

## Part I: Survey

Due: June 20, 2014 by 5pm Attn: Hagu Solomon-Cary Department of City Planning 200 N. Spring Street, 667 Los Angeles 90012

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Please answer the questions in section 1, then skip down to the specific section that best describes your affiliation to Wilmington.

For example if you are a resident, please answer questions in section 1 and 2. If you are both employed and live in the Wilmington Study Area, please answer questions in sections 1, 2 and 4.

This questionnaire is anonymous.

## 1. Everyone:

•	How did you hear about this meeting?  Flyer from Department of City Planning  Community Organization  Neighbor/Friend Facebook Advertisement Other (Specify)
•	What is your affiliation with, or role in, Wilmington?
•	What does the phrase or concept, "Clean Up Green Up" mean to you?
•	From your perspective, what are the most significant health concerns facing the Wilmington community and the people who live and work here?
•	What are the key concerns you have for the Wilmington community as it relates to the environment?

2.



•	What types of industrial and/or commercial businesses do you frequent in the Study Area?
•	Do industrial business within the Study Area employ Wilmington residents?
	Yes NoUnsure
•	Do you know of any residents of Wilmington who work in industrial businesses within the study area?
	Yes No
•	What, if any, impacts do industrial businesses have on residents within the Study Area?
•	Are there any specific issues you think Clean Up Green Up <b>MUST</b> address in the Study Area? If so, please list or describe them below.
•	Other comments:
Rer	nters/Owners/Residents:
