

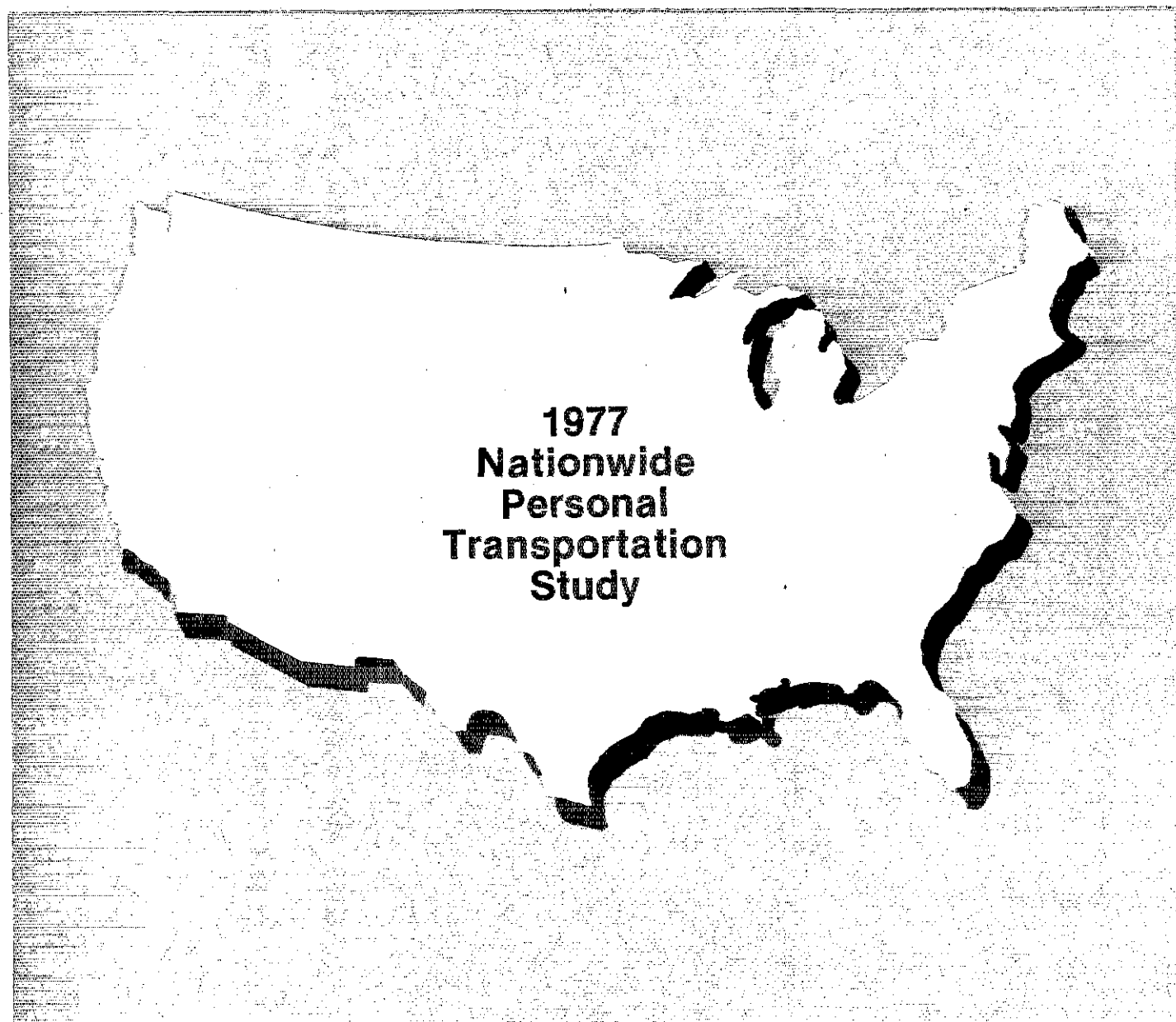


U.S. Department
of Transportation
**Federal Highway
Administration**

Characteristics of 1977 Licensed Drivers and Their Travel

Office of Highway Planning
October 1980

Report No. 1



1977 NATIONWIDE PERSONAL TRANSPORTATION STUDY

CHARACTERISTICS OF 1977 LICENSED DRIVERS AND THEIR TRAVEL
REPORT 1

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I. HIGHLIGHTS

- Driver licenses in 1977 were held by 80.8 percent of all persons 16 years of age and older.
- Driver licenses are held by 89.1 percent of all males and 73.4 percent of all females. For both sexes, the highest percent of licensed drivers was in the 25-29 and 30-34 year age groups, 91.2 and 92.1 percent, respectively.
- Approximately 51.9 percent of all licensed drivers are males and 48.1 percent of all licensed drivers are females. Since 1969, the percent difference of female drivers to total driving population has increased by 11.9 percent, however, the proportion of female licensed drivers in all age groups, except the 35-39 year age group has been below that of males.
- The percentage difference of persons driving less than 5,000 miles annually has decreased by 8.5 percent since 1969, while the percentage difference of persons driving more than 10,000 miles annually has increased by 9.9 percent.
- Average annual miles per driver have continued to climb since 1969 despite the oil embargo in 1973. Nationally, the average driver drove 10,006 miles during 1977, an increase of 1,324 miles from 1969.
- Males drove an average of 13,563 miles annually in 1977, an increase of 2,211 miles since 1969.
- Females drove an average of 5,943 miles annually, an increase of 532 miles from 1969.
- Despite the increased driving by females, male drivers on the average continue to drive more than twice as many miles per year as females.
- Vehicle miles of driving are highest for licensed drivers who reside in the less populated areas.

- On the average, the number of miles driven per licensed driver increases proportionately to the number of vehicles in the household.
- On the whole, as household *income increases*, the average number of miles driven per licensed driver increases.

II. INTRODUCTION

A. PURPOSE OF REPORT

This report presents data related to licensed drivers and compiled from the 1977 Nationwide Personal Transportation Study (1977 NPTS).

Information about licensed drivers is important to Federal, State and local officials in the highway taxation and planning fields. The proportion of drivers to total driving age population 16 years of age-and-older has increased since 1969, accompanied by a proportional increase in the number of automobiles being driven. Women, in particular, are responsible for this large increase. More than 80 percent of females, ages 20-49 are licensed drivers today, compared to 50 percent and less 30 years ago. Since more than 85 percent of all person miles of travel is done in household vehicles such as the automobile, the characteristics of licensed drivers are critical to our understanding of travel behavior in the United States.

B. ORGANIZATION OF REPORT

Data collected in this study of licensed drivers are examined within three parameters. These parameters are (1) geographic distribution of the resident non-institutionalized driving age population 16 years of age-and-older with driver licenses by place of residence: inside and outside SMSA's, and SMSA by population size-groups; (2) population distribution of licensed drivers by age groups and sex; and (3) travel distribution of licensed drivers by place of residence inside/outside SMSA's, age groups, sex, and as related to number of drivers in the household, household income and number of vehicles in household.

The population data shown in this report are based on estimates of 1977 population expanded from the 1970 Census and include Armed Forces personnel living on base and off-base housing units.

Information describing the survey procedures and data processing, including sample design, survey methodology, processing procedures, provisions for obtaining special tabulations, subject areas planned for 1977 NPTS reports, as well as an order form with description and price of the public use tapes are found in the Appendix of this report.

C. DESCRIPTION OF DATA

The 1977 Nationwide Personal Transportation Study (1977 NPTS) was designed to update the earlier study done in 1969 to provide comprehensive data on travel and transportation patterns in the United States. The 1977 NPTS addressed the full range of trips and travel done by U.S. households, along with the related social and economic characteristics of the tripmaker. The 1977 study was designed to collect information on all trips taken during a designated 24-hour period and some additional detail on trips of 75-miles-or-more during the preceding 14-day period. The 1977 study collected information on the use and availability of public transportation facilities, types of motorized vehicles available to the household, characteristics of the trips taken, including mode, purpose, miles traveled, time required and persons on the trip. The additional information obtained for trips of 75 miles-or-more included number and type of stops made during the trip and uses of additional modes of transportation. A unique feature of the 1977 NPTS was the use of mapping during home interviews to estimate the amount of travel in urban and rural areas.

