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# Island Bay cycleway submissions

Paper Based Submissions

Volume 9

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# 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](http://wellington.govt.nz/theparade), email your thoughts to [theparade@wcc.govt.nz](mailto: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

Organisati

Island Bay

Residentia

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](http://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.

Option E - Island Bay Residents Association/  
Business representatives

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.

10041025

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**Absolutely Positively  
Wellington City Council**

Me Heke Ki Pōneke



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

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First Name*	
Organisation	Island Bay
Residential A	
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 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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#### Option D - one-way separated kerbside cycleway - above road level, with angle parking

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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.

E is my preferred option  
TO REVERT BACK TO ORIGINAL STATE  
NONE OF THE ABOVE ie A,B,C, and  
ARE FEASIBLE.  
WE HAVE A CYCLE WAY BEING  
THIS PRESENT SET UP, WHICH  
I DID USE, BUT ON PRINCIPLE  
AND IN MY OTHER CAPACITY AS  
A VEHICLE USER, I DO NOT  
USE THIS SHAMBLES OF A CYCLE  
WAY, DESTROYED, RETAIL, AND  
RESIDENTS ~~BE~~ WELL BEING

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Wellington City Council

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Island Bay Cycleway (114)

PO Box 2199

Wellington 6140

# Love the Bay - Delivering on the Cycleway

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Organisation	Island Bay
Residential A	
Phone	
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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
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<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 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.

410-19

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

IBRA / BUSINESS

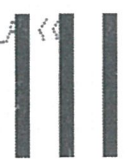
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**Absolutely Positively  
Wellington City Council**

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

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First Name	
Organisation	Island Bay
Resident	
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 _____

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#### Option A - roadside cycle lane - original layout with enhancements

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.

#### Option B - one-way separated kerbside cycleway - road level - current 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 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

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.



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.

I am a regular cyclist + find the current layout unsatisfactory. Cars don't see cyclists + it feels dangerous.

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**Absolutely Positively**  
**Wellington City Council**

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Island Bay Cycleway (114)  
PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

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First Name	
Organisation	Houghton Bay
Residential	
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
Please tick your connection(s) to Island Bay	
<input type="checkbox"/> Resident <input type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input checked="" type="checkbox"/> Other <u>worker</u>	

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Option E  
IBRA Business Rep Recommendations

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**Absolutely Positively**  
**Wellington City Council**  
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PO Box 2199  
Wellington 6140

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First Name	
Organis	Island Bay
Residen	
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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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

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.

[Empty response box]

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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

P198

# Love the Bay - Delivering on the Cycleway

Absolutely Positively  
Wellington City Council  
Me Heke Ki Pōneke

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First Name	
Organisation	Lyall Bay
Residential	
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 type="checkbox"/> Resident <input type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input checked="" type="checkbox"/> Other <u>Work in I. Bay.</u>	

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Continued over page

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OPTION E.

IBRA Business Reps Recommendations.

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Wellington City Council**

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Organi	Island Bay
Resid	
Phon	
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Option E - Residents & Business Associations option

Continued over page



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[Empty response box]

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J004025

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Organisation \_\_\_\_\_

Residential Ad \_\_\_\_\_

Phone \_\_\_\_\_

Preferred method of contact\*  Email  Post

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Resident  Regular visitor  Occasional visitor  Local business owner  Other TP

### 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](http://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.

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" -  
Island Bay Residents Association/  
Business Association

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**Absolutely Positively  
Wellington City Council**

Me Heke Ki Pōneke

410-19 08 AUG 17 CARRIED BY NEW ZEALAND POST <<

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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	
Organis	Island Bay
Resider	
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

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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.

