

Conducting Counts



prepared by Alta Planning + Design

Items to Bring

- Instructions
- Safety vest
- Location map
- Count forms
- Clipboard
- Pen or pencil and spare
- Watch or timer so you can record 15-minute intervals
- For questions contact _____,
Volunteer Coordinator at (123) 555-1234.
- Optional: hat, sunscreen, jacket, folding chair, snacks

Location Types

■ Screenline



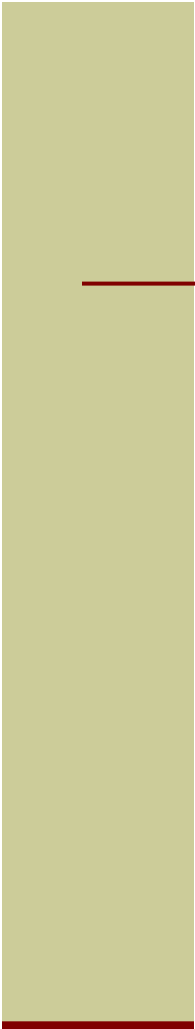
■ ■ ■ ■ ■ Screenline

■ Intersection



Ready

Set



Go!

Data Input

STANDARDIZED SCREENLINE COUNT FORM

Name: _____ Location: _____ # _____
 Date: _____ Time Period: _____ Weather Conditions: _____

Please fill in your name, count location, date, time period, and weather conditions (fair, rainy, very cold).
 Count all bicyclists and pedestrians crossing your screen line under the appropriate categories.

- Count bicyclists who ride on the sidewalk.
- Count the number of people on the bicycle, not the number of bicycles.
- Pedestrians include people in wheelchairs or others using assistive devices, children in strollers, etc.
- People using equipment such as skateboards or rollerblades should be included in the "Other" category.

	Bicycles		Pedestrians		Others
	Female	Male	Female	Male	
00-:15					
15-:30					
30-:45					

- 15 minute intervals
- Count from each direction
- Count by person
- Others include
 - Skateboarders
 - Rollerbladers

Data Input: Intersection Crossing

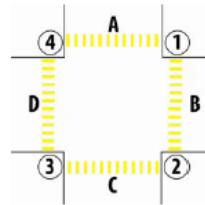
National Bicycle and Pedestrian Documentation Project: Forms

STANDARDIZED BICYCLE INTERSECTION COUNT FORM

Name: _____ Location: _____
 Date: _____ Time Period: _____ Weather: _____

Please fill in your name, count location, date, time period, and weather conditions (fair, rainy, very cold).
 Count all bicyclists crossing your through the intersection under the appropriate categories.

- Count bicyclists who ride on the sidewalk.
- Count the number of people on the bicycle, not the number of bicycles.



Collect turning movements

Treat as 2 locations for submittal to NBPD

Time Period	Bicycle Counts											
	Leaving Leg A			Leaving Leg B			Leaving Leg C			Leaving Leg D		
	A to B	A to C	A to C	B to C	B to D	B to A	C to D	C to A	C to B	D to A	D to B	D to C
00-:15												
15-:30												
30-:45												
45-1:00												
1:00-1:15												
1:15-1:30												
1:30-1:45												
1:45-2:00												
Total												
Total Leg:												
Street Name A to C:	Location 1 (Total Leg A + Total Leg C) =											
Street Name B to D:	Location 2 (Total Leg B + Total Leg D) =											

Subjects



How do you count this?



How do you count this?



5!

How do you count this?



How do you count this?



2!

How do you count this?



How do you count this?



Other!

End of Counts

When you have completed all of your count sessions, please return your count forms to the volunteer coordinator.