	Please provide any additional comments about MTA'S services.	LOGO Transit Ri	ider Survey	Barcode on piggy back label				
		Please take a minute to help us plan for your transit needs by filling out this survey. Return the completed survey to the surveyor OR drop it in any mailbox <i>(no postage required)</i> .						
		Please fill out this form even if you completed one on	Please fill out this form even if you completed one on another one-way trip.					
	All personal information is confidential and WILL NOT be shared or sold.							
		Print letters/numbers clearly in upper case: A B C 1 2 3 Fill bubble with:						
1. REGISTER TO WIN \$XXX WHEN YOU ANSWER ALL QUESTIONS ! Please provide your name, telephone number, and home address or if you are just visiting, where you are staying in the								
		Name	Name					
		Street Number Street Address (NO P.O. BOXES PLEASE) Apt. #						
Thank you!	Return the completed survey to the surveyor, OR drop it in any mailbox (no postage required).	City	State Zip					
		The following questions are about this ONE-WAY trip you are making NOW!	OME BUS RAIL WORK					
		2. What type of place are you COMING FROM NOW? (starting place of this one-way trip) (mark one only)						
իկորորո	իկարարակարությունությունություն		reation/Sightseeing/Restaurant OShop	pping				
				al visit/Church/Personal rting event				
		 → Home → If you gave your Home address in Question 1 		er (specify):				
		a. What is the name of the PLACE, BUSINESS OR BUILDING you are COMING FROM NOW?	R Example: BALTIMORE CIIT	Y HALL				
	81 MOSHER ST BALTIMORE MD 21217-4250	Place Name						
MTA Transit Rider Survey		b. What is the ADDRESS or CROSS STREETS? Example: 100 HOLLIDAY ST						
	332239900A Y8 01A9 38 WILL BE WILL BE ADDRESSER							
	IAM Y 1975 REPLY MAIL PERMIT NO. 5478 AUSTIN XT NITEULA 8745 AUSTIN TA PERMIT NO. 5478	Address						
		Cross Street	State Zip	For office use only:				
		3. How did you get to the FIRST BUS/TRAIN on THIS	SONE-WAY trip? (mark one only)					
		○ Walked/Wheelchair: ➔ # blocks?	rcled Orov	<i>v</i> e by myself				
NECESSARY NECESSARY IF MAILED IN THE UNITED STATES		 Dropped off Carp 	pool (ride with someone else) \bigcirc Othe	er (specify):				
NO POSTAGE NO POSTAGE NARLED IF MAILED	lf returning by mail, please close with tape.			Continue inside →				

4.	If you TRANSFERRED to get to THIS BUS/TRAIN, which ROUTE did you use? (mark one only)			9. LIST ALL of the BUS ROUTES AND RAIL LINES in the EXACT ORDER you will use to make THIS ONE-WAY TRIP:							
	○ I did not transfer					FIRST Bus Route or Rail Lin	ne: -> SECOND Bus	s Route or Rail Line:	THIRD Bus Route or Rail Lin	e: →	FOURTH Bus Route or Rail Line:
	O MTA Bus Route Number/Name:										
			MARC - Penn Line Baltimore Metro Subway	○ Baltimore Light Rail	10.	How did you PAY for TH	IIS ONE-WAY TRIP? (m	ark one only)			
5.	If you will TRANSFER FROM THIS BUS	II TRANSFER FROM THIS BUS/TRAIN to get to your FINAL DESTINATION which ROUTE will you use? (mark one only) I not transfer				🔿 One-Way Cash Fare	\bigcirc Ten-Trip Ticket	\bigcirc Student Pass	\bigcirc S	enior/Disabi	lity Weekly Pass
	 ○ I will not transfer 					Day PassWeekly Pass	 Monthly Pass Transit Link Card 	 Senior/Disability Senior/Disability 		enior Disabil ther (specify)	ity Monthly Pass):
	MTA Bus Route Number/Name:				11. Does your employer pay for all or part of YOUR fare?						