Nationwide, the total number of persons who indicated they were licensed drivers was estimated at 127,525,000. This number is approximately 10,596,000 below the total number of driver licenses reported by and in the files of the 50 States and the District of Columbia. Table A-1 in Appendix A compares the number of licensed drivers from the 1977 NPTS (127,525,000) with the number of driver licenses reported by the 50 States and the District of Columbia for 1977 (138,121,000) within each age group. Although the age distribution from the two sources is almost identical, the number of driver licenses from the State files exceeds the number of licensed drivers estimated from NPTS. The differences in the two figures may be definitional; i.e., licensed drivers vs. driver licenses. That is, the NPTS 1977 questionnaire asked a respondent to indicate whether he (she) was a licensed driver; the expanded sample of licensed drivers obtained from NPTS may have produced too low an estimate. The number of driver licenses, on the other hand, is based on a count of documents from reports of State authorities and may include duplicate licenses as well as licenses no longer valid (e.g., death).

IV. SUMMARY

Approximately 80.8 percent of all persons 16 years and over were licensed drivers in 1977, a 7.2 percentage points increase from 1969 and was due largely to the increasing proportion of women drivers. While the percent of male drivers increased 2.1 percentage points from 1969 to a level of 89.1 percent in 1977, the percent of female licensed drivers increased by 11.9 percent to a level of 72.3 percent in 1977. For both sexes, the highest percent of licensed drivers (as a proportion of 16 years and older) was in the 25-29 and 30-34 age groups, 91.2 and 92.1 percent, respectively.

Approximately 51.9 percent of all licensed drivers are males, a 4.4 percent decrease from 1969. Approximately 48.1 percent of all licensed drivers are females, a 4.4 percent increase since 1969. Since 1969, the percent of male drivers within each age group has shown a decrease. While female drivers have continued to make gains as drivers, the proportion of female licensed drivers in all age groups, except the 35-39 year age group, remains below that of males.

A comparison of 1977 data with 1969 data indicates that the percent of persons driving less than 5,000 miles annually has decreased, while the percent of persons driving the longer distances has increased. Male drivers specifically have contributed largely to this overall increase.

The increased driving is reflected in the higher average annual miles per driver. Nationally, the average driver drove 10,006 miles during 1977, an average increase of 1,324 miles from 1970. Males drove an average of 13,563 miles annually, an increase of 2,211 miles per driver from 1969. Females drove an average of 5,943 miles, up 532 miles per female driver from 1969.

Generally, average miles driven increased for both males and females up through age 39 and then decreased. The average annual miles driven was lowest for persons 70 years of age and older. Despite the increased driving by female drivers, males on the average drove more than twice the miles per year averaged by females.

Vehicle-miles of travel were highest for licensed drivers who resided in the less-populated areas. Drivers living outside of SMSA's in places of less than 5,000

population, drove 10,499 miles or 760 miles less than those drivers living in places of more than 5,000 population. Inside SMSA's, drivers living outside the central city drove almost 1000 miles more (10,376 miles) than those living inside the central city.

On the average, the number of miles driven per driver increases almost proportionally to the number of vehicles in the household.

As household income increases, the average number of miles driven per licensed driver increases.

SURVEY PROCEDURES AND DATA PROCESSING

Background

The 1977 NPTS was conducted by the Bureau of the Census under the joint sponsorship of the Federal Highway Administration, and the National Highway Traffic Safety Administration of the Department of Transportation (DOT), as part of the expanded scope of the National Travel Program. The National Travel Program is part of the Census of Transportation, which is conducted every five years by the Bureau of the Census and includes the National Travel Survey (NTS). In 1977, the National Travel Program also included the 1977 NPTS and provided profiles of the volume and characteristics of travel by the civilian population.

Sample Design

The 1977 NPTS was based on a national probability sample of 24,466 households selected from each of the 50 States and the District of Columbia and representing the total civilian noninstitutional population of the United States. Of the 24,466 household, 3,433 units were found to be vacant, demolished, converted to nonresidential use, or otherwise ineligible for the survey. Some 3,084 households were not interviewed because the occupants were not at home after repeated calls, refused to participate in the survey, or were unavailable for some other reason.

All of the sample units consisted of households that had previously been interviewed for the Current Population Survey (CPS). The CPS is a stratified multistage cluster sample. In the first stage, the United States was divided into 1,030 primary sampling units (PSU's) consisting of counties, groups of counties, or independent cities, which were grouped into 376 strata. Among these strata, 156 consisted of a single PSU, designated as self-representing (SR) areas, and generally contained the larger metropolitan areas. The remaining 220, contained one or more PSU's that are relatively homogeneous according to socio-economic characteristics. From each stratum, a single PSU was selected for the sample with a probability proportionate to its 1970 census population; these PSU's are referred to as non-self representing (NSR). The CPS portion of the NPTS was selected from these 376 PSU's (156 SR and 220 NSR).

Methodology

As indicated previously, the 1977 NPTS was conducted as part of the expanded scope of the National Travel Program which also included the National Travel Survey (NTS). The NTS/NPTS included a common sample of 13,365 households interviewed from April-November 1977 and January 1978; these households were referred to as the basic sample, and were interviewed four times for NTS data and once for NPTS data. An additional 4,584 addresses, referred to as the supplemental sample, were divided into three equal parts and were interviewed in December 1977, February 1978, and March 1978. This arrangement spread the total NPTS data collection over a 12-month period from April 1977-March 1978, with approximately 1500 households to be interviewed each month.

The households within each monthly sample were divided into 14 equal parts, with each part assigned to one of the first 14 days of the interview month. The assigned day was referred to as the designated travel day. In addition, each household was interviewed for trips of 75 miles and longer for the 14 days preceding the travel day; this was referred to as the 14-day travel period. Thus each household was interviewed for trips and travel during a 15-day period.

Data Processing

The major steps performed by the Bureau of the Census for the 1977 NPTS included clerical editing and coding of the NTS-2 Questionnaire, (Sections I-VI); the NTS-2A (Section VII) was edited and coded by the FHWA DOT personnel; full transcription of the data to magnetic tapes; computer edit of the data to ensure completeness and consistency; calculation of the weighting factors for each household; and computation of variance and calculation of statistical reliability of the data. The FHWA tabulated the data upon receipt of the edited, weighted data tapes from the Bureau of the Census.

Special Tabulations

There are some applications that require the use of data items on the Census file, such as those related to place of residence of individual respondents, that cannot be included on the public use tape without possible disclosure of the individual respondents. If disclosure can be avoided, the Bureau of the Census will undertake

special tabulations in accordance with its policy that "Special tabulation or transcriptions of data in the files of the Bureau of the Census will be undertaken on a cost basis, insofar as Bureau facilities are available. Those requesting special tabulations should understand that the data are based on surveys paid for by public funds and, therefore, are public property. The purpose for which such tabulations are obtained must not be contrary to the public interest, or be used to give unfair commercial or other advantage to any person or group."

Requests for special tabulations should be addressed to: Chief, Demographic Surveys Division, Bureau of the Census, Washington, D.C. 20233.

Subject Areas Planned for 1977 NPTS Reports

The following is a list of subject areas for which 1977 NPTS reports are presently planned. The sequence does not necessarily indicate the order in which the reports will be prepared and published. This is not a list of actual reports or report titles, but rather a list of subject areas. It is offered as an indication of current plans as well as to give transportation researchers and planners a general indication of the variety and scope which the 1977 NPTS data encompasses. For those reports that have been published, the correct title, report number and publication date are shown.

Licensed drivers: Characteristics of 1977 Licensed Drivers and Their Travel
(Report #: FHWA IPL 180 1007, October 1980)

Item 21: 74 pages

Private vehicles - ownership and physical characteristics

Purpose of trips and travel

Home-to-work trips and travel

Vehicle occupancy

Vehicle utilization

Travel and the family life cycle

Multi-occupant vehicle travel - public and private

Rural vs. urban travel

Mapping as a travel data collection technique

Survey description and tables of variance

Discretionary travel

Household travel rates

Person-trip characteristics

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
FORM NTS-2 (11-2-77)

DETAILED PERSONAL INTERVIEW (Sections I-VI)

NATIONAL TRAVEL SURVEY

1977 CENSUS OF TRANSPORTATION

1a. Control number _____
 Check MTS Serial _____

1b. Address (Sheet _____ Line _____) What is your exact address?
 (Include House No., St., Apt. No., or other identification)

1c. Type of structure (CC 6)
 1 Single family detached
 2 Single family attached to 1 or more structures
 3 Single family trailer or mobile home
 4 Multi-family 2-4 units
 5 Multi-family over 4 units
 6 Other - Specify _____

2. MONITOR INTERVIEW STATUS

TYPE A
 1 No one home
 2 Temporarily absent
 3 Refused
 4 Unable to locate
 5 Other - occ.

