



PROPOSED - PHASE 1 PROVISION OF AN ACTIVE TRAVEL ROUTE – YSTRAD MYNACH (as indicated in the drawing)

The consultation drawing shows the proposed scheme, which is funded by Welsh Government. The proposed scheme includes the following improvements:

- Extension of the existing 20mph speed limit including traffic calming along Pengam Road, Ystrad Mynach.
- Improvements to the existing 20mph gateways throughout the town centre.
- Modifications to the buildout on Pengam Road near the Davies Street junction.
- Enhancement of road markings and associated signage to introduce advisory cycle lanes.
- Construction of 3 new flat top humps which will incorporate a zebra crossing facility at the junction of Davies Street.
- Creation of a new bus stop/buildout in the vicinity of 43/45 Pengam Road for east bound bus services in order to accommodate the new zebra crossing.

Now you have had the opportunity to view the proposals, we would appreciate your comments. Comments will not receive individual replies but will be taken into account when reviewing and evaluating the level of public support for the scheme. We will also inform all those who have responded and provided contact details of the outcome of the consultation.

Questions 1&2 - Please tick the appropriate box.

Question 3- Asks for your comments; continue overleaf or on separate sheets if you so wish.

Q1. Do you agree or disagree that people should be encouraged to walk or cycle more often for everyday journeys?

Agree Disagree

If you disagree, please explain why:.....
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Q2 In general, do you agree or disagree with the scheme outlined in the proposal?

Yes No

Q3 Please continue below with any comments, suggestions or matters you wish us to consider further, you may continue overleaf if necessary.

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Your name and address will remain confidential, but are useful in the analysis of completed questionnaires. If you wish to be contacted regarding a particular issue or informed of the outcome of the consultation, please provide your contact details below:

Name (Mr/Mrs/Ms):.....

Address/ Email.....

Postcode:

How we will use your information

We will use the data you have provided in our analysis and to inform our policy/scheme development and where appropriate to inform our decisions and changes. Your comments will not automatically receive individual replies but will be taken into account when reviewing and evaluating the support for the policy/scheme. We will inform those who have participated/responded of the outcome of our consultation if a contact address has been supplied by the respondent.

You have a number of rights in relation to the information including the right of access to information we hold about you and the right of complaint if you are unhappy with the way your information is being processed. For further information on how we process your information and your rights please click the following link: <https://www.caerphilly.gov.uk/CaerphillyDocs/FOI/PrivacyNotices/Project-Development-Consultation.aspx>

Due to the small scale nature of this survey, the full range of equalities monitoring questions has not been included. The questions below are not compulsory but your response will help us to fully understand the answers you have provided in the survey.

If you feel that these proposals will impact on you (either positively or negatively) because of any of the following: your ethnic origin, gender, age, marital status, sexual orientation, disability, gender reassignment, religious beliefs or non-belief, use of Welsh language, BSL or other languages, nationality or responsibility for any dependents, please give details:

I am aged (please tick one)

<input type="radio"/> <input type="radio"/>	5-15	<input type="radio"/> <input type="radio"/>	30-39	<input type="radio"/> <input type="radio"/>	Over 60
<input type="radio"/> <input type="radio"/>	16-21	<input type="radio"/> <input type="radio"/>	40-49		
<input type="radio"/> <input type="radio"/>	22-29	<input type="radio"/> <input type="radio"/>	50-59		

I am (please tick one)

<input type="radio"/> <input type="radio"/>	Male	<input type="radio"/> <input type="radio"/>	Prefer not to say
<input type="radio"/> <input type="radio"/>	Female	<input type="radio"/> <input type="radio"/>	Other, please write in

Do you have a disability, long-term illness or health problem? (Please select all that apply)

<input type="checkbox"/> <input type="checkbox"/>	Yes, I have a disability	<input type="checkbox"/> <input type="checkbox"/>	No
<input type="checkbox"/> <input type="checkbox"/>	Yes, I have a long term illness or health problem	<input type="checkbox"/> <input type="checkbox"/>	Prefer not to say

Does your disability, long-term illness or health problem impact on your travel arrangements? (Please select only one)

<input type="radio"/> <input type="radio"/>	Yes	<input type="radio"/> <input type="radio"/>	No
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I am (Please select only one)

<input type="radio"/> <input type="radio"/>	Employed full time (30 hours or more per week)	<input type="radio"/> <input type="radio"/>	Looking after the home or family
<input type="radio"/> <input type="radio"/>	Employed part time (less than 30 hours per week)	<input type="radio"/> <input type="radio"/>	Long term sick or disabled
<input type="radio"/> <input type="radio"/>	Self-employed or freelance	<input type="radio"/> <input type="radio"/>	Unemployed
<input type="radio"/> <input type="radio"/>	Retired	<input type="radio"/> <input type="radio"/>	Prefer not to say
<input type="radio"/> <input type="radio"/>	A student	<input type="radio"/> <input type="radio"/>	Other, please write in

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