

Consultation response form

Please post completed surveys to: Engagement Team (Fairglen Interchange), Jacobs, 224-226 Tower Bridge Road, London, SE1 2UP. You may also fill in this response form online at www.essex.gov.uk/fairglen

Q1) Title: First Name: Last Name:

Q2) Please tell us your postcode:

Q3) Please provide an email address:

Q4) Do you think improvements are needed at the Fairglen Interchange? Yes No

Q5) Do you support the proposed short term scheme presented in this document?

Strongly support Support Neither support nor oppose Oppose Strongly oppose

Please explain the reasons for your answer (if you would like to provide additional comments please write them on the continuation sheet at the back of this response form and send it to the address stated at the start of this form):

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Q6) What mode of transport do you use most regularly when travelling through the A127 / A130 Fairglen Interchange?

- | | |
|---|---|
| <input type="checkbox"/> Car (or similar private vehicle) – driver | <input type="checkbox"/> Bus |
| <input type="checkbox"/> Car (or similar private vehicle) – passenger | <input type="checkbox"/> Cycle |
| <input type="checkbox"/> Car share scheme | <input type="checkbox"/> Walking |
| <input type="checkbox"/> Taxi | <input type="checkbox"/> LGV / HGV / Lorry |
| <input type="checkbox"/> Powered two-wheeler (eg. motorbike or scooter) | <input type="checkbox"/> Other, please state: |

Q7) Are you completing this questionnaire on behalf of:

Select one box

- | | |
|---|---|
| <input type="checkbox"/> Yourself (as an individual) | <input type="checkbox"/> A Voluntary or Community Sector Organisation (VCS) |
| <input type="checkbox"/> A friend or relative (Please answer using their details) | <input type="checkbox"/> A Business |
| <input type="checkbox"/> A District / Local authority | |

If you are responding on behalf of an organisation, please tell us:

The name of the organisation:

Who the organisation represents:

Where applicable, how the views of members were assembled:

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Q8) Demographic information

In order to ensure the continued development of our Diversity and Equality practices, everyone that we work with is asked to complete the information below. You are not obliged to answer any of the questions, but the more information you supply, the more effective our monitoring will be. If you choose not to answer questions, it will not affect your participation. The information you supply below is confidential and will be used solely for monitoring purposes

a) Age:

- 16-20
- 21-30
- 31-40
- 41-50
- 51-60
- 61-70
- 71-80
- 81-90
- 91 or over
- Prefer not to say

b) Gender:

- Male
- Female
- Prefer not to say

c) Ethnicity:

- White British
- White Irish
- White Other
- Gypsy / Roma
- Traveller of Irish Heritage
- Black or Black British African
- Black or Black British Caribbean
- Mixed White/Black African
- Mixed White/Black Caribbean
- Black Other
- Asian or Asian British Pakistani
- Asian or Asian British Indian
- Asian or Asian British Other
- Mixed White/Asian
- Asian Other
- Chinese
- Mixed Other

- Not Known
- Prefer not to say
- Other, please specify:

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d) Do you consider yourself to have a physical impairment?

- Yes No

e) Do you consider yourself to have a sensory impairment?

- Yes No

f) Do you consider yourself to have a learning difficulty or disability?

- Yes No

g) Are you currently caring for someone?

- Yes No
- Prefer not to say

h) Locality:

- Basildon
- Braintree
- Brentwood
- Castle Point
- Chelmsford
- Colchester
- Epping Forest
- Harlow
- Maldon
- Rochford
- Southend
- Tendring
- Thurrock
- Uttlesford
- London borough
- Other, please state:

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