



Island Bay cycleway submissions

Paper Based Submissions

Volume 1

Love the Bay - Delivering on the Cycleway

Submission Form

After the Love the Bay community-based design project, four design options for the Island Bay Parade and cycleway are open for public consultation from 31 July 2017 to 13 August 2017. Tell us what you think by 9pm, Sunday 13 August 2017. You can give feedback online at wellington.govt.nz/theparade, email your thoughts to theparade@wcc.govt.nz or post this form to us (no stamp needed).

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Section 1 - Submitter details (fields marked * are mandatory)

First Name*

Organisator

Island Bay

Residential /

Phone

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

Section 2

1. Please select your preferred option, or alternatively rank up to four options according to your preference. You can rank as many or as few of the options as you want. If you want to rank the options, please ensure you rank each one using the numbers 1, 2, 3, and 4, (where 1 is your most preferred option and 4 your least preferred).

Refer to the accompanying document or wcc.govt.nz/theparade for images and further details about each option.

Option A - roadside cycle lane - original layout with enhancements

4

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Continued over page

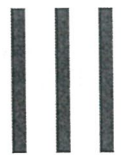
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Option E preferred safer for
all users. "Paint it Back"
Also cheaper to change back
than other options
less carparks lost

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**Absolutely Positively
Wellington City Council**

Me Heke Ki Pōneke



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Island Bay Cycleway (114)
PO Box 2199
Wellington 6140

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Organisation

Island Bay

Residential

Phone

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

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Option A - roadside cycle lane - original layout with enhancements

4

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

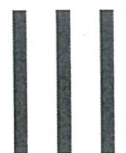
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option E, safer option for all
road users - "Paint it Back"
Cheaper to change back
than other options
less carparks lost

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Organisation _____

Residential _____

Phone _____

Island Bay

Preferred method of contact* Email Post

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Option A - roadside cycle lane - original layout with enhancements

4

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

No

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Continued over page

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Option E, safer option for all road users, more practical. "Paint it Beech"

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First N	
Organi	<i>Island Bay</i>
Reside	
Phone	
Preferred method of contact*	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input checked="" type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60 years or older
Please tick your connection(s) to Island Bay	
<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input type="checkbox"/> Other _____	

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Option A - roadside cycle lane - original layout with enhancements

4 Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

No Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

No Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

No Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

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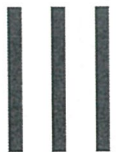
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Option E: Paint it back the way it was!
Safest and cheapest option, and less
carparks lost.

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Wellington 6140

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Section 1 - Submitter details (fields marked * are mandatory)	
First Name	
Organisat	
Residentia	<i>Carterton</i>
Phone	<i>0</i>
Preferred method of contact*	<input type="checkbox"/> Email <input checked="" type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input checked="" type="checkbox"/> 60 years or older
Please tick your connection(s) to Island Bay	
<input type="checkbox"/> Resident <input checked="" type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input type="checkbox"/> Other _____	
Section 2	
<p>1. Please select your preferred option, or alternatively rank up to four options according to your preference. You can rank as many or as few of the options as you want. If you want to rank the options, please ensure you rank each one using the numbers 1, 2, 3, and 4, (where 1 is your most preferred option and 4 your least preferred).</p> <p>Refer to the accompanying document or wcc.govt.nz/theparade for images and further details about each option.</p>	
Option A - roadside cycle lane - original layout with enhancements	
<input type="radio"/>	Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.
Option B - one-way separated kerbside cycleway - road level - current layout with enhancements	
<input type="radio"/>	Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.
Option C - one-way separated kerbside cycleway - above road level	
<input type="radio"/>	Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.
Option D - one-way separated kerbside cycleway - above road level, with angle parking	
<input checked="" type="radio"/>	Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

OPTION E IBRA

Continued over page

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

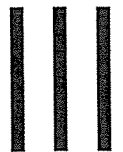
1004025

[Empty response box]

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Section 1 - Submitter details (fields marked * are mandatory)

First Name:

Organisatic

Residential

Phone (

Island Bay

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

Section 2

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Option A - roadside cycle lane - original layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Continued over page

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

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First Name* _____

Organisatio *Be rampore*

Residential _____

Phone _____

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

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Option A - roadside cycle lane - original layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

OPTION E: RET

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION E: RETURN TO ORIGINAL
LAYOUT.

IBRA

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First Name _____

Organisation _____

Residential _____

Phone _____

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

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Option A - roadside cycle lane - original layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

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Option D - one-way separated kerbside cycleway - above road level, with angle parking

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option E IBRA

Continued over page

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION 5'

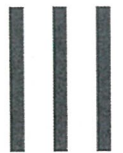
Return to the way it
was

J004025

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First Name	
Organisation	
Residential	Wilton
Phone	
Preferred method of contact*	<input type="checkbox"/> Email <input type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input type="checkbox"/> 18-29 <input checked="" type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60 years or older
Please tick your connection(s) to Island Bay	<input type="checkbox"/> Resident <input checked="" type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input type="checkbox"/> Other _____

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Option A - roadside cycle lane - original layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

OPTION E IBRA

Continued over page

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

✓ OPTION E

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Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

OPTION E IBRA

Continued over page

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

✓ OPTION E

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Absolutely Positively
Wellington City Council

Me Heke Ki Pōneke



FREEPOST WCC
Island Bay Cycleway (114)
PO Box 2199
Wellington 6140

Love the Bay - Delivering on the Cycleway

Submission Form

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Section 1 - Submitter details (fields marked * are mandatory)

