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# Island Bay cycleway submissions

Paper Based Submissions

Volume 15

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342

# Love the Bay - Delivering on the Cycleway

Absolutely Positively  
Wellington City Council  
Me Heke Ki Poneke

## 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 N:

Organi:

Newtown

Resider

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).

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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.

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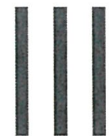
2. To help us understand your choice, please provide more information about why you selected your preferred option, and/or declined others if desired. Alternatively, if you prefer an amended option, please describe it here.

OPTION E

ISLAND BAY RESIDENTS ASSOCIATION  
& BUSINESS REPS PROPOSAL.

Free Post WCC

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



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

P 343

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Absolutely Positively  
Wellington City Council  
Me Heke Ki Poneke

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Organisation

Residential Add

Phone

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Wainuiomata

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

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OPTION E

Island Bay  
Residents Association  
Proposal.

Continued over page

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Wellington City Council  
Me Heke Kōwhiri

P 344

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Organisatic	Island Bay _____
Residential	_____
Phone	_____
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Option E

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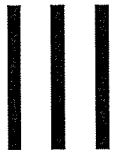
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Option E - see attached

Free Post WCC

**Absolutely Positively  
Wellington City Council**

Me Heke Ki Pōneke



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

## Option E - my choice and reasons why

The Parade in Island Bay has always been 'safe' until the WCC decided a few years ago to make so-called improvements; there was an existing cycle lane outside my property, roadside of parked cars. And, the **large majority of residents wanted The Parade left untouched** - the then mayor and some councillors went ahead. These alterations created problems, and solved nothing. Poor visibility for all users: pedestrians, cyclists and cars has resulted. And, **this can be rectified when Option E is selected.**

In the Wellington climate cycling is not a year round, every day easy activity.

To remove an additional 57 car parks from The Parade is irresponsible and will create financial difficulties for many businesses and services. With reduced parking many locals will drive through and take their business elsewhere. When there are local facilities many people walk to the business/shopping area(s) in reasonable weather even in the middle of winter.

As it is proposed to remove car parks obviously, no consideration has been given to the services that households require from time to time and the vehicle space required. Options A, B, C and D do not take into account the needs of the local residents and their parking needs should they require home maintenance trades-people, home deliveries. Where can they park a 'skip' or trailer when car parks are removed?

In the village/business area located on The Parade as well as the retail shops there is also other necessary community and recreational services, namely: library, plunket, postal facilities, café, restaurants, theatre, hairdressers and most importantly medical services including the doctors rooms, physiotherapy rooms and a chemist shop.

All of the above are important for a healthy and vibrant community, where people enjoy feeling part of it, safe and secure. No more if options A-B-C-D are chosen by the WCC.

At this stage, only Paul Eagle lives in Island Bay; everyone else on council live in other areas.

**Why and how does the current Mayor and Council think they know better than those living in the area - they don't.**

Maybe, the WCC will consider subsidising the businesses who experience hardship because of the lack of parking causing people to take their business elsewhere if A, B, C or D option is selected; similar to their donation on behalf of the ratepayers to Singapore Airlines.

In the Tonkin and Taylor, Report for WCC, July 2017; Design Report – The Parade .../it states "3.7 Landscape and Urban Design Context. Island Bay is a cohesive community with a distinct character, valley topography (flat in the middle), and a vibrant township. The town centre is an important hub for the local community as well as a destination for people outside of the suburb."

**This statement will only be true if Option E is selected.**

I have attended workshops/presentations etc for many, many months and the one thing that is very clear to me is that all those involved in attempting to design / re-design The Parade have no real connection to Island Bay, or have any feel for the suburb and its attributes. They only apply their clinical learning; which is not always workable and is certainly not a suitable solution!

**Just put it back to how it was.**

Has any thought been given to property values falling (business and household) due to the lack of local facilities, necessary services and a thriving retail sector. **Options A, B, C and D are a prescription for 'how to kill a suburb'.**

I write the above out of real concern for the whole area because I have lived on The Parade for 48 years, and have had children, and grandchildren, who cycled everywhere.