TYPE B
 6 Vacant-regular
 7 Vacant-storage of household furniture
 8 Temporarily occupied by persons with URE
 9 Unit, or to be demolished
 10 Under construction, not ready
 11 Converted to temporary business or storage
 12 Unoccupied tent site or trailer
 13 Other construction not started
 14 Demolished
 15 House or trailer moved
 16 Converted to permanent business or storage
 17 Merged
 18 Condemned
 19 Other

3. TYPE Z
 Interview not obtained for: _____
 Line number(s) - _____

4. Designated travel day (CC 4)
 Day of the _____ Month _____ Date _____

5. Designated travel weeks (CC 6)
 First _____ Month _____ Date _____
 Last _____ Month _____ Date _____

6. Record of interview
 Line number of household respondent _____
 Date completed _____

7. Interviewer identification
 Code _____ Name _____ Date _____

8. Questionnaire _____ of _____
 Questionnaire _____

NOTE - Your report to the Census Bureau is confidential by law (Title 13, U.S. Code). All identifiable information will be used only by persons engaged in and for the purposes of the survey, and may not be disclosed or released to others for any purpose.

12. TOTAL FAMILY INCOME IN PAST 12 MONTHS (CC 29)
 1 Under \$2,000
 2 \$2,000-\$2,999
 3 3,000-4,999
 4 5,000-5,999
 5 6,000-7,499
 6 7,500-9,999
 7 10,000-11,999
 8 12,000-14,999
 9 15,000-19,999
 10 20,000-24,999
 11 25,000-34,999
 12 35,000-49,999
 13 50,000-99,999
 14 100,000 and over

13. TOTAL NUMBER OF HOUSEHOLD TRIPS
 1 1-4
 2 5-9
 3 10-14
 4 15-19
 5 20-24
 6 25-29
 7 30-34
 8 35-39
 9 40-44
 10 45-49
 11 50-54
 12 55-59
 13 60-64
 14 65-69
 15 70-74
 16 75-79
 17 80-84
 18 85-89
 19 90-94
 20 95-99
 21 100 and over

14. Travel day _____

15. 14-Day travel period _____

Person 1	Person 2	Person 3	Person 4
Line No. (CC 8)	Line No. (CC 8)	Line No. (CC 8)	Line No. (CC 8)
NAME (Last name first) (CC 9a)	NAME (Last name first) (CC 9a)	NAME (Last name first) (CC 9a)	NAME (Last name first) (CC 9a)
RELATIONSHIP TO HOUSEHOLD HEAD (CC 9b)	RELATIONSHIP TO HOUSEHOLD HEAD (CC 9b)	RELATIONSHIP TO HOUSEHOLD HEAD (CC 9b)	RELATIONSHIP TO HOUSEHOLD HEAD (CC 9b)
AGE (CC 12) Enter in numerals	AGE (CC 12) Enter in numerals	AGE (CC 12) Enter in numerals	AGE (CC 12) Enter in numerals
BIRTH DATE (CC 11) Enter in numerals	BIRTH DATE (CC 11) Enter in numerals	BIRTH DATE (CC 11) Enter in numerals	BIRTH DATE (CC 11) Enter in numerals
MARITAL STATUS (CC 13) For persons 14	MARITAL STATUS (CC 13) For persons 14	MARITAL STATUS (CC 13) For persons 14	MARITAL STATUS (CC 13) For persons 14
SEX (CC 14) Enter code	SEX (CC 14) Enter code	SEX (CC 14) Enter code	SEX (CC 14) Enter code
RACE (CC 15) Enter code	RACE (CC 15) Enter code	RACE (CC 15) Enter code	RACE (CC 15) Enter code
ORIGIN OR DESCENT (CC 16) Enter code	ORIGIN OR DESCENT (CC 16) Enter code	ORIGIN OR DESCENT (CC 16) Enter code	ORIGIN OR DESCENT (CC 16) Enter code
HIGHEST GRADE (CC 17a) Enter code	HIGHEST GRADE (CC 17a) Enter code	HIGHEST GRADE (CC 17a) Enter code	HIGHEST GRADE (CC 17a) Enter code
ARMED FORCES (CC 18) Enter code	ARMED FORCES (CC 18) Enter code	ARMED FORCES (CC 18) Enter code	ARMED FORCES (CC 18) Enter code
OFFICE USE ONLY	OFFICE USE ONLY	OFFICE USE ONLY	OFFICE USE ONLY

Section I - MOTORIZED VEHICLE RECORD

READ - How I would like to ask you some questions about motor vehicles owned or used by members of this household.

14a. How many licensed motorized vehicles were owned, or available for use on a regular basis, by members of this household during the period from (1st day of 14-Day Travel Period) through (Travel Day)? Include leased or company-owned licensed motorized vehicles. Also include motorized bicycles (MOPEDS) whether licensed or not.

Number of vehicles: 215
 None - SKIP to Section II

Ask item 14c and enter all vehicle types. Then complete 14d through n for the first vehicle before recording the information for the second vehicle, etc.

b. Vehicle Number	c. What type(s) of vehicle is it (use codes below) 1 Automobile 2 Station wagon 3 Vanbus/Minibus 4 Other van 5 Pickup 6 Pickup with camper 7 Other truck 8 Motorized camper-coach 9 Taxi 10 Motorcycle 11 Motorized bicycle 12 Other - Specify	Do not ask for motorcycles or motorized bicycles				Who owns the vehicle? (Use codes below) 1 Owned by member of household 2 Company-owned 3 Leased 4 Rented 5 Other - Specify		Ask for household-owned vehicles only (Entry of "1" in column 1) Was it purchased, or received, new or used? Circle 1 - New 2 - Used		What was the date of purchase (or receipt)? (For vehicles purchased within the last 12 months enter MONTH and year. For others, enter year only) (Enter numerals)		Is this vehicle used at least 4 times a month to go to work? Circle 1 - Yes 2 - No - SKIP to 14h		Is it used to go ALL the way to work or PART way? Circle 1 - All the way 2 - Part way		n. About how many miles was this vehicle driven during the last 12 months? (Or from the date of purchase if less than 12 months ago)?
		d. What is the model year?	e. What is the make and model? Example: Dodge, Coronet	f. Does it have automatic transmission? Circle 1 - Yes 2 - No	g. How many cylinders does it have? (Indicate "R" if Rotary)	h. Is it air conditioned? Circle 1 - Yes 2 - No		i. Used	k. Month	l. Year	m. Yes	n. No	o. All	p. Part		
						Yes	No								New	
1								1	2			1	2	1	2	
2								1	2			1	2	1	2	
3								1	2			1	2	1	2	
4								1	2			1	2	1	2	
5								1	2			1	2	1	2	
6								1	2			1	2	1	2	
7								1	2			1	2	1	2	
8								1	2			1	2	1	2	
9								1	2			1	2	1	2	

PGM 3

15. In the last year, what has been the average monthly expense for gasoline for all vehicles owned or leased by this household?

\$ 40 monthly
 Don't know

Section II - AVAILABILITY OF PUBLIC TRANSPORTATION

READ - Now I would like to ask about transportation in the area.

16. Is public transportation, other than taxis, available within 2 miles of your home?

- 402 1 Yes
 2 No
 x Don't know } SKIP to 18

17a. How far from your home is the NEAREST public transportation stop - (other than taxis)?

- 403 1 Less than 3 blocks (Less than 1/4 mile)
 2 3-6 blocks (1/4-1/2 mile)
 3 7-12 blocks (More than 1/2 mile, but not more than 1 mile)
 4 13-24 blocks (More than 1, not greater than 2 miles)
 x Don't know - SKIP to 18

b. What type of transportation is it?

- 404 1 Bus
 2 Train
 3 Streetcar
 4 Subway or elevated rail
 5 Other - Specify _____

18. How far is it from your home to the nearest point where you can get on or off a freeway, tollway or expressway?
 (A divided highway which goes under or over all crossing roads and can be entered or left only at selected points by way of a ramp)

- 405 1 Less than 1 mile
 2 1-2 miles
 3 More than 2, less than 5, miles
 4 5 miles or more
 x Don't know

19. For traveling to cities 30 miles or more away, how far is it from your home to the nearest -

a. inter-city bus terminal?

- 406 _____ Miles
 o Less than 1/2 mile
 x Don't know
 999 None available

b. train station?

- 407 _____ Miles
 o Less than 1/2 mile
 x Don't know
 999 None available

c. airport served by scheduled airlines?

