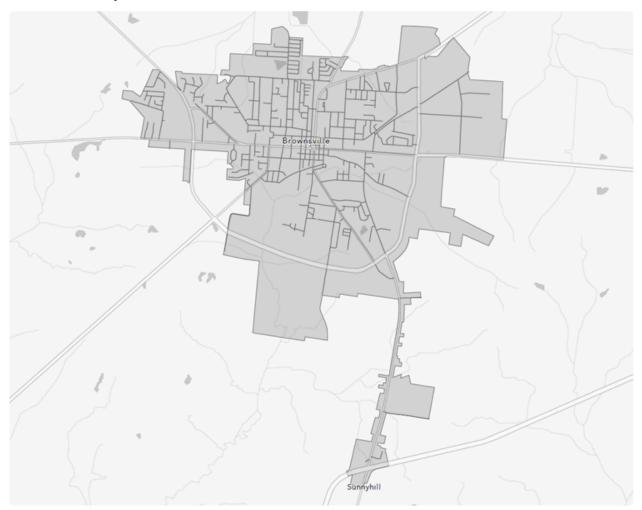
The City of Brownsville: Comprehensive Safety Action Plan Survey

The City of Brownsville is developing a Comprehensive Safety Action Plan to address roadway safety in Brownsville as shown in the map below. This 5-minute survey collects input from residents on the types of projects that should be considered and how proposed recommendations should be prioritized for both State and City roadways in the study area. Thank you for your participation!

* Required

Study Area



Demographics

So that we can better gauge the participation from all residents and geographies, please answer the following ques-tions. The questions help us ensure that this plan reflects the desires of Brownsville's residents.

	1
٧	which of the following best describes your participation in this survey? *
\bigcirc	I live in Brownsville.
\bigcirc	I live outside of Brownsville but frequently travel here for work, school, recreation, etc.
\bigcirc	Other
	2
V	hich category includes your age?
\bigcirc	Under 25
\bigcirc	25 to 35
\bigcirc	36 to 45
\bigcirc	46 to 55
\bigcirc	56 to 65
\bigcirc	Over 65

Prioritizing Safety Improvements

With limited funding available, we need to prioritize projects that are most important to residents. The question below will be used to determine the relative importance of various data-driven criteria in the selection and prioritization of projects.

3

When considering how The City of Brownsville should prioritize safety projects, please indicate how important the following criteria are to you. (Scroll right to view all options) *

	Not Important	Slightly Important	Important	Fairly Important	Very Important
Total Number of Crashes	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Fatal + Serious Injury Crashes	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\circ
Crash Rate	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Existing Roadway Congestion	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Proximity to Vulnerable Populations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Speed of Project Completion	\bigcirc	\bigcirc	\circ	\bigcirc	\bigcirc
Projected Growth Near the Project	\bigcirc	\circ	\bigcirc	\circ	\bigcirc

4

On a scale from 1 to 10, with 1 representing feeling extremely vulnerable to traffic hazards and 10 indicating a strong sense of safety while walking around Brownsville, how secure do you feel as a pedestrian navigating the city streets? *

1	2	2	4	5	6	7	0	0	10
		3	4))	О	/	0	9	10

How many children do you currently have enrolled in Brownsville's school system? *
1 child
2 children
3 children
4 children
5 or more children
6
What is the age range of your child/children who are currently attending school in Brownsville? *
3-5 years old
6-10 years old
11-14 years old
15-18 years old
19 years old and above
Not Applicable
7
What mode of transportation do you primarily use to transport your child/children to school? *
Walking/ Bicycling
Public Transportation
○ School Bus
Personal Vehicle
Other

Types of Safety Improvements

This plan will identify a set of recommended safety projects in the City of Brownsville. The projects will be focused on roadways that have an increased likelihood of fatalities and serious injuries based on observed crash patterns and engi-neering judgment. The following question provides a baseline for desired project types in Brownsville, TN.

8

Please select up to 4 types of safety projects that you think are most needed on Brownsville's Roads.

Please select at most 4 options.



Improve and upgrade Intersections



Reduce Speed Limits



Install Turn Lanes at Intersections



Roadway improvements for Pedestrians



Roadway improvements for cyclists



Install traffic calming measures



Implement truck restriction zones