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# Island Bay cycleway submissions

Paper Based Submissions

Volume 11

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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

Organisation

Residence

Phone

Island Bay

Preferred method of contact\*  Email  Post

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

Please tick your connection(s) to Island Bay

Resident  Regular visitor  Occasional visitor  Local business owner  Other \_\_\_\_\_

#### Section 2

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

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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.

Option E - Island Bay Residents Association /  
Business Association Plan

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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
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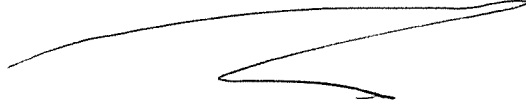
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Continued over page

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Option E - Island Bay Residents Acc. /  
Businesses Subscription plan.



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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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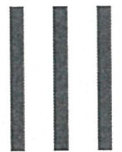
Continued over page

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Option **E**  - Island Bay Residents Association Plan  
↔  
I disagree with all options A, B, C, D

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Wellington 6140

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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
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OPTION E. Island Bay Residents Association Plan.

Continued over page



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First Name	Owhiro Bay
Organisation	
Residential	
Phone	
Preferred method of contact*	<input type="checkbox"/> Email <input checked="" type="checkbox"/> Post
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IBRA Option E

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**Absolutely Positively**  
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PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

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Wellington City Council  
He Hika Ki Poneke

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I PREFER 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.

I liked the way it was before - option "E" gets closer than all the other options.

My second choice would be option "D" it is very important that the angle parks between Medway and Avon streets are retained. I would also like to see angle parking outside the Medical Centre.

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**Wellington City Council**  
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Island Bay Cycleway (114)  
PO Box 2199  
Wellington 6140

P248

# Love the Bay - Delivering on the Cycleway

Absolutely Positively  
Wellington City Council  
Me Heke Ki Poneke

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Island Bay

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→ P.T.O.

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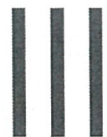
ISLAND BAY RESIDENTS ASS

OPTION E

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Wellington City Council**

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Continued over page





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OPTION E Island Bay Residents Association /  
Business Representatives

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#### 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 Assoc /  
Business Association

Free Post WCC

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



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

# Love the Bay - Delivering on the Cycleway

## Submission Form

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

First Name*	
Organisation	Island Bay
Residential Add	
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

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 Representatives

Free Post WCC

**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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First Name*	
Organisation	Island Bay
Residential	
Phone	
Preferred method of contact*	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Post
Age	<input type="checkbox"/> Under 18 <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input 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

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

Free Post WCC  
**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\* \_\_\_\_\_

Organisatio \_\_\_\_\_

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 \_\_\_\_\_

Island Bay

#### 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).

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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



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OPTION E . ISLAND BAY RESIDENTS ASSOCIATION  
+ BUSINESS REPRESENTATIVES.

Free Post WCC

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

Me Heke Ki Pōneke



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

# Love the Bay - Delivering on the Cycleway

## Submission Form

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

First Name	
Organisation	Island Bay
Residential	
Phone	
Preferred method of contact*	<input 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**

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**

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.

OPTION. E - ISLAND BAY RESIDENTS  
ASSOCIATION AND BUSINESS  
REPRESENTATIVES.

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



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

# Love the Bay - Delivering on the Cycleway

## Submission Form

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Section 1 - Submitter details (fields marked * are mandatory)	
First Name*	
Organisation	Miramar
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 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 <a href="http://wcc.govt.nz/theparade">wcc.govt.nz/theparade</a> for images and further details about each option.</p>	
Option A - roadside cycle lane - original layout with enhancements	
<input 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	
<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 C - one-way separated kerbside cycleway - above road level	
<input 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 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 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

- Parking was better the way it was before the cycle TRACK was put in
- Cyclists could be knocked off their bikes if you open the passenger door without looking

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



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

# Love the Bay - Delivering on the Cycleway

## Submission Form

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Section 1 - Submitter details (fields marked * are mandatory)	
First Name	
Organisation	Miramar
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 _____	
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 <a href="http://wcc.govt.nz/theparade">wcc.govt.nz/theparade</a> for images and further details about each option.</p>	
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	
<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 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.

