you live in? _____)

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

28. What is the highest level of formal education you have completed? (Check one box.)

Some high school

High school graduate or GED

Some college, business or trade school

College, business or trade school graduate

Some graduate school

Master's, doctoral or professional degree

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

29. Are you Hispanic or Latino? (Check one box.)

Yes

No

Topic Area 1-Visitor and Trip Characteristics

Pre-tested and administered in previous study (OMB Control Number 1024-0224)

30. What is your race? (Check all that apply.)

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian

Pacific Islander other than Native Hawaiian

White

Thank you for your help with this survey!
Please return it to the surveyor.

Route Map



Georgetown

1

Guanella Pass Road

Arapaho National Forest

Guanella Pass

Mt. Bierstadt
14,060

Mount Evans
Wilderness

Pike National Forest

Guanella Pass Road

2

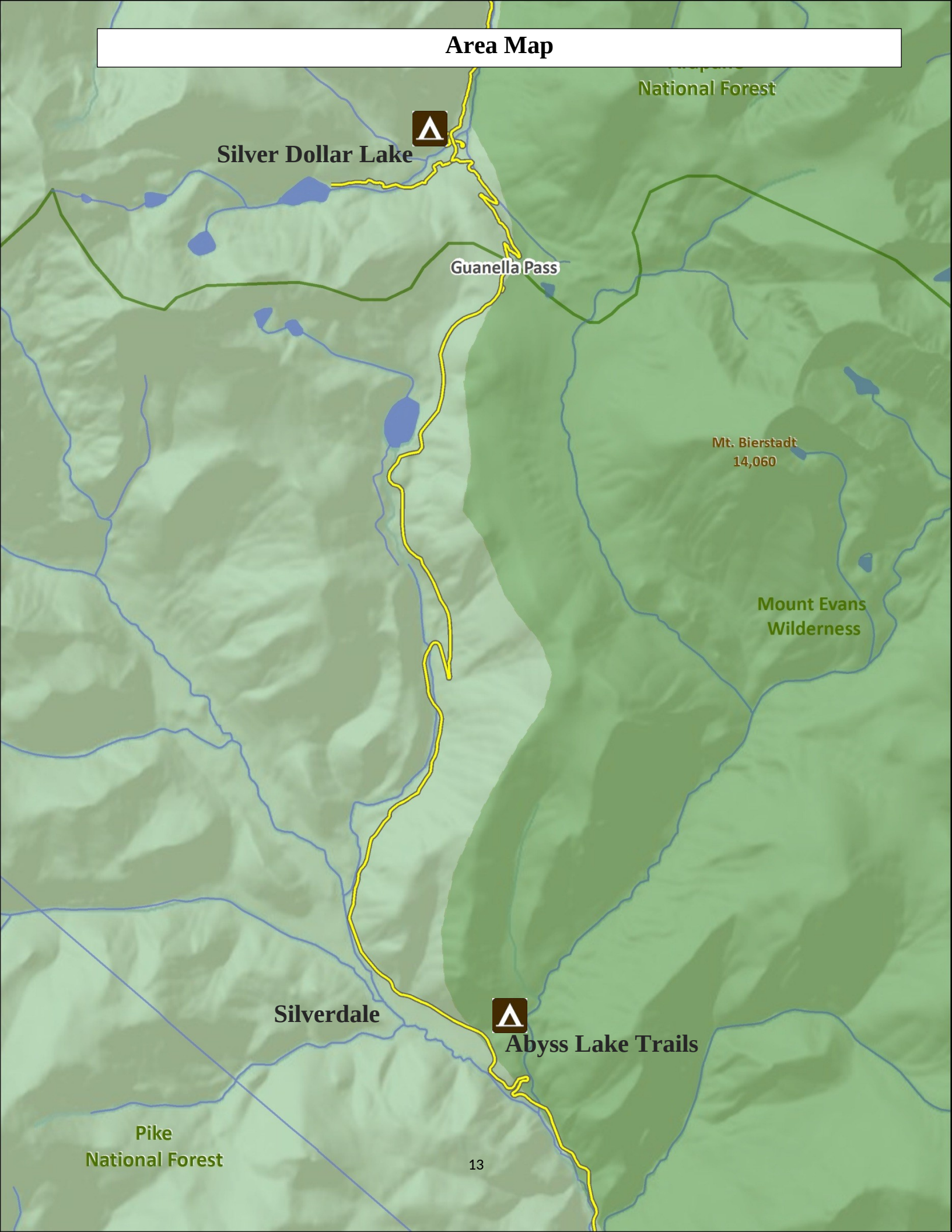
12

Grant

285

285

Area Map



Silver Dollar Lake



Guanella Pass

Mt. Bierstadt
14,060

Mount Evans
Wilderness

Silverdale



Abyss Lake Trails

Pike
National Forest

Parking Map

To Georgetown & 



Square Top Lakes Trail

Upper Parking Lot
(Square Top Lakes Trailhead)

Along the Roadside on Guanella Pass Road

Lower Parking Lot
(Mt. Bierstadt Trailhead)

Bierstadt Trail

Rosalie Trail

To Grant & 