Option E Island Bay Residents Association  
 preferred option  
10

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**Absolutely Positively**  
**Wellington City Council**

Me Heke Ki Pōneke

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

# Love the Bay - Delivering on the Cycleway

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

First N.	
Organi	Island Bay
Residei	
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**

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**Option A - roadside cycle lane - original layout with enhancements**

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**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

PTO

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)  
Island Bay Residents association  
is preferred option

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**Wellington City Council**  
Me Heke Ki Pōneke

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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	
Organisati	Karori
Residentia	
Phone	
Preferred method of contact*	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Post    U    U    U
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 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**

**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).  
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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**

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.

**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**

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.

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.

I like the separation of option B -  
each group has a clear area,  
otherwise walkers may walk on  
cycleway & bikers on the footpath, etc  
I like the safety strip.  
Thanks.

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**Absolutely Positively**  
**Wellington City Council**  
Me Heke Ki Pōneke

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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
Resident	
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 checked="" 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 checked="" type="checkbox"/> Local business owner <input type="checkbox"/> 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.

Option E - Residents & Business Associations 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.

[Empty response box with faint handwriting visible at the bottom edge]

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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

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

First N	
Organi	Island Bay
Reside	
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	Being here for 47 years
	<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).  
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**Option A - roadside cycle lane - original layout with enhancements**

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**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.

I think it is a mess, some cyclist dont use it or only part of it. Large vehicles cannot pass each other eg buses or large trucks. Bus stops were taken out. Shops closed. less parks for cars. Visible not good.

The money already spend on it.

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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	
Organis	Island Bay
Residen	
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 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 _____	

### 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. P.X.O

#### 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.

Selected (a) and enhancements  
to be taken out, as it was  
before this change.

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Wellington City Council**

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

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

First Name*	
Organisation	Island Bay
Residential Add	
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 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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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



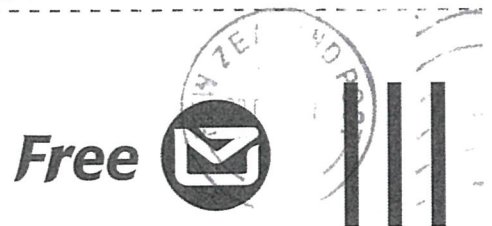
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Original layout was never a problem to all the cyclist, I always  
carefull with any cyclist on the road when bin drinking  
and now its a big, big problem. Enhancements with  
cost more money.

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**Absolutely Positively**  
**Wellington City Council**

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

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Organisation	Lyall Bay
Resident	
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 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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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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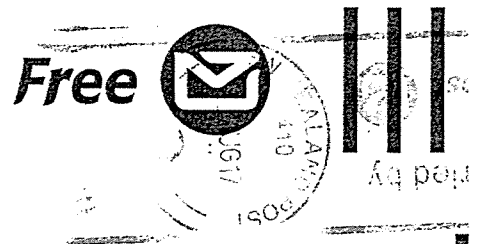
OPTION E -

IBRA and Business Reqs Recommendations

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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

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](http://wellington.govt.nz/theparade), email your thoughts to [theparade@wcc.govt.nz](mailto: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	
Organisation	Island Bay
Residential	
Phone	
Preferred method of contact* <input type="checkbox"/> Email <input checked="" type="checkbox"/> Post	
Age <input checked="" 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 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](http://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

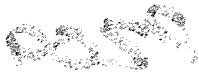
Tick if this is your preferred option OR indicate your rank from 1 to 4 if you want to show your preference for more than one option.

#### 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.

Option E - Residents & Business Associations Option

Continued over page

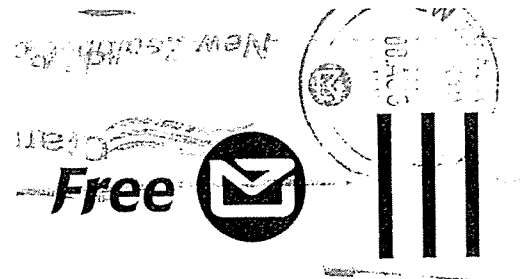


2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

[Empty rectangular box for providing information]

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

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Continued over page



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Option E

IBRA / Business

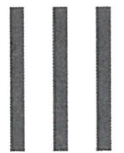
410-19 08 AUG 1

>>> GOT A QUESTION

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Organisation

Island Bay

Residential

Phone

Preferred method of contact\*  Email  Post

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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.

