



Island Bay cycleway submissions

Paper Based Submissions

Volume 10

P217

Love the Bay - Delivering on the Cycleway

Absolutely Positively
Wellington City Council
Mr Heke Ki Pāneke

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).

Privacy Statement - what we do with your personal information

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Section 1

First Name

Organisation

Residential

Phone

Aro Valley

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

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.

PTO

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.

Return the Parade to how it
was before the cycle lane
was built.

The Parade was wide enough
for Cycles + Cars + Buses
to co exist.

If Cycles + Buses + Cars can
co exist in Paris - Why not
Island Bay.

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

First Name*	
Organisatio	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 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 type="checkbox"/> Local business owner <input type="checkbox"/> Other _____	

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Option A - roadside cycle lane - original layout with enhancements



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



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[Empty response box]

0000025

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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



Love the Bay - Delivering on the Cycleway

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Organisation: Island Bay

Resident: _____

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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P.T.O. 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.

Option E. Island Bay Residents Association /
Business Association.

- 1/ Reseal the Parade
- 2/ move bus stops back to where they were
- 3/ Put unmarked car parking back against kerb
- 4/ Clearly paint a cycleway in green or another colour on the roadside of parked cars, increasing width by 0.5 of a metre from original cycleway design
- 5/ In the shopping centre retain the current shaved 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.

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Wellington City Council

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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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Continued over page

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[Empty response box]

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Organis:	Island Bay
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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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Continued over page

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OPTION E
AS PER ISLAND-BAY
RESIDENTS' AND
BUSSINESS ASSOCIATIONS

1004025

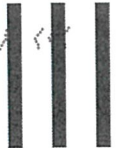
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Section 1 - Submitter details (fields marked * are mandatory)

First Name _____

Organisation Lyall Bay

Resident _____

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 ex resident -

Resident Regular visitor Occasional visitor Local business owner Other Worker

Section 2

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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. IBRA + Bus. Recommendations

J004025

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Section 1 - Submitter details

First N. _____
 Organi Island Bay
 Reside _____
 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 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.

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.

Return the Pavade to its former self.

Remove the Cyclenay!!

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Wellington City Council

Me Heke Ki Pōneke

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Free



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Wellington 6140

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

First Name*

Organisation

Kilbirnie

REMOVED

Residential A

Phone

(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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No

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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

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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.

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.

REVERT THE PARADE TO ITS ORIGINAL CONFIGURATION

I LIVED AT _____ TO
ONE OF THE MAJOR REASONS FOR
MOVING WAS THE INSTALLATION OF THIS
DANGEROUS CYCLEWAY

AT ALL WORKSHOPS & MEETINGS RESIDENTS
WERE REQUESTING THE PARADE BE RETURNED
TO ITS ORIGINAL STATE BUT COUNCIL OFFICERS
HAVE STEADFASTLY IGNORED INCLUDING THIS
OPTION IN THEIR PROPOSALS. THIS IS NOT
PUBLIC CONSULTATION.

ONLY LOCAL RESIDENTS SHOULD DECIDE WHAT
IS BEST FOR THEIR AREA, SUBMISSIONS FROM
OTHER NEIGHBOURHOODS SHOULD BE IGNORED.

I ALSO MADE AN E-MAIL SUBMISSION BUT NOT
BEING "TECKY" I DON'T KNOW IF IT WENT.

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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

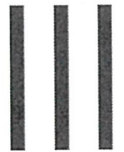
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① OPTION EG IBRA'S
—————

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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 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 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.

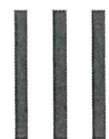
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

GRAND CHILDREN 29 3 YEAR OLD
ALRIGHTS THE CAR ONTO CYCEWAY COULD
NOT SEE CYCLIST COMING. IF HIT CAR
DOOR WHO IS TOO BLAME?
I WOULD LIKE TO SEE IT BACK
THE WAY IT WAS. OPTION E.
WOULD BE THEY. IT DOES.

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PO Box 2199
Wellington 6140

~~Scam~~ sent via email as Scam

P227

Love the Bay - Delivering on the Cycleway

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Section 1 - Submitter details (fields marked * are mandatory)	
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 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 type="checkbox"/> Other <u>Property Investor</u>	
Section 2	
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<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 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.

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.

There was nothing wrong with the way The Parade used to be with plenty of room for cars bikes.

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Love the Bay - Delivering on the Cycleway

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

First Name	
Organisation	Southgate
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 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.

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.

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P.T.O

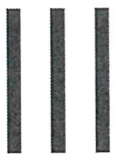
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Option E - Island Bay Residents
Assn/Business Assn Proposal
feel safer and easier for car backing
out of Drive way not to hit cyclist,
easier safer for Bus & Rubbish collector
to do their job and traffic to get around
them.
Over all feel option E is much safer
for cyclist, Resident, Bus Drivers, Rubbish trucks,
and cars.

