

MPO Performance Metric Survey

This research is part of a study on transportation planning, policy, and engineering at The Georgia Institute of Technology. Your responses to this survey will help us evaluate the effects of federal legislation regarding performance metrics on urban transportation planning.

The purpose of this survey is to assess how MPOs develop and implement long-range performance-based transportation planning. The survey asks about performance measure data collection and the relation of specific measures to the long range plan development process before and after the passing of MAP-21. MPO characteristics such as region population demographics, size, and geographic location will be examined to ensure variety in the types of MPOs and urban regions represented in the study. You will receive a copy of the findings from this survey if you choose to participate and provide your contact information.

Your personal information, if you choose to provide contact information, will not be shared with anyone and will be used only for the purpose of follow-up. Your participation in the study is voluntary. You have the right to change your mind and leave the study at any time.

If you have any questions about the study, or about the survey questions you may contact Alice Grossman at (678)-992-8595 or agrossman3@gatech.edu.

Please click "next" to continue to the survey. By doing so, you are agreeing to participate. Thank you for helping us better understand how MPOs are using and adapting performance-based planning strategies in long range transportation plans.

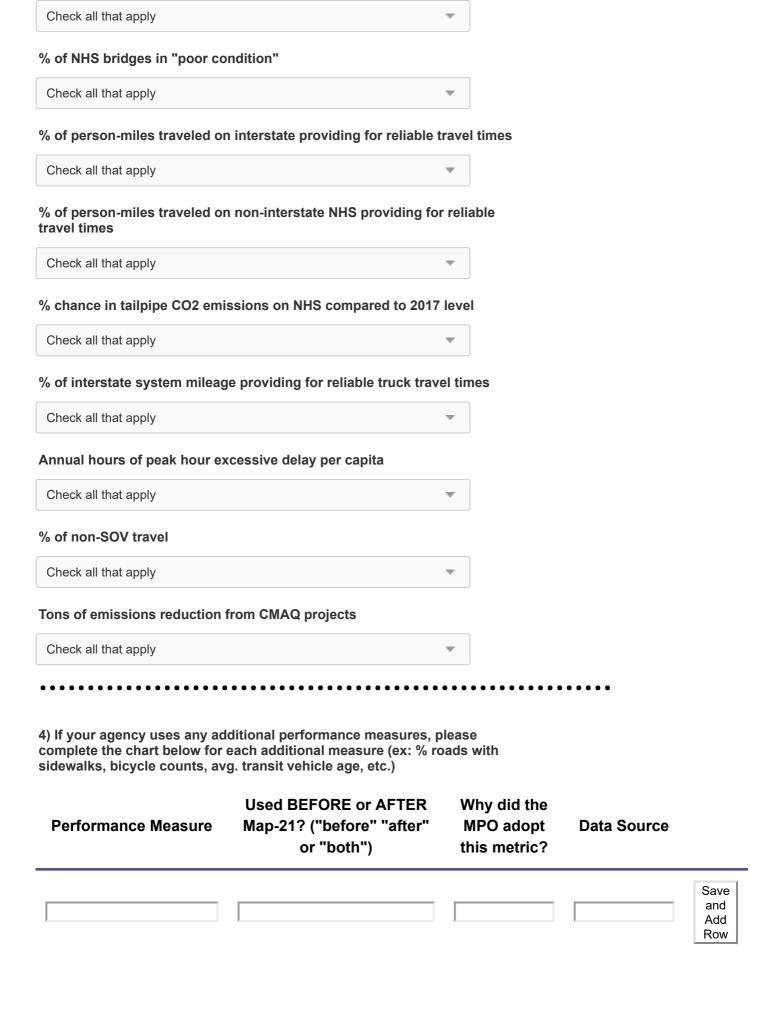
Page 1 of 4: General Information

| 1) What is your MPO's name? | | |
|--|-------------------|---|
| | | |
| 2) What is your MPO's population class? | Select one | ▼ |
| 3) How many full and part staff members does your MPO have? | | |
| a. full time | | |
| b. part time | | |
| | • • • • • • • • • | |
| 4) How many counties does your MPO serve for transportation planning purposes? | Select one | ▼ |

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| When developing performance measures for transportated did your MPO review practices at peer agencies? | tion planning, | Select one | ▼ |
|--|-------------------|-------------------|------------------|
| | • • • • • • • • • | ••••• | |
| 2) Which of the following performance measures included 21? check all that apply | in MAP-21 did y | our MPO use befor | e and after MAP- |
| Number of serious injuries | | | |
| Check all that apply | • | | |
| Rate of serious injuries | | | |
| Check all that apply | ▼ | | |
| Number of fatalities | | | |
| Check all that apply | • | | |
| Rate of fatalities | | | |
| Check all that apply | • | | |
| Number of non-motorized serious injuries | | | |
| Check all that apply | • | | |
| Number of non-motorized fatalities | | | |
| Check all that apply | • | | |
| % of main line interstate lane miles in "good condition" | | | |
| Check all that apply | • | | |
| % of main line interstate lane miles in "poor condition" | | | |
| Check all that apply | • | | |
| % of main line non-interstate NHS lane miles in "good cond | dition" | | |
| Check all that apply | • | | |
| % of main line non-interstate NHS lane miles in "poor cond | lition" | | |
| Chack all that apply | _ | | |

% of NHS bridges in "good condition"



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Page 4 of 4: Optional Follow-up

Please provid contact information if you would like to receive papers and reports based on the findings

Name

First Name

Last Name

Position at MPO (Job Title)

| 1 OSITION AT | TMPO (Job Title) | |
|--------------|------------------|--|
| Phone Nur | mber | |
| Area Code | Phone Number | |
| E-mail | | |