- 408 _____ Miles
 o Less than 1/2 mile
 x Don't know
 999 None available

39

~ PGM 5 ~

Section III - OCCUPATION AND TRAVEL TO WORK
ASK all household members 16 years or older

Household member line number

(501)

CHECK
ITEM A

Yes - Transfer the information for 20a-h from CC- Items 22a-h before continuing interview
 No

READ - Now I would like to ask you some questions about your occupation.

20a. What were you doing most of LAST WEEK - (working, keeping house, going to school) or something else?

(502)

- 1 Working - SKIP to 20d
- 2 With a job but not at work - SKIP to 20d
- 3 Looking for work
- 4 Keeping house
- 5 Going to school
- 6 Unable to work - SKIP to Section IV
- 7 Retired
- 8 Other - Specify _____

b. Did you do any work at all LAST WEEK, not counting work around the house?

(503)

- 1 Yes - SKIP to 20d
- 2 No

c. Did you have a job or business from which you were temporarily absent or on layoff last week?

(504)

- 1 Yes
- 2 No - SKIP to Section IV

d. For whom did you work? (For Armed Forces, enter the particular branch)

e. What kind of business or industry is this? (For Armed Forces, enter "Same as above")

(505)

f. What kind of work were you doing? (For example, electrical engineer, stock clerk, typist, farmer, Armed Forces)

NOTE: Single word entries seldom give sufficient description.

(506)

g. What were your most important activities as a (read entry from 20f)? (For example, typing, keeping account books, selling cars, Armed Forces).

h. Were you -

(507)

- 1 An employee of a PRIVATE company, business, or individual for wages, salary, or commissions?
- 2 A GOVERNMENT employee (Federal, State, county, or local)?
- SELF-EMPLOYED in OWN business, professional practice or farm?
(Mark "No," for farmers without asking)
- Is it incorporated?
3 Yes
4 No
- 5 Working WITHOUT PAY in family business or farm?

21. What is your principal means of transportation to work?

(Enter code from NTS-6, page 8)

(508)

← Enter code

Other - Specify _____

99 Work at home - SKIP to Section IV

CHECK
ITEM B

Yes - SKIP to Sec
 No

07

22a. Is this a regular arrangement of 2 or more persons traveling to work together - (carpool)?		(509) <input type="checkbox"/> No - SKIP to 23 YES - How many persons, including you? _____ Persons
b. How many of these persons are members of this household? (Include the respondent)		(510) _____ Household members
c. Do you share driving, drive others only or ride only?		(511) <input type="checkbox"/> Share driving <input type="checkbox"/> Drive others only <input type="checkbox"/> Ride only } SKIP to 24a
23. What is your main reason for not riding in a carpool?		(512) <input type="checkbox"/> 01 Irregular or unusual work hours <input type="checkbox"/> 02 Irregular work location <input type="checkbox"/> 03 Need car for work or errands <input type="checkbox"/> 04 It is out of my way to pick people up <input type="checkbox"/> 05 Riders are not dependable and require extra waiting <input type="checkbox"/> 06 Prefer to have car available for emergencies and occasional overtime or errands <input type="checkbox"/> 07 Like privacy <input type="checkbox"/> 08 Don't know of anyone to ride with <input type="checkbox"/> 09 Don't trust others' driving <input type="checkbox"/> 10 Just don't want to call others about carpooling <input type="checkbox"/> 11 Other - Specify _____
24a. In the last year have you changed your principal means of transportation to work?		(513) <input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No - SKIP to 27 <input type="checkbox"/> 3 Did not work last year - SKIP to 27 <input type="checkbox"/> 4 Worked at home last year - SKIP to 27
b. What was your reason for changing? Any other reason? (Mark ALL that apply)		(514) <input type="checkbox"/> 1 Change of residence <input type="checkbox"/> 2 Change of job location <input type="checkbox"/> 3 Previous means unsatisfactory <input type="checkbox"/> 4 Previous means no longer available <input type="checkbox"/> 5 Public transportation has become available <input type="checkbox"/> 6 Other - Specify _____
25. What was the principal means of transportation to work before this change? (Enter code from NTS-6, page 8)		(515) <input type="text"/> <input type="text"/> ← Enter code Other - Specify _____
CHECK ITEM C	Is one of the codes 01-07 entered in 25 above?	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 27
26a. Was this a regular arrangement of 2 or more persons traveling to work together - (carpool)?		(516) <input type="checkbox"/> No - SKIP to 27 YES - How many persons, including you? _____ Persons
b. How many of these persons were members of this household? (Include the respondent)		(517) _____ Household members
c. Did you share driving, drive others only or ride only?		(518) <input type="checkbox"/> 1 Share driving <input type="checkbox"/> 2 Drive others only <input type="checkbox"/> 3 Ride only
27. What is the one-way distance from your home to your present place of work?		(519) _____ Miles <input type="checkbox"/> 0 Less than 1/2 mile <input type="checkbox"/> 99 No fixed place - SKIP to Section IV
28. How long does it usually take you to get from home to work?		(520) _____ Minutes

Section IV - DRIVER INFORMATION Ask all household members 16 years or older.		Household member line number
<i>(If respondent has already indicated that he drives, verify and mark appropriate box)</i>		
29a. Are you a licensed driver?		(521) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to Section V
b. About how many thousands of miles did you, personally, drive during the last 12 months, including miles driven as part of your work?		(522) _____ Miles
CHECK ITEM D	Is there an entry in item 21 for this respondent (to indicate that he has a job)?	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to Section V
30a. As an essential part of your work do you drive a motorized vehicle, such as a car, bus, van, truck, taxi or motorcycle?		(523) 0 <input type="checkbox"/> No - SKIP to Section V YES - Which type of vehicle? <i>(Enter code from NTS-R, page B)</i> _____
SHOW CALENDAR		
b. Did you drive this vehicle as part of your work on (Travel Day)?		(524) 0 <input type="checkbox"/> No YES - About how many miles? _____ Miles
c. Approximately how many miles do you drive on an average work day, not counting driving to and from your place of work?		(525) _____ Miles
d. On the average, how many days a week do you drive as part of your work?		(526) _____ Days a week
e. You said you drove _____ miles (entry in 30b) as part of your work on (Travel Day). How many work-related stops did you make?		(527) _____ Stops <i>(Each of these stops is a trip)</i>
f. What was the longest distance you traveled between 2 consecutive work-related stops?		(528) _____ miles 0 <input type="checkbox"/> Less than 1/2 mile
CHECK ITEM D-1	Is one of the codes 01-07 or 14 entered in 30a?	<input type="checkbox"/> No - SKIP to the Introduction marked READ above item 31 <input type="checkbox"/> YES

CHECK ITEM D-2	Is the entry in 30e 4 stops or less?	<input type="checkbox"/> Yes - Complete Part A of the NTS-2A for each of these trips when you complete the NTS-2A for this respondent. Now SKIP to the Introduction marked READ, above item 31 <input type="checkbox"/> No
SHOW MAP 30g. You said you traveled _____ miles (entry in 30b) as part of your job on (Travel Day). Was all this travel within the area on this map?		529 1 <input type="checkbox"/> No - SKIP to the Introduction marked READ, above item 31 2 <input type="checkbox"/> Yes
CHECK ITEM D-3	Does the PSU urban/rural map for this household have an urban/rural boundary(ies) marked on it?	530 1 <input type="checkbox"/> No - SKIP to the Introduction marked READ, above item 31 2 <input type="checkbox"/> Yes - Show map to the respondent and ask 30h
h. About how many of these miles were within the URBAN boundary(ies) shown on this map?		531 _____ Miles
READ - Now I would like to ask about any OTHER trips you took that ended on (Travel Day). A trip is anytime you went from one address to another by car or bus, by walking or bicycling or by some other means. For example, your trip from home to your place of work would be one trip, a side-trip made during work hours would be a second trip, driving or walking to lunch would be a third trip, a trip made after work would be a fourth trip, and so on.		
NOTE: Reference period is from 4:00 a.m. on Travel Day to 3:59 a.m. the following day.		
4.3	31. Did you make any trips, other than those already reported, on (Travel Day)?	532 1 <input type="checkbox"/> Yes - SKIP to item 32b 2 <input type="checkbox"/> No - SKIP to Section VI
NOTES		533 _____ 534 _____ 535 _____

Section V - TRAVEL DAY

Household member
line number

Ask of all household members 14 years and over. For persons 5-13 years of age, ask household respondent and enter the line number of the person for whom information is being obtained.