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Section 1 - Submitter details (fields marked * are mandatory)	
First Name	
Organisat	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 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	
<input checked="" type="checkbox"/>	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	
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Option C - one-way separated kerbside cycleway - above road level	
<input checked="" type="checkbox"/>	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="checkbox"/>	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

P.T.O.

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 Assn/Business Assn Proposal

Feel safer and easier for car backing out of driveway & not hitting cyclist.

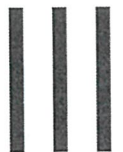
Easier and safer for Bus & Rubbish collectors to do their job and traffic to get around them.

Option E is much safer for cyclist, resident, bus drivers, rubbish trucks and cars. 95% of the time ~~cycleway~~ cycleway is not used.

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Section 1 - Submitter details (fields marked * are mandatory)	
First Name	
Organisation	Owhiro 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 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	
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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 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.

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 IBRA

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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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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.

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P-TO

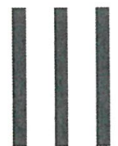
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION E : ISLAND BAY RESIDENTS ASSOCIATION
+ BUSINESS ASSOCIATION.

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

First Name

Organisation

Strathmore Park

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

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

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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.

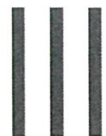
Option E - Island Bay Residents Association (IBRA) Continued over page

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.

- ~~hardly any bikers use the new cycleway now~~
- The cycleway has caused a lot of distress to residents in the community.
- Parking I used to park on the Parade I have nearly been run over numerous times getting out of car by cars moving but driving close by to my car.
- I am parking on the Clyde St now (not enough park there are hardly any parks in Clyde St now the residents there not happy)
- The Parade is one of the widest streets in Wellington why spend all this money on a cycleway when it was fine how it was before the new cycleway was put in.
- Elderly can not get carparks close to medical centre
 - Mothers with children find it dangerous when getting out their car

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First Name	
Organis	Island Bay
Resider	
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 type="checkbox"/> Resident <input type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input type="checkbox"/> Local business owner <input checked="" type="checkbox"/> Other <i>owner/ratepayer</i>

Section 2

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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.

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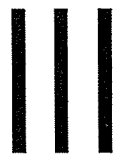
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION E – The Residents Association and Business Representatives proposal.

1. Reseal the Parade approx. cost \$280,000 based on council figures for 2016 where they 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 in and re-kerbing approx. half a kilometer 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 half-a-metre from the original cycleway design.
5. In the shopping centre retain the current shared space and angle car parks.
6. Replace the angle car parks outside the Medical Centre.
7. Look at reducing the speed limit along The Parade and enforcing it.
8. Remove the speed humps around the shopping centre and lower the height of the pedestrian crossings.
9. Retain pedestrian crossings on The Parade.

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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	
<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 <i>owner/ratepayer</i>	

Section 2

- 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.

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 – The Residents Association and Business Representatives proposal.

1. Reseal the Parade approx. cost \$280,000 based on council figures for 2016 where they 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 in and re-kerbing approx. half a kilometer 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 half-a-metre from the original cycleway design.
5. In the shopping centre retain the current shared space and angle car parks.
6. Replace the angle car parks outside the Medical Centre.
7. Look at reducing the speed limit along The Parade and enforcing it.
8. Remove the speed humps around the shopping centre and lower the height of the pedestrian crossings.
9. Retain pedestrian crossings on The Parade.

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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 Name*	
Organisation	Island Bay
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 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	
<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 as per IBRA

Continued over page

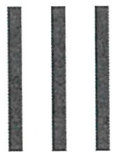
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Loss of car parks.

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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 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 _____	
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 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 as per IBRA

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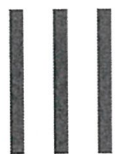
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

Loss of car parks.

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Island Bay Cycleway (114)
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Love the Bay - Delivering on the Cycleway

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Section 1 - Submitter details (fields marked * are mandatory)	
First Name	
Organisation	Oriental 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 type="checkbox"/> Resident <input type="checkbox"/> Regular visitor <input checked="" 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 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.

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.

1 Option E IBRA. Business Reps Recommendations

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

First Name	
Organisation	Wadestown
Residential	
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 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

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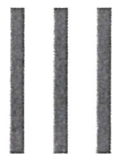
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION E IBRA BUSINESS RECOMMENDATION

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First Name*	
Organisation	Island Bay
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 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 _____

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.

E - over →

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.

E. Preferred option is back to the previous road as it was originally

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Section 1 - Submitter details (fields marked * are mandatory)	
First Name*	
Organisation	Seafoun
Residential Address	
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 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 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.

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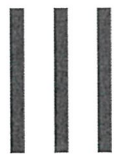
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① Option E - IBRA and Business Reps Recommendations

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

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 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.

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.

- don't like parking that's not against the curb.

- don't like the speed bumps, don't know why they were put in.

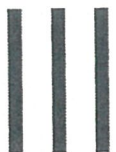
- want put back as much as possible to the way it was

★ Assistance writing by

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Wellington 6140