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.

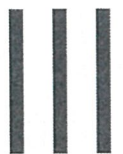
Option E - IBRA + Business Reson -  
mendations

J004025

Free Post WCC

**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	
Organisati	Miramar
Residentia	
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**

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**

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.

option E IBRA & Business Reps  
Recommendations

J004025

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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

## Submission Form

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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 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 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

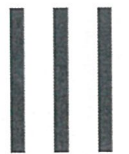
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION E - ISLAND BAY RESIDENTS  
ASSOCIATION / BUSINESS ASSOCIATION

Free Post WCC

**Absolutely Positively  
Wellington City Council**

Me Heke Ki Pōneke



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

# Love the Bay – Delivering on the Cycleway

## Submission Form

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

First Name*	
Organisation	Island Bay
Residential Address	
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 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

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.

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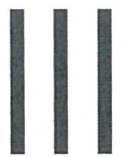
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Option E - Island Bay Residents Association/Business Association.

Free Post WCC

**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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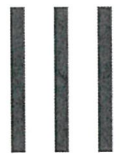
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Option E - Island Bay Residents Association / business association

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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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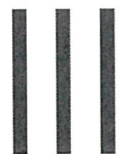
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Option E - Island Bay Residents association / business association

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Island Bay Cycleway (114)  
PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

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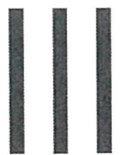
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Option E - Island Bay Residents Association / Business Association

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**Wellington City Council**

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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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Continued over page

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OPTION E - ISLAND BAY RESIDENTS ASSOCIATION /  
BUSINESS ASSOCIATION .

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Island Bay Cycleway (114)  
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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

OPTION E: The Island Bay Residents Association & Business Reps proposal

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 (I like none of the above options, I would like to suggest an alternative, a fifth Option):

"The Island Bay Residents Association and Business association representatives proposal"

Since the Island Bay cycleway inception the design has been a nightmare. There are limited street carparking outside my house. On the occasions I drive and return home @ 2am I am often forced to park 100's of metres away from my home. A shared path behind the bus stops has almost sent me flying with a cyclist @ speed bearing down the cycleway

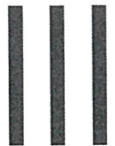
Option B has been a nightmare for our family as you can't see children cycling @ road level and the Parade now looks ugly. 5.2 million to put a concrete strip in!

Option C you are narrowing the road even more! and killing our shopping area by removing carparking

STOP NOW - RETURN THE PARADE TO HOW IT WAS!

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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

Residential

Phone

REMOVED (DUPLICATE) Island Bay

Preferred method of contact\*  Email  Post

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

Please tick your connection(s) to Island Bay

Resident  Regular visitor  Occasional visitor  Local business owner  Other \_\_\_\_\_

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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 (I like none of the above options, I would like to suggest an alternative, a fifth Option):

"The Island Bay Residents Association and Business association representatives proposal"

The IBCW is a disgrace to Island Bay

It has ruined The Parade & destroyed our close knit community.

Option A - Roadside - original layout WITHOUT enhancements!  
Removal of a further 57 carparks will destroy the aesthetics of The Parade and close our shops.

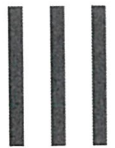
Option B - What a nightmare that design has been. Limited visibility, ugly yellow poles, more car accidents. The reported crashes statistics are not accurate as I have personally cleaned up after 3 crashes outside my house.!"

Option C - More carparks removed! Are you trying to kill our suburb?? Shared path and narrowing road. Hell No!

Option D - Good to see sense in retaining shop carparking but still mixing pedestrians & cyclists RETURN THE PARADE

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4

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

3

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

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

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

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.

Continued over page

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Prefer c.

For safety, it is important that cyclists and motorists are separated, and "grade" separation is even better.

In 'c' pedestrians are at a different height from the parked cars, + moving traffic is one more space away.

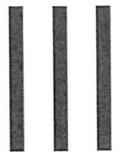
(It is NOT necessary for people to park on main routes. There is plenty of parking on side streets for non-residents of The Parade.)

Thank you.

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