INTERVIEWER INSTRUCTION
Reference day is from 4:00 a.m. to 3:59 a.m. the following day.
Include as trips all walking or bicycling where the destination and origin are not the same address. Do NOT include these as trips for persons under 14 years of age.

READ - Now I have some questions about all trips taken or ending on (Travel Day). A trip is anytime you went from one address to another by car or bus, by walking or bicycling or by some other means. For example, driving a car from your home to work would be one trip, walking from work to lunch would be a second trip, walking back from lunch to work would be a third trip, etc.

	Enter trip number			
	(601)	(601)	(601)	(601)
	TRIP	TRIP	TRIP	TRIP
32a. Did you go any place on (Travel Day)?	(601) <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to Section VI			
b. Where did you go first?				
33a. Did this trip begin at home?	(603) 1 <input type="checkbox"/> Yes - SKIP to 34 2 <input type="checkbox"/> No			
b. What was your main reason for being away from home when you began this trip? (Enter code from NTS-6, page 11)	(604) <input type="checkbox"/> Enter code If "Other" - Specify			
c. In what city, or place, and State was this?	(605) <input type="checkbox"/> City <input type="checkbox"/> State			
34. What time did you start your trip to _____?	(606) _____ a.m. (607) _____ p.m.	(606) _____ a.m. (607) _____ p.m.	(606) _____ a.m. (607) _____ p.m.	(606) _____ a.m. (607) _____ p.m.
35. What was the main reason for the trip? (Enter code from NTS-6, page 11)	(608) <input type="checkbox"/> Enter code If "Other" - Specify	(608) <input type="checkbox"/> Enter code If "Other" - Specify	(608) <input type="checkbox"/> Enter code If "Other" - Specify	(608) <input type="checkbox"/> Enter code If "Other" - Specify

NOTE TO INTERVIEWER - Circled items may be verified for return trips to avoid repetition.

<p>36. Did anyone else living in this household go on the trip? <i>(List line numbers of other household members who went on the trip.)</i></p>	<p>609 <input type="checkbox"/> No others YES - Who? Enter line numbers</p> <p>610 _____ 611 _____ 612 _____ 613 _____ 614 _____ 615 _____</p>	<p>609 <input type="checkbox"/> No others YES - Who? Enter line numbers</p> <p>610 _____ 611 _____ 612 _____ 613 _____ 614 _____ 615 _____</p>	<p>609 <input type="checkbox"/> No others YES - Who? Enter line numbers</p> <p>610 _____ 611 _____ 612 _____ 613 _____ 614 _____ 615 _____</p>	<p>609 <input type="checkbox"/> No others YES - Who? Enter line numbers</p> <p>610 _____ 611 _____ 612 _____ 613 _____ 614 _____ 615 _____</p>	<p>609 <input type="checkbox"/> No others YES - Who? Enter line numbers</p> <p>610 _____ 611 _____ 612 _____ 613 _____ 614 _____ 615 _____</p>	<p>609 <input type="checkbox"/> No others YES - Who? Enter line numbers</p> <p>610 _____ 611 _____ 612 _____ 613 _____ 614 _____ 615 _____</p>
<p>37. What was the total distance from where you started to (destination)?</p>	<p>622 _____ Miles <input type="checkbox"/> Less than 1/2 mile</p>	<p>622 _____ Miles <input type="checkbox"/> Less than 1/2 mile</p>	<p>622 _____ Miles <input type="checkbox"/> Less than 1/2 mile</p>	<p>622 _____ Miles <input type="checkbox"/> Less than 1/2 mile</p>	<p>622 _____ Miles <input type="checkbox"/> Less than 1/2 mile</p>	<p>622 _____ Miles <input type="checkbox"/> Less than 1/2 mile</p>
<p>38. Approximately how long did it take to get there?</p>	<p>623 _____ Minutes</p>	<p>623 _____ Minutes</p>	<p>623 _____ Minutes</p>	<p>623 _____ Minutes</p>	<p>623 _____ Minutes</p>	<p>623 _____ Minutes</p>
<p>39. What was the main means of transportation used for this trip? <i>(Enter code from NTS-6, page 8)</i></p>	<p>624 _____ Enter code If "Other" - Specify</p>	<p>624 _____ Enter code If "Other" - Specify</p>	<p>624 _____ Enter code If "Other" - Specify</p>	<p>624 _____ Enter code If "Other" - Specify</p>	<p>624 _____ Enter code If "Other" - Specify</p>	<p>624 _____ Enter code If "Other" - Specify</p>
<p>CHECK ITEM E Refer to item 39 One of the codes 01-07 is entered One of the codes 08-13 is entered One of the codes 14-19 is entered</p>	<p>ASK 40a SKIP to 46 SKIP to 45a</p>	<p>ASK 40a SKIP to 46 SKIP to 45a</p>	<p>ASK 40a SKIP to 46 SKIP to 45a</p>	<p>ASK 40a SKIP to 46 SKIP to 45a</p>	<p>ASK 40a SKIP to 46 SKIP to 45a</p>	<p>ASK 40a SKIP to 46 SKIP to 45a</p>
<p>40a. Was a household vehicle used for this trip? <i>(Do not ask if no vehicles were reported for this household. Mark No.)</i></p>	<p>625 <input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 41</p>	<p>625 <input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 41</p>	<p>625 <input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 41</p>	<p>625 <input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 41</p>	<p>625 <input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 41</p>	<p>625 <input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 41</p>
<p>40b. Which vehicle? <i>(Ask only if more than 1 vehicle was reported for this household. If only 1 vehicle enter "1" without asking.)</i></p>	<p>626 _____ Vehicle number</p>	<p>626 _____ Vehicle number</p>	<p>626 _____ Vehicle number</p>	<p>626 _____ Vehicle number</p>	<p>626 _____ Vehicle number</p>	<p>626 _____ Vehicle number</p>
<p>41. Were there any non-household members on the trip?</p>	<p>627 <input type="checkbox"/> No YES - How many?</p>	<p>627 <input type="checkbox"/> No YES - How many?</p>	<p>627 <input type="checkbox"/> No YES - How many?</p>	<p>627 <input type="checkbox"/> No YES - How many?</p>	<p>627 <input type="checkbox"/> No YES - How many?</p>	<p>627 <input type="checkbox"/> No YES - How many?</p>
<p>42. Total number of ALL persons in the vehicle. <i>(Interviewer - Verify that the sum of entries in items 36 and 41, plus the respondent was the total number of persons.)</i></p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>
<p>43. Who was the driver on the trip? <i>(Ask only if the respondent was not alone in the vehicle.)</i></p>	<p>629 <input type="checkbox"/> Not a household member Household member - Line No. _____</p>	<p>629 <input type="checkbox"/> Not a household member Household member - Line No. _____</p>	<p>629 <input type="checkbox"/> Not a household member Household member - Line No. _____</p>	<p>629 <input type="checkbox"/> Not a household member Household member - Line No. _____</p>	<p>629 <input type="checkbox"/> Not a household member Household member - Line No. _____</p>	<p>629 <input type="checkbox"/> Not a household member Household member - Line No. _____</p>

Section V - TRAVEL DAY - Continued

Household member line number

		Enter trip number													
		PGM 7 ↓	TRIP		TRIP		TRIP		TRIP		TRIP		TRIP		
CHECK ITEM F	Refer to item 37. Is the distance 25 miles or more?	(701)	(701)	(701)	(701)	(701)	(701)	(701)	(701)	(701)	(701)	(701)	(701)	(701)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 44a	
43b.	Did anyone share the driving? <i>(Enter the line number(s) of household member(s).)</i>	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	(702) <input type="checkbox"/> No YES - What percent of the driving? Who?	
		(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %	(703) _____ (704) _____ % (705) _____ (706) _____ % (707) _____ (708) _____ % (709) _____ (710) _____ % (711) _____ (712) _____ % (713) <input type="checkbox"/> Non-household member(s) (714) _____ %
44a.	Where did you park when you got to destination? <i>(Enter code from NTS-6, page 13)</i> Codes 5-7 - SKIP to 44c Codes 8-11 - SKIP to 45a	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	(715) [] [] ← Enter code "Other" - Specify	
b.	Was the reason you were able to park there because of: carpool membership, minimum purchase, physical disability, job status, or another similar reason?	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	(716) <input type="checkbox"/> No 1 <input type="checkbox"/> Carpool 2 <input type="checkbox"/> Minimum purchase 3 <input type="checkbox"/> Physical disability 4 <input type="checkbox"/> Job status 5 <input type="checkbox"/> Other - Specify	