More importantly I have operated two businesses on The Parade and appreciate not only the value of being part of the "community" where people can walk to their activities and services, and which also offers convenient parking. This is especially true for older people who can no longer consider riding a bike when many have had hip and knee problems. And with an aging population this will only increase.

**Don't older people count?**

P344



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# Love the Bay - Delivering on the Cycleway

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Wellington City Council  
Me Heke Ki Pōhaka

9 345

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First Name	
Organisation	Miramar
Resident	
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 type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input checked="" type="checkbox"/> Local business owner <input type="checkbox"/> Other _____	

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① 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

J004025

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**Absolutely Positively  
Wellington City Council**

Me Heke Ki Pōneke



FREEPOST WCC  
Island Bay Cycleway (114)  
PO Box 2199  
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# Love the Bay - Delivering on the Cycleway

P 346

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Organisation

Residence

Phone

Miramar

Preferred method of contact\*  Email  Post

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Option E

Continued over page

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Option E — ~~IBRA~~ Bus Recommendation

1004025

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

Me Heke Ki Pōneke



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Organis

Resider

Phone

Island Bay

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Parent of Intellectually Challenged Son/Resider

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IBRA and Business Reps Recommendations

J004025

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Option E

I support Option E as proposed by  
Island Bay Residents Association

My reasons mainly are:  
I frequently travel by bus

The car parks close to the centre  
of the road make it really  
hard for buses to pass approaching  
traffic.

The whole set-up is a nightmare

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**Absolutely Positively  
Wellington City Council**

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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.

I am not a cyclist. Living on the Parade the new cycleway has been a nuisance for me as a motorist as the difficulty of backing out of my garage increased.\* I like the concept of a kerbside cycleway for younger cyclists who do use it. I have little sympathy for the (mostly) young lycra clad men who are clearly capable of riding in the road with traffic

\* From this point of view I would not be sorry to see the whole thing revert to option E.

One other issue I have is the diagonal white lines outside my garage which seem to prevent my family or trades people parking there. Other parts of Island Bay have similar white lines and allow parking over them eg Severn St.

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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

2551

## 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).

### Privacy Statement - what we do with your personal information

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

First Name*	
Organisation	Island Bay
Residential	
Phone	
Preferred method of contact* <input 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 type="checkbox"/> Regular visitor <input type="checkbox"/> Occasional visitor <input checked="" type="checkbox"/> Local business owner <input type="checkbox"/> Other	Floyde's

### 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.

Vote Option E please

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PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

Absolutely Positively  
Wellington City Council  
Me Heke Ki Pōhake

P352

## Submission Form

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

### 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.

Vote Option E please

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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

*P 353*

## Submission Form

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

First Name	
Organisation	<i>Island Bay</i>
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 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 _____

**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.

*Options E - Residents + Business Associate options.*



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.

Large empty rectangular box for providing feedback or comments.

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Me Heke Ki Pōneke



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Island Bay Cycleway (114)  
PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

P 354

## Submission Form

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

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

Option E - Residents + Business Associate options.

Continued over page

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

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Island Bay Cycleway (114)  
PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

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Wellington City Council  
Me Heke Pōneke

P 355

## 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 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 checked="" type="checkbox"/> Local business owner <input type="checkbox"/> Other	Floyd's

### Section 2

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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.

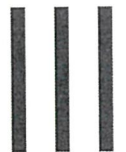
Vote Option E please

1004025

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Wellington City Council**

Me Heke Ki Pōneke



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

P 356

# Love the Bay - Delivering on the Cycleway

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Wellington City Council  
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## 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 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 _____

### Section 2

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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

had previously put A but now want E please

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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Island Bay Cycleway (114)  
PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

7357

## Submission Form

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

First Name	
Organisation	Wanganui
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 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

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 - RETURN TO ORIGINAL LAYOUT

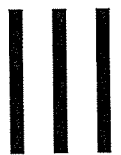
Do not feel safe parking in current car parks. Feel very exposed on both sides of my car, having to look for travelling vehicles on driver's side and also on passenger side having to look for cyclists when taking things from my parked vehicle.