NONE OF THESE

OPTION E - Return Parade to original state 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.

I DO NOT THINK A CYCLEWAY IS NECESSARY IN ISLAND BAY AND, OVERALL, THE STREETS IN WELLINGTON CITY ARE TOO NARROW.

OPTION E - RETURN TO ORIGINAL STATE

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Organisat

Island Bay

Residenti

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1

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

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 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

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.

- As a 5 day a week, commuter cyclist, who has been cycling this route for 10+ years, I would be happy with either Option A or B.
- As Option A is the cheapest, removes carparks at intersections and slows traffic on roads intersecting with The Parade, this is my first choice.
- I also strongly support Plan B, as this will encourage children and unconfident cyclists to use the cycleway.
- I am concerned that a safe exit from the cycleway at The Parade/Reef St intersection is not yet included in the plans. I hope this will be resolved before any work begins.
- I assume that the chosen cycleway option will include painting out the old road markings and replacing them with very clear new ones. The Parade is currently a dangerous place to drive in dark and rainy weather. I find it safer to cycle, rather than drive, along The Parade in these conditions.
- I am not in favour of Options 3 & 4, as I think they are unnecessarily expensive. Too much money has already been spent on this project.

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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
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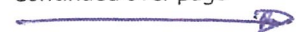
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Continued over page





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OPTION E as submitted by Island Bay Residents Association and Business Reps proposal.

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Wellington City Council**  
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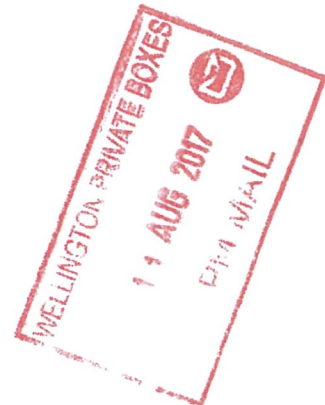
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>>> GOT A QUESTION? VISIT [www.nzps.govt.nz/help](http://www.nzps.govt.nz/help)

Free



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

First Name*	
Organisation	Porirua
Residential Address	
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 checked="" 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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Continued over page

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Option - E  
Resident Association

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Wellington City Council**

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Continued over page



2199

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Option E as per the RESIDENTS ASSOCIATION  
and BUSINESS REPS PROPOSAL.

The kerbside options have been tried and  
have been a waste of road space for the  
major part of the time.

The kerbside option also fails the safety aspect  
because <sup>some</sup> cyclists use the cycle lane like a  
race track!

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Residential A	
Phone	
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PTO - Option E

Continued over page

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I vote for OPTION E below

Below is the : Island Bay Residents' Association and Business Representative's proposal for a fifth option - Option E.

1. Reseal The Parade. Approx cost \$280,000 based on council figures for 2016 where it spent \$9.5 million resealing 68km of road.
2. Move the bus stops back to where they were, this involves breaking up the kerb extensions the council put on and re-kerbing approx half a kilometre of The Parade.
3. Put unmarked car parking back against the kerb, no markings equate to more car parks.
4. Clearly paint using green or another colour a cycleway on the roadside of parked cars, increasing the width by 0.5 of a metre from the original cycleway design.
5. In the shopping centre retain the current shared space and car parks.
6. Look at reducing the speed limit along The Parade.
7. Remove the speed humps around the shopping centre and lower the height of the pedestrian crossings.
8. Retain pedestrian crossings on The Parade.
9. To be confirmed but and indicative costing would be no more than \$750,000.
10. If you want to vote for Option E, write under 2 on both online and paper submission forms, write or print :



Option E – IBRA and Business Reps Recommendations

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**Absolutely Positively**  
**Wellington City Council**  
Me Heke Ki Pōneke



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