46

<p>44c. Was parking free?</p> <p>717 <input type="checkbox"/> Yes - SKIP to 45a NO - How much did it cost? (Enter total amount)</p> <p>718 \$ _____</p> <p>719 <input type="checkbox"/> Don't know 9 <input type="checkbox"/> Fee previously reported - SKIP to 45a</p>	<p>717 <input type="checkbox"/> Yes - SKIP to 45a NO - How much did it cost? (Enter total amount)</p> <p>718 \$ _____</p> <p>719 <input type="checkbox"/> Don't know 9 <input type="checkbox"/> Fee previously reported - SKIP to 45a</p>	<p>717 <input type="checkbox"/> Yes - SKIP to 45a NO - How much did it cost? (Enter total amount)</p> <p>718 \$ _____</p> <p>719 <input type="checkbox"/> Don't know 9 <input type="checkbox"/> Fee previously reported - SKIP to 45a</p>	<p>717 <input type="checkbox"/> Yes - SKIP to 45a NO - How much did it cost? (Enter total amount)</p> <p>718 \$ _____</p> <p>719 <input type="checkbox"/> Don't know 9 <input type="checkbox"/> Fee previously reported - SKIP to 45a</p>	<p>720 _____ Minute(s) 721 _____ Hour(s) 722 _____ Day(s) 723 _____ Week(s) 724 _____ Month(s) 725 <input type="checkbox"/> Don't know</p>	<p>720 _____ Minute(s) 721 _____ Hour(s) 722 _____ Day(s) 723 _____ Week(s) 724 _____ Month(s) 725 <input type="checkbox"/> Don't know</p>	<p>720 _____ Minute(s) 721 _____ Hour(s) 722 _____ Day(s) 723 _____ Week(s) 724 _____ Month(s) 725 <input type="checkbox"/> Don't know</p>	<p>720 _____ Minute(s) 721 _____ Hour(s) 722 _____ Day(s) 723 _____ Week(s) 724 _____ Month(s) 725 <input type="checkbox"/> Don't know</p>	<p>726 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know } SKIP to 47</p>	<p>726 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know } SKIP to 47</p>	<p>726 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know } SKIP to 47</p>	<p>726 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know } SKIP to 47</p>	<p>727 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to 47</p>	<p>727 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to 47</p>	<p>727 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to 47</p>	<p>727 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to 47</p>	<p>728 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to 47</p>	<p>728 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to 47</p>	<p>728 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to 47</p>	<p>728 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to 47</p>	<p>729 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>729 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>729 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>729 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>
<p>d. What time period did the cost of parking cover? (Enter the number of minutes, hours, days, etc.) (Make only one entry)</p>	<p>720 _____ Minute(s) 721 _____ Hour(s) 722 _____ Day(s) 723 _____ Week(s) 724 _____ Month(s) 725 <input type="checkbox"/> Don't know</p>	<p>726 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know } SKIP to 47</p>	<p>727 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to 47</p>	<p>728 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to 47</p>	<p>729 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>Return to Item 34 Nowhere else - ASK 48</p>	<p>45a. Was public transportation, other than taxis, available for the trip within 1/2 mile from where you started and also from where you were going?</p>	<p>726 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know } SKIP to 47</p>	<p>727 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - SKIP to 47</p>	<p>728 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to 47</p>	<p>729 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>Return to Item 34 Nowhere else - ASK 48</p>	<p>46. If you had driven and not used public transportation, would parking have been free?</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>Return to Item 34 Nowhere else - ASK 48</p>					
<p>47. Where did you go next?</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>730 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x <input type="checkbox"/> Don't know</p>	<p>Return to Item 34 Nowhere else - ASK 48</p>	<p>ASK only if CBD is marked on map SHOW MAP (Ask this question for EACH trip that has been recorded above and mark a box in EACH trip column.) 48. Was any part of your trip to (destination) within the Central Business District outlined on this map?</p>																	

Section V - TRAVEL DAY - Continued

Household member
line number

CHECK
ITEM G

Was public transportation used on any of these trips?
Refer to item 39 for each trip recorded.
Is one of the codes 08-13 entered?

- Yes
 No - SKIP to 50

49a. You used public transportation on (some of) these trips. What were your reasons for using it?

Any other reason?

(Mark ALL that apply)

- (801) *
1 No driver's license
2 No car available
3 Cheaper than auto
4 No parking problems
5 No driving strain
6 Faster than auto
7 Other - Specify _____

b. Could you have made these trips without using public transportation?

- (802) 1 Yes } SKIP to Section VI
2 No }

50. You did not use public transportation on any of these trips. What were your reasons for not using it?

Any other reasons?

(Mark ALL that apply)

- (803) *
11 None available
12 Schedule is inconvenient
13 Location is inconvenient
14 Too many transfers
15 Too expensive
16 Takes too long
17 Preferred to use car
18 Need auto for work
19 Had too much to carry
20 Physical and/or mental impairment
21 Not familiar with transit system
22 Wasn't traveling far enough
23 Other - Specify _____

INTERVIEWER: Enter total number of Travel Day trips reported by this respondent. →

(804) _____ Trips

Section VI - 14-DAY TRAVEL PERIOD
Part A - DETAILED REPORT OF TRIPS

Household member
line number

CHECK
ITEM H

Did you take any trips of 75 miles or more (one-way distance) that ended in the month of the 14-Day Travel Period?

Yes - Read Introduction A

No - Read Introduction B

INTRODUCTION A

READ - Now I would like to ask you about any trips of 75 miles or more you may have taken that ended during the period from _____ to _____ (14-Day Travel Period). Trips refer to one-way travel where the destination is 75 miles or more from the starting point. The destination is the farthest point of travel. Do not forget to include trips that you may have reported earlier in the interview that ended during this period. The questions I am going to ask now refer to one-way distances so your responses may differ from those you have already given.

INTRODUCTION B

READ - Now I would like to ask you about any trips of 75 miles or more you may have taken that ended during the period from _____ to _____ (14-Day Travel Period). Trips refer to one-way travel where the destination is 75 miles or more from the starting point. The destination is the farthest point of travel.
ASK Item 51.

SHOW CALENDAR

51. Did you take any trips of 75 miles or more (one-way distance) that ended during this 14-day period? _____

Yes - How many trips?

(805) _____ (One-way) trips - SKIP to 52

No
 Don't know

CHECK
ITEM I

Did you own or lease any motor vehicles? (Codes 91-97)

Yes - Check trip numbers 911-914.
 No - Interview next household member.
If last household member, END INTERVIEW.

PGM 9

Enter trip number

52. What was the destination of your (1st, next, . . . etc.) trip?

TRIP	TRIP	TRIP	TRIP	TRIP	TRIP
901 _____	901 _____	901 _____	901 _____	901 _____	901 _____
902 _____	902 _____	902 _____	902 _____	902 _____	902 _____
City _____ State _____	City _____ State _____	City _____ State _____	City _____ State _____	City _____ State _____	City _____ State _____

53. Did anyone else living in this household go on this trip?

(List the line numbers of household members who went on the trip.)

903 <input type="checkbox"/> No others YES - Who? Line numbers -	903 <input type="checkbox"/> No others YES - Who? Line numbers -	903 <input type="checkbox"/> No others YES - Who? Line numbers -	903 <input type="checkbox"/> No others YES - Who? Line numbers -	903 <input type="checkbox"/> No others YES - Who? Line numbers -	903 <input type="checkbox"/> No others YES - Who? Line numbers -
904 _____ 910 _____	904 _____ 910 _____	904 _____ 910 _____	904 _____ 910 _____	904 _____ 910 _____	904 _____ 910 _____
905 _____ 911 _____	905 _____ 911 _____	905 _____ 911 _____	905 _____ 911 _____	905 _____ 911 _____	905 _____ 911 _____
906 _____ 912 _____	906 _____ 912 _____	906 _____ 912 _____	906 _____ 912 _____	906 _____ 912 _____	906 _____ 912 _____
907 _____ 913 _____	907 _____ 913 _____	907 _____ 913 _____	907 _____ 913 _____	907 _____ 913 _____	907 _____ 913 _____
908 _____ 914 _____	908 _____ 914 _____	908 _____ 914 _____	908 _____ 914 _____	908 _____ 914 _____	908 _____ 914 _____
909 _____ 915 _____	909 _____ 915 _____	909 _____ 915 _____	909 _____ 915 _____	909 _____ 915 _____	909 _____ 915 _____

REL REL REL REL REL REL

Section VI - 14-DAY TRAVEL PERIOD - Continued		Household member first number				
		PGM 9 ↓	RCD Y	RCD T	RCD Y	RCD T
		Enter trip number				
		TRIP	TRIP	TRIP	TRIP	TRIP
		916	916	916	916	916
		917	917	917	917	917
		918	918	918	918	918
		919	919	919	919	919
		920	920	920	920	920
		921	921	921	921	921
		922	922	922	922	922
54. What was the main purpose for the trip? <small>(Enter code from NTS-6, page 11)</small>						
55. Was this a weekend (or long weekend) trip?						
56. Did you start the trip from this address?						
57. Did you spend any nights away from home enroute to (destination)?						
CHECK ITEM 1						
58a. How many nights did you spend at your destination?						