The Parade has consequently narrowed considerably

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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

P 358

## 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 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.

Option E - Put it all back the way it was

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.

J004025

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

Me Heke Kī Pōneke



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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	
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).

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. **BUT SEE 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.

OPTION E - restoring the parade to how it was - would be the best, though I would keep the speed humps.

How the Council can consider taking 17 parks away from the shopping centre I do not know - Council should be providing more parks!

Wellington needs cycleways, but it needs them where life is worst for cyclists, and the parade was far from the worst. A cycleway from Petone to the city; a cycleway around the bays/peninsula from Oriental Bay to Owhiro Bay (for the 'pack' of cyclists who so frequently ride that route). And if cycling to the city from Island Bay is to be made easier and safer, it is from Wakefield Park to the city that needed thought and expenditure, not the parade.

I believe the Council was 'captured' by a cycle lobby, most of whom do not live in Island Bay, and just did not think through the issues properly. Why doesn't Wellington look to a city like Goteborg in Sweden for examples? Goteborg is just a little bigger than Wellington but it has some similarities. They use a combination of light rail, buses, cycling and pedestrians, with comparatively little use of motor cars.

Council seems determined to railroad through an unsatisfactory and expensive solution to a problem it created. I would rather my taxes/money went on cycleways in Wellington when they are needed.

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**Absolutely Positively  
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

17360

## Submission Form

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

First N.	
Organi	Island Bay
Reside:	
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.

#### 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.

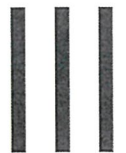
## OPTION E

Put road back to original at a lower cost and keep Business's in jobs.  
Teach Cyclist the road code and how to share the road.

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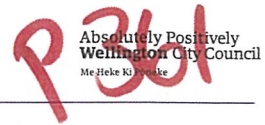
**Absolutely Positively  
Wellington City Council**

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PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway



## Submission Form

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<b>Section 1 - Submitter details</b> (fields marked * are mandatory)	
First Name	
Organisation	Island Bay
Residence	
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 _____	

<b>Section 2</b>
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 <a href="http://wcc.govt.nz/theparade">wcc.govt.nz/theparade</a> for images and further details about each option.

<b>Option A - roadside cycle lane - original layout with enhancements</b>
<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.

<b>Option B - one-way separated kerbside cycleway - road level - current layout with enhancements</b>
<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.

<b>Option C - one-way separated kerbside cycleway - above road level</b>
<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.

<b>Option D - one-way separated kerbside cycleway - above road level, with angle parking</b>
<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 - Resident + Business Associate options.

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.

STANDARD

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

## Submission Form

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

First Name	
Organisation	Island Bay
Residential	
Phone	
Preferred method of contact*	<input type="checkbox"/> Email <input checked="" type="checkbox"/> Post <span style="float: right;">0</span>
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 _____	

### 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.

Continued over page

P10

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 would like to vote for option E. The Residents Ass and Business Repts proposal.

Thank you

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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



## 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 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 _____	

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

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P T O

Continued over page

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 would like to vote for option E.  
The Residents Ass and Business Reps  
proposal.

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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

9364

## 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 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

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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.

P-10

Continued over page

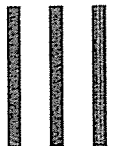
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I would like to vote for option E.  
The Residents Ass and Business Reps  
proposal.

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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

P 305

## Submission Form

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

First Name

Organisation

Residential

Phone

Island Bay

Preferred method of contact\*  Email  Post

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

Please tick your connection(s) to Island Bay

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

### Section 2

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



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

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



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

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



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

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



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



Option E

IBRA / 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.

OPTION E - IBRA and Business REPS Recommendations

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Island Bay Cycleway (114)  
PO Box 2199  
Wellington 6140

# Love the Bay - Delivering on the Cycleway

7306

## Submission Form

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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).

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

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

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

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

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

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

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

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



Option E

IBRA / 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.

ISRA and business rep's recommendation  
OPTION-E

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