Irving Streetscape Questionnaire

1. What do you like about Irving Street?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. What do you dislike about Irving Street?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. How do you get to Irving Street (walk, bike, drive, public transportation)?
________________________________________________________________________

4. How often do you visit Irving Street?
________________________________________________________________________

5. What days of the week or time of day do you usually visit Irving Street?
________________________________________________________________________

6. What do you do when you visit Irving Street (shop, eat, etc.)?
________________________________________________________________________
________________________________________________________________________

7. What are your favorite businesses or destinations on Irving Street?
________________________________________________________________________
________________________________________________________________________

8. What places along Irving Street are visually memorable to you?
________________________________________________________________________
________________________________________________________________________

9. What is your overall impression of Irving Street?
________________________________________________________________________
________________________________________________________________________

10. What improvements along Irving Street would you most like to see?
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________________________________________________________________________
________________________________________________________________________