<p>58b. What type(s) of lodging did you stay in at your destination? (Mark ALL that apply)</p>	<p>923 * <input type="checkbox"/> With friends or relatives <input type="checkbox"/> Rental accommodations <input type="checkbox"/> Own cabin, campsite, vacation home <input type="checkbox"/> Camping in public (gov't) campground <input type="checkbox"/> Camping in commercial campground <input type="checkbox"/> Other - Specify</p>	<p>923 * <input type="checkbox"/> With friends or relatives <input type="checkbox"/> Rental accommodations <input type="checkbox"/> Own cabin, campsite, vacation home <input type="checkbox"/> Camping in public (gov't) campground <input type="checkbox"/> Camping in commercial campground <input type="checkbox"/> Other - Specify</p>	<p>923 * <input type="checkbox"/> With friends or relatives <input type="checkbox"/> Rental accommodations <input type="checkbox"/> Own cabin, campsite, vacation home <input type="checkbox"/> Camping in public (gov't) campground <input type="checkbox"/> Camping in commercial campground <input type="checkbox"/> Other - Specify</p>	<p>923 * <input type="checkbox"/> With friends or relatives <input type="checkbox"/> Rental accommodations <input type="checkbox"/> Own cabin, campsite, vacation home <input type="checkbox"/> Camping in public (gov't) campground <input type="checkbox"/> Camping in commercial campground <input type="checkbox"/> Other - Specify</p>	<p>923 * <input type="checkbox"/> With friends or relatives <input type="checkbox"/> Rental accommodations <input type="checkbox"/> Own cabin, campsite, vacation home <input type="checkbox"/> Camping in public (gov't) campground <input type="checkbox"/> Camping in commercial campground <input type="checkbox"/> Other - Specify</p>	<p>923 * <input type="checkbox"/> With friends or relatives <input type="checkbox"/> Rental accommodations <input type="checkbox"/> Own cabin, campsite, vacation home <input type="checkbox"/> Camping in public (gov't) campground <input type="checkbox"/> Camping in commercial campground <input type="checkbox"/> Other - Specify</p>
<p>c. How many nights did you spend in each type of lodging?</p>	<p>Number of nights 924 ___ Friends or relatives 925 ___ Rent. accom. 926 ___ Cabin, campsite, vacation home 927 ___ Camp. in public (gov't) campground 928 ___ Camp. in comm. campground 929 ___ Other</p>	<p>Number of nights 924 ___ Friends or relatives 925 ___ Rent. accom. 926 ___ Cabin, campsite, vacation home 927 ___ Camp. in public (gov't) campground 928 ___ Camp. in comm. campground 929 ___ Other</p>	<p>Number of nights 924 ___ Friends or relatives 925 ___ Rent. accom. 926 ___ Cabin, campsite, vacation home 927 ___ Camp. in public (gov't) campground 928 ___ Camp. in comm. campground 929 ___ Other</p>	<p>Number of nights 924 ___ Friends or relatives 925 ___ Rent. accom. 926 ___ Cabin, campsite, vacation home 927 ___ Camp. in public (gov't) campground 928 ___ Camp. in comm. campground 929 ___ Other</p>	<p>Number of nights 924 ___ Friends or relatives 925 ___ Rent. accom. 926 ___ Cabin, campsite, vacation home 927 ___ Camp. in public (gov't) campground 928 ___ Camp. in comm. campground 929 ___ Other</p>	<p>Number of nights 924 ___ Friends or relatives 925 ___ Rent. accom. 926 ___ Cabin, campsite, vacation home 927 ___ Camp. in public (gov't) campground 928 ___ Camp. in comm. campground 929 ___ Other</p>
<p>SHOW CALENDAR 59. What day of the month did the trip begin? (Enter in numerals the month and date) INTERVIEWER - Refer to calendar and enter the day of the week without asking.</p>	<p>Month _____ Date _____ 930 _____ 931 _____</p>	<p>Month _____ Date _____ 930 _____ 931 _____</p>	<p>Month _____ Date _____ 930 _____ 931 _____</p>	<p>Month _____ Date _____ 930 _____ 931 _____</p>	<p>Month _____ Date _____ 930 _____ 931 _____</p>	<p>Month _____ Date _____ 930 _____ 931 _____</p>
<p>60. What time did the trip begin?</p>	<p>932 ___ : ___ a.m. 933 ___ : ___ p.m. x <input type="checkbox"/> Don't know</p>	<p>932 ___ : ___ a.m. 933 ___ : ___ p.m. x <input type="checkbox"/> Don't know</p>	<p>932 ___ : ___ a.m. 933 ___ : ___ p.m. x <input type="checkbox"/> Don't know</p>	<p>932 ___ : ___ a.m. 933 ___ : ___ p.m. x <input type="checkbox"/> Don't know</p>	<p>932 ___ : ___ a.m. 933 ___ : ___ p.m. x <input type="checkbox"/> Don't know</p>	<p>932 ___ : ___ a.m. 933 ___ : ___ p.m. x <input type="checkbox"/> Don't know</p>
<p>61a. Do you know the EXACT distance from where you started to (destination)?</p>	<p>934 <input type="checkbox"/> No YES - How many miles? _____ Miles - SKIP to 62</p>	<p>934 <input type="checkbox"/> No YES - How many miles? _____ Miles - SKIP to 62</p>	<p>934 <input type="checkbox"/> No YES - How many miles? _____ Miles - SKIP to 62</p>	<p>934 <input type="checkbox"/> No YES - How many miles? _____ Miles - SKIP to 62</p>	<p>934 <input type="checkbox"/> No YES - How many miles? _____ Miles - SKIP to 62</p>	<p>934 <input type="checkbox"/> No YES - How many miles? _____ Miles - SKIP to 62</p>
<p>61b. APPROXIMATELY how many miles was it?</p>	<p>935 _____ Miles</p>	<p>935 _____ Miles</p>	<p>935 _____ Miles</p>	<p>935 _____ Miles</p>	<p>935 _____ Miles</p>	<p>935 _____ Miles</p>

Section VI - 14-DAY TRAVEL PERIOD - Continued		2 RCD T	2 RCD T	2 RCD T	2 RCD T	2 RCD T	2 RCD T	Household member line number
		TRIP	TRIP	TRIP	TRIP	TRIP	TRIP	
		936	936	936	936	936	936	
		937	937	937	937	937	937	
		"Other" - Specify	"Other" - Specify	"Other" - Specify	"Other" - Specify	"Other" - Specify	"Other" - Specify	
62. What was the main means of transportation used for the trip? (The means used to travel the longest distance) (Enter code from NTS-6, page B)								
CHECK ITEM K Is use of this vehicle reported in item 14a for this household?								
63a. Was a household vehicle used?								
ASK only if more than 1 vehicle was reported in item 14a for this household								
b. Which vehicle?								
64. Were any non-household members in the vehicle?								
65. Total number of persons in the vehicle - INTERVIEWER - Verify that the sum of the numbers entered in items 936 and 941 plus the respondent is the total number of persons that were in the vehicle.								
66a. Who was the principal driver for the trip? (The trip who drove for the longest distance)								
b. Did anyone share the driving?								