First Name	
Organisation	Island Bay
Residential	
Phone	
Preferred method of contact*	<input type="checkbox"/> Email <input checked="" type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input checked="" type="checkbox"/> 60 years or older
Please tick your connection(s) to Island Bay	
<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input type="checkbox"/> Other _____	

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First Name	
Organisat	Stokes Valley
Residence	
Phone	
Preferred method of contact*	<input type="checkbox"/> Email <input checked="" type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input checked="" type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60 years or older
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OPTION E IBRA

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✓ OPTIONE
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Organisati	Stokes Valley
Residentia	
Phone	C
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First Name*

Organisation

Conterton

Residential /

Phone ()

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

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OPTION D

Continued over page

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OPTION E IBRA

J004025

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First Name*

Organisation

Island Bay

Residential

Phone

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

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PT O

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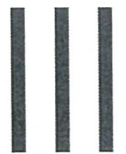
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Option E.
As ~~recom~~ by I.B.R.A.
Back to how it was
with car parks back,
and bus-stops where
they were before.

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Wellington 6140

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Residential	
Phone	
Preferred method of contact*	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input checked="" type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60 years or older
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Option A - roadside cycle lane - original layout with enhancements

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Option C - one-way separated kerbside cycleway - above road level

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Option D - one-way separated kerbside cycleway - above road level, with angle parking

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Continued over page

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option E. - Reason being is that it worked.

- The new system cuts down the field of view for crossing, and cars pulling out from intersections.

- Crossing requires a double action for children when not at zebra crossings.

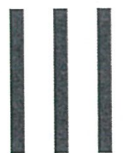
- vehicles in Buses are unable to pass down center, emergency vehicles often go down Derwent St to avoid The Parade,

- its harder to see cycles behind cars...

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First Name*	
Organisation	Island Bay
Residential Address	
Phone	
Preferred method of contact*	<input type="checkbox"/> Email <input type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input checked="" type="checkbox"/> 50-59 <input type="checkbox"/> 60 years or older
Please tick your connection(s) to Island Bay	
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The current design is dangerous,
and it was unnecessary and
ill conceived.

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Because I have been almost hit several times by really fast cyclists when getting off the bus.

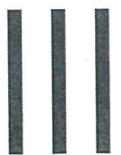
It doesn't teach kids road sense as they feel 'protected' when yet when they get to an intersection they have to enter the mainstream traffic.

As a passenger in a car with temporary mobility issues I need to open the door wide thereby impeding cyclists. As a temporarily disabled driver I am right in the traffic. I can only imagine how difficult it is with young children in car seats getting them out.

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Organisation

Island Bay

Residence

Phone

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

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Option A: without the enhancements.

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Love the Bay - Delivering on the Cycleway

Submission Form

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Privacy Statement - what we do with your personal information

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Section 1 - Submitter details (fields marked * are mandatory)

First Name	
Organisation	Island Bay
Residential	
Phone	
Preferred method of contact*	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input checked="" type="checkbox"/> 50-59 <input type="checkbox"/> 60 years or older
Please tick your connection(s) to Island Bay	
<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input type="checkbox"/> Other _____	

Section 2

1. Please select your preferred option, or alternatively rank up to four options according to your preference. You can rank as many or as few of the options as you want. If you want to rank the options, please ensure you rank each one using the numbers 1, 2, 3, and 4, (where 1 is your most preferred option and 4 your least preferred).
Refer to the accompanying document or wcc.govt.nz/theparade for images and further details about each option.

Option A - roadside cycle lane - original layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

C - safe + less merry looking than what
is here now.

If not C, then D.

410-07 01 AUG 17 CARRIED BY NEW ZEALAND POST <<<

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>>> GOT A QUESTION? VISIT WWW.NZPOST.CO.NZ FOR HELP <<<

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PO Box 2199
Wellington 6140

Level 2

Library Building

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First Name*

Organisation

Island Bay

Residential Address

Phone

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

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Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Continued over page

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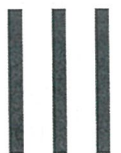
I want a cycleway safe
so evrey on can ride
on it and be safe

1004025

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Age	<input type="checkbox"/> Under 18 <input checked="" type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60 years or older
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Section 1 - Submitter details (fields marked * are mandatory)

First Name

Organisation

Resident

Phone

Island Bay

REMOVED
(DUPLICATE)

Preferred method of contact* Email Post

Age Under 18 18-29 30-39 40-49 50-59 60 years or older

Please tick your connection(s) to Island Bay

Resident Regular visitor Occasional visitor Local business owner Other _____

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Option A - roadside cycle lane - original layout with enhancements

4

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option B - one-way separated kerbside cycleway - road level - current layout with enhancements

3

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option C - one-way separated kerbside cycleway - above road level

2

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Option D - one-way separated kerbside cycleway - above road level, with angle parking

1

Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

Continued over page

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION D is the best, but why a cycle lane on both sides of the road.

The number of cyclists that use the cycleway only justifies a single dedicated cycle way

The west side has ample room for a cycleway and a footpath. Use the current arrangement in the business area to prevent loss of existing car parking. It is my view that cyclists are not safe if on any part of THE PARADE current road surface.

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Please tick your connection(s) to Island Bay	_____
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Island Bay

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OPTION 5 K ONLY

2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

[Empty response box]

J004025

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First Name*	_____
Organisation	Island Bay Island Bay
Residential	_____
Phone	_____
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OPTION E

ISLAND BAY RESIDENTS ASSOCIATION

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Wellington 6140