	WMATA Bus MARC - Brunswick Line MARC - Penn Line Baltimore Light Rail WMATA Rail MARC - Camden Line Baltimore Metro Subway				\bigcirc Not employed	\bigcirc Employer paid nothing	\bigcirc Employer p	aid part \bigcirc E	mployer paid	l all	
				, , , , , , , , , , , , , , , , , , ,	12.	How many registered CA	RS, TRUCKS, or MOTO	RCYCLES are available to y	vour household?		
6.	How will you GET FROM THE LAST BUS	TRAIN to your FINAL DESTINATION	on THIS ONE-WAY trip? (m	ark one only)		○ None	$\bigcirc 1$	⊃ 2 ⊂	3 04	or more	
	○ Walk/Wheelchair: → # blocks? ○ Bicycle ○ Drive by myself			13. Was a personal vehicle available to make THIS ENTIRE ONE-WAY TRIP?							
	○ Get picked up ○ Carpool (ride with someone else) ○ Other (specify):				○ Yes	○ No					
7	What type of place are you GOING TO NO	of place are you GOING TO NOW? (ending place of this one-way trip) (mark one only)									
		 Recreation/Sightseeing/Restaurant 	Shopping			○ Walk/Wheelchair	\bigcirc Drive by myself	C	> Bicycle 🗢 V	lould not ma	ke this trip
	 College/University (student only) 	 Medical appointment/Hospital visit 	 Social visit/Church 	/Personal		\bigcirc Get dropped off	\bigcirc Carpool (ride with	n someone else) C	Taxi O C	ther (specify)):
	○ School (K-12) <i>(student only)</i> ○ Airport <i>(air passenger only)</i> ○ Sporting event			15. How FREQUENTLY do you make THIS ONE-WAY TRIP?							
	○ Home → If you gave your Home address in Question 1 → Go to Question 8a				🔿 1 day a week	\bigcirc 4 to 5 days a week	\sim 1 to 3 days (n month OF	irst time ridir	na	
	a. What is the name of the PLACE, BUSINESS OR BUILDING you are GOING TO NOW?				 2 to 3 days a week 	○ 6 to 7 days a week					
					16.	Including yourself, how m	nany PEOPLE live in your	household?			
	Place Name b. What is the ADDRESS or CROSS ST	REETS?				\bigcirc 1	○ 2	3	○ 4 ○ 5	or more	
					17. Of all the people OVER THE AGE OF 15 who live in your household, HOW MANY are employed either FULL-TIME or PART-TIME?						
	Address					○ None	$\bigcirc 1$	⊃ 2 ⊂	3 04	4	\bigcirc 5 or more
	Cross Street				10	What is your AGE ?					
					10.						
	City	State	Zip			○ 16 - 24	○ 25 - 3 4	○ 35 - 49	○ 50 - 64		\bigcirc 65 + years of age
8a.	If you used/will use RAIL (WMATA, MARC, Balt	,	HIS ONE-WAY trip, what was	s/will be the FIRST station	19.	What was your estimated	TOTAL HOUSEHOLD II	NCOME in 2006 before tax	es?		
	where you boarded? (If you transfer between	1 lines, write where you boarded your first frain.)				○ \$10,000 or less	○ \$20,001 - \$30,000				○\$80,001 - \$100,000
	Did not/will not use rail				○ \$10,001 - \$20,000	○ \$30,001 - \$40,000)	00	,000	○ More than \$100,000	
	Rail Station Name on this one-way trip				20.	Are you					
8b.	If you used/will use RAIL (WMATA, MARC, Balti	, .	• •	/will be the LAST station		○ Female	⊂ Male				
where you will get off? (If you transfer between lines, write where you will get off your last train.)				21.	What is your ETHNICIT	Y ? (mark the bubble that best	t describes you)				
			Did not/will not use rail			⊂ Asian	⊖ Hispanic	\bigcirc White			
	Rail Station Name		on this one-way trip			O Black/African American	○ Native American	○ Other (specify):_			