<p>67a. Was a rental vehicle used during this trip?</p>	<p>956 <input type="checkbox"/> No - SKIP to 68 YES - For how many miles? _____ Miles</p>	<p>956 <input type="checkbox"/> No - SKIP to 68 YES - For how many miles? _____ Miles</p>	<p>956 <input type="checkbox"/> No - SKIP to 68 YES - For how many miles? _____ Miles</p>	<p>956 <input type="checkbox"/> No - SKIP to 68 YES - For how many miles? _____ Miles</p>	<p>956 <input type="checkbox"/> No - SKIP to 68 YES - For how many miles? _____ Miles</p>	<p>956 <input type="checkbox"/> No - SKIP to 68 YES - For how many miles? _____ Miles</p>
<p>b. Was this an auto or a truck or some other type of vehicle?</p>	<p>957 <input type="checkbox"/> 1 Auto <input type="checkbox"/> 2 Truck <input type="checkbox"/> 3 Other - Specify _____</p>	<p>957 <input type="checkbox"/> 1 Auto <input type="checkbox"/> 2 Truck <input type="checkbox"/> 3 Other - Specify _____</p>	<p>957 <input type="checkbox"/> 1 Auto <input type="checkbox"/> 2 Truck <input type="checkbox"/> 3 Other - Specify _____</p>	<p>957 <input type="checkbox"/> 1 Auto <input type="checkbox"/> 2 Truck <input type="checkbox"/> 3 Other - Specify _____</p>	<p>957 <input type="checkbox"/> 1 Auto <input type="checkbox"/> 2 Truck <input type="checkbox"/> 3 Other - Specify _____</p>	<p>957 <input type="checkbox"/> 1 Auto <input type="checkbox"/> 2 Truck <input type="checkbox"/> 3 Other - Specify _____</p>
<p>68. Did you make any stops other than for gasoline, rest and food? <i>(include stops for lodging, change of transportation means, sightseeing, visiting friends and relatives, business, etc.)</i></p>	<p>958 <input type="checkbox"/> No YES - How many? _____ Stops</p>	<p>958 <input type="checkbox"/> No YES - How many? _____ Stops</p>	<p>958 <input type="checkbox"/> No YES - How many? _____ Stops</p>	<p>958 <input type="checkbox"/> No YES - How many? _____ Stops</p>	<p>958 <input type="checkbox"/> No YES - How many? _____ Stops</p>	<p>958 <input type="checkbox"/> No YES - How many? _____ Stops</p>
<p>CHECK ITEM L.</p>						
<p>CHECK ITEM M.</p>						
<p>CHECK ITEM N.</p>						
<p>Notes</p>						

Section VI - 14-DAY TRAVEL PERIOD - Continued

Household member line number

Part B - DETAILED REPORT OF STOPS DURING 14-DAY TRAVEL PERIOD

69. Complete columns (a) through (m) for all trips for which stops were reported in item 68.

Table with columns: Trip No., (a) through (m), including fields for stop purpose, location, travel distance, household members, and lodging details.

Trip No.	Stop No.	What was the main purpose of the (1st, 2nd, ...) stop on your trip to (read destination for each trip)? (Enter code from NTS-6, page 7)	Approximately how many miles did you travel for this part of the trip? (Enter miles)	In what City or place, and State was this? (If this information has already been given, verify)	Were any household members on this part of the trip? If "Yes," ASK - Who? (Enter all line numbers, including respondent).		What was the means of transportation for this part of the trip? (Enter code from NTS-6, page 8)	Was this a household vehicle? If "Yes," ASK - Which one? (Enter the number of the vehicle from 1A and SK/P to (j))		Was this a rental vehicle? If "Yes," ASK - Was this a rental vehicle?	Was the driver for this part of the trip a household member? If "Yes," ASK - Who? (Enter line number of household member)		Were any non-household members on this part of the trip? If "Yes," ASK - How many? (Enter number)	What type of lodging did you stay in? (Enter code from NTS-6, page 12)	ASK only if the stop was for lodging - code 19 in column (c) -
					City	State		Line No.	Code		Number	Line No.			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
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				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
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				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
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				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
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				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Yes <input type="checkbox"/> No <input type="checkbox"/>	Line No. _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			
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				City _____ State _____	Yes <input type="checkbox"/> No <input type="checkbox"/>			1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1						

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUSFORM NTS-2A
(4-1-77)

DETAILED PERSONAL INTERVIEW
(Section VII)
NATIONAL TRAVEL SURVEY
1977 CENSUS OF TRANSPORTATION

NOTICE - Your report to the Census Bureau is confidential by law (title 13, U.S. Code). All identifiable information will be used only by persons engaged in and for the purposes of the survey, and may not be disclosed or released to others for any purpose.

b. Questionnaire _____ of _____ questionnaires

Section VII - MAPPING OF PRIVATE MOTOR VEHICLE TRIPS

INTERVIEWER NOTE

PROCEDURE FOR COMPLETING SECTION VII

1. Enter in 70b or 71b the number of the trip that was made by private motor vehicle.
2. Enter the destination of the trip in 70c or 71c.
3. Show map and ask 70a or 71a.
4. Refer to Trip Description Codes *shown to the right* for appropriate code and enter the code in 70d or 71d.
5. If mapping is required, ask respondent to help you map the trip by tracing the routes taken. Label the endpoints of the trip, as described in c. below.

MAPPING INSTRUCTIONS

- a. Use a separate map for each respondent.
 - b. Trace the route carefully. A reader of the map should know exactly the route taken.
 - c. Use the following code to label trips traced on the map:
 - (1) the code for the Section in which the trip was reported (TD for Travel Day; TW for 14-Day Travel Period), followed by
 - (2) the Trip Column number (for example, TD-3; TW-5).
 - d. If the entire trip is on the map and crosses the urban/rural boundary, trace the trip and label both ends.
 - e. If a portion of the trip is off the map, trace the portion that is on the map and label the endpoint which shows on the map.
6. Complete columns e and f if code 4 or 5 is entered in column d.
 7. For return trips ask whether the same route was followed, and if no additional mapping is required, label the endpoints again to indicate the return trip.
 8. Enter in column g the distance of the trip as reported by the respondent on the NTS-2.
 9. Repeat the sequence for the next trip by private motor vehicle.
 10. Enter the Control Number and the Line Number of the respondent in the upper right hand corner of the map. DO NOT write the respondent's name on the map.

TRIP DESCRIPTION CODES

- 1 - Entire trip on map and wholly within URBAN area - NO MAPPING REQUIRED.
- 2 - Entire trip on map and wholly within RURAL area - NO MAPPING REQUIRED.
- 3 - Entire trip on map and crosses the URBAN/RURAL boundary marked on the map - MAP TRIP.
- 4 - A portion of the trip is off the map - MAP THE PORTION WHICH IS ON THE MAP AND COMPLETE column e and column f.
- 5 - Entire trip is off the map - COMPLETE column e and column f.

NPTS Public Use Tape Request

Single copies of the tapes are available through the Federal Highway Administration (FHWA).

For governmental agencies and educational institutions, there no charge for tape copying. If no tapes are furnished with the request, there is a \$25 charge for each tape provided by FHWA.

For private individuals and all nongovernment or noneducation organizations, there is a \$36 charge per tape copied. In addition, if no tapes are forwarded with the request, there is an added charge of \$25 for each tape provided by FHWA.

All tapes provided to FHWA should be 9-track.

Appropriate user documentation will be provided with each request.

All orders should be documented on the attached form and should clearly indicate:

1. Which (or all) of the four (4) quarters of data that are desired.
2. Name and/or title of the individual or organization making the request.
3. Number of tapes, if any, included with the request (or being shipped separately).
4. Amount of payment enclosed if applicable.

All checks or money orders should be made payable to Federal Highway Administration. Request and payment should be forwarded to:

Federal Highway Administration
Highway Statistics Division
HHP-44 (NPTS)
400 Seventh Street, SW
Washington, D.C. 20590

NPTS Public Use Tape Request

1. Data desired

- Tape 1 - First Quarter ()
- Tape 2 - Second Quarter ()
- Tape 3 - Third Quarter ()
- Tape 4 - Fourth Quarter ()
- Tapes 1-4 - All Quarters ()

2. Number of tapes submitted

None (tape payment included) (); 1 tape (); 2 tapes (); 3 tapes (); 4 tapes ()

3. Method of tape submittal

- With order ()
- Under separate cover ()

4. Type of tape labeling desired

- Standard IBM labels ()
- No labels ()

5. Recording density (9-track)

- 800 BPI ()
- 1600 BPI ()

6. Type of organization, Name and Address

- Educational () Government ()
- Private Organization () Private Individual ()
- Other (specify) ()

Name _____

Title _____

Organization _____

Address _____

City, State, Zip _____

7. Total fee enclosed

Tape copy on user furnished tape(s), _____ quarters @ \$36 per quarter \$ _____

Tape copy on FHWA furnished tape(s), _____ quarters @ \$61 per quarter
\$ _____

8. Payment enclosed as

Money order ()

Check ()