OMB Control No. <u>1006-0028</u> Expiration Date: <u>XX/XX/2017</u>

## **River Instream Flow Survey**

## **Paperwork Reduction Act**

The purpose of this survey is to provide information to the Bureau of Reclamation for evaluating and improving the recreation services and programs that it provides to the public. Response to this survey is voluntary. No action may be taken against you for refusing to supply the information requested. The reporting burden for this form is estimated to average 25 minutes, which includes the time for reviewing instructions and completing and reviewing the form. 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 Office of Management and Budget (OMB) control number. Please direct comments regarding the burden estimate or any other aspect of these forms to the Bureau of Reclamation, Policy and Administration, Asset Management Division, 84-57000, P.O. Box 25007, Denver, CO 80225.

## **Privacy Act Statement**

No Privacy Act Information is being collected; therefore, no direct link to the individual(s) filling out this survey will be available. Information collected will be compiled to produce statistics.



## **RIVER INSTREAM FLOW SURVEY**

er being survey ay's date:		For agency us	•		_
below to help	you answer tor, if you are	the river flow to be to this question. Please familiar with the actu	check [✓] one o	of the flow desc	riptors
Very hi	ighH	igh Medium	Low	Very low(	OR
cfs					
Very high flow:	Very fast-mov exposed large	ving deep water, some ver rocks.	ry big rapids, water l	bank high or over	banks, a fev
High flow:	Fast-moving r of big exposed	moderately deep water, m d rocks.	any big rapids, wate	er close to bank hig	gh, a numbe
Medium flow:		ng moderately deep water, down from high water lir		aller exposed rock	s in rapids,
Low flow:	Water slow m high water sho	noving, many exposed rocoreline.	ks, river bottom exp	osed for a few fee	t out from
Very low flow:	exposed, wate	oving shallow water, export or barely covering bottom ed for several feet out from	in rapids, must choo	ose floatable areas	
How satisfied applies.	l are you with	the river water level	today? Please c	theck ( $\checkmark$ ) the $o$	ne that
Very satisfied	Mostly satisfied	An even mix of satisfied and dissatisfied	Mostly dissatisfied	Very dissatisfied	No opin
		П			

What detracts	s from your riv	er recreatio	n experienc	e'?	

- 4. In Column 1 of the following table, check **all** the recreation activities that you are doing on this trip.
- 5. In Column 2 of the following table, check the **one** activity that is your **primary** (main) activity for your current visit.

Activities	Column 1 (Q. 4) ✓ Activities this trip	Column 2 (Q. 5) ✓ Primary activity this visit
Scenic floating		
Rafting		
Boat fishing (guided)		
Boat fishing (private)		
Trail use		
Bank fishing		
Camping		
Kayaking / canoeing		
Swimming / wading		
Day use /picnicking		
Other		
Other		

- 6. In Column 1 of the following table, check **all** the **primary** activities you have participated in over the past 12 months.
- 7. In Column 2 of the following table, write in the percent of time that you participated in each of the **primary** activities listed in Column 1 by season over the past 12 months.

	Column 1	Column 2 (Q. 7) Percent of time by season for primary activities					
Activities	(Q. 6) ✓ Primary activities past 12 months	Spring March 1 to May 31	Summer June 1 to August 31	Fall September 1 to November 30	Winter December 1 to February 28		
Scenic floating		%	%	%	%		
Rafting		%	%	%	%		
Boat fishing (guided)		%	%	%	%		
Boat fishing (private)		%	%	%	%		
Trail use		%	%	%	%		
Bank fishing		%	%	%	%		
Camping		%	%	%	%		
Kayaking / canoeing		%	%	%	%		
Swimming / wading		%	%	%	%		
Day use /picnicking		%	%	%	%		
Other		%	%	%	%		
Other		%	%	%	%		

- 8. In the table below, record the number of visits that you made to this river for each **primary** activity you participated in over the past 12 months. The number of visits should be for those activities checked in Column 1 in Q. 6.
- 9. In the table below, give the average number of days or hours you spent per visit. The average number of days or hours should only be for the **primary** activities checked in Column 1 in Q. 6.

Primary recreation activities over the past 12 months	(Q. 8) Number of visits for each <b>primary</b> activity over the past 12 months	(Q. 9) Average number of days or hours per visit (Indicate whether it is days or hours)
Scenic floating		
Rafting		
Boat fishing (guided)		
Boat fishing (private)		
Trail use		
Bank fishing		
Camping		
Kayaking / canoeing		
Swimming / wading		
Day use /picnicking		
Other		
Other		

10. What facilities do you use along the river corridor? *Check* (✓) *all that apply*.

	✓ Facility type	Facility name or location
Campsites		
Parking areas		
Boat launches		
Picnic sites		
Sand bars / beaches		
Trails		
Restrooms		
Other		

11. On average, how much money do you spend per visit on the following items? Please enter the average total dollars spent per visit getting to and from the recreation area in **Column 1** and the average dollars spent in the local area once you arrive in **Column 2**.

	Column 1 Enter average total dollars spent per visit traveling to and from the local	Column 2 Enter average dollars spent in the local area per visit
Items	area	
Camping fees		
License fees		
Hotel and motel		
Restaurant		
Groceries and alcohol		
Gas		
Recreation supplies		
Guide services		
Car rentals		
Other rentals (list)		
Public transportation fares (plane, etc.)		
Other (list)		

12. In the table below, how much do you estimate that you spent each day on average for each visit to the river for each of your **primary** activities you listed in Column 1, Q. 6?

Activity	(Q. 12) – Dollars spent per visit
Scenic floating	
Rafting	
Boat fishing (guided)	
Boat fishing (private)	
Trail use	
Bank fishing	
Camping	
Kayaking / canoeing	
Swimming / wading	
Day use /picnicking	
Other (list)	

- 13. Do you have a preferred river flow for all your **primary** activities? In Column 1 of the table below, please give this preferred flow in cubic feet per second, feet, or write in a preferred flow level of **very high**, **high**, **medium**, **low**, **very low** for each **primary** activity you participate in (see Q. 1 for flow descriptions).
- 14. In the appropriate columns in the table below, give the additional number of annual visits (Column 2) and the additional number of days (Column 3) or hours per visit (Column 4) that you would spend for each **primary** activity if your preferred flows were met.

			(Q. 14) umber of visits p per visit if flow	er year and days
Primary recreation activity	Column 1 (Q. 13) Preferred cfs or flow level for each activity	Column 2  Visits per year	Column 3  Days spent per visit	Column 4  Hours spent per visit
Scenic floating				
Boat fishing (guided)				
Boat fishing (private)				
Trail use				
Bank fishing				
Camping				
Kayaking / canoeing				
Swimming / wading				
Day use /picnicking				
Other				
Other				

15. Are there upper and lower flow levels and/or other flow conditions such as fluctuating flows that would stop you from pursuing your **primary** activities on the river? In the appropriate columns in the table below, write **a** check ( ) mark indicating a flow level of **very high**, **high**, **medium**, **low**, **very low**, or **other** for each activity you participated in (refer to Q. 1 for flow descriptions).

	(Q. 15) – Below, write a check (✓) mark indicating the flow level when youwould stop an activity					
<b>Primary</b> recreation activity	Very high	High	Medium	Low	Very low	Other
Scenic floating						
Rafting						
Boat fishing (guided)						
Boat fishing (private)						
Trail use						
Bank fishing						
Camping						
Kayaking / canoeing						
Swimming / wading						
Day use /picnicking						
Other						

	Kayakers / canoers	Parti	ers	Ra:	fters			
	Shoreline anglers	Picn	ickers	Bo	at ang	lers		
	Wildlife viewers	Cam	pers _	Oth	ners (s	pecify)	):	
Wha	t types of conflicts have	ve you expe	rienced on	the rive	r? <i>Cl</i>	heck (	✓) al	l that apply.
	Noise							
	Crowding							
	Inconsiderate group	s or individu	ıals					
	Too many boats on	the river at a	ny one tin	ne				
	Other (list)							
	Went to another area	Cor	nplained to	a manag	er			nothing er ( <i>specify belo</i>
	Went to another area Went home		t the area	a manag	ger			
		Lef ne number o	t the area  f people at se.		the f	ollowi Ioderat	Other	er (specify belocations? Circ
umbe	Went home  you feel crowded by the represents general control of the represents general control of the representation of the represe	Lef ne number o your respon. Not at all	f people at se.	each of	the f	Ioderat	Other	er (specify belocations? Circ
Whe	Went home  you feel crowded by the strate dest represents from the street represents from your started your vity  le participating in your	Lef ne number o your respon.  Not at all crowded	t the area  f people at se.  Slig	each of ghtly wded	the f	loderat crowde	Other	cations? Circ
Whe activ	Went home  you feel crowded by the strate dest represents from the street represents from your started your vity  le participating in your	Lef ne number o your respon.  Not at all crowded	f people at se.	each of ghtly wded	the f	Ioderat crowde	Other	er (specify belocations? Circ  Extremely crowded

21. What is an acceptable number of other people to see in the following places?

At the access point where you first start your activity	It is OK to see as many as people
While participating in your activity	It is OK to see as many as people
At the end of your activity	It is OK to see as many as people

**Note**: The background information being collected below is needed to provide a profile of our study population to make sure it is representative of all the visitors to our recreation area. None of the information in this or other sections will be associated with any names or addresses.

22	Are you from in-state, out-of-state or another country? <i>Please check (✓) only one location</i> .
	In-StateOut-of-StateAnother County
<b>Note</b>	The two questions below are designed to describe your ethnicity and race. Regardless of your answer to Q. 23, go to Q. 24.
23.	Are you Hispanic or Latino (i.e., a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture, regardless of race)?
	Yes No
24.	Please select one or more racial categories with which you most closely identify. <i>Please check</i> ( $\checkmark$ ) <i>all that apply</i> .
	American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White
	— Thank you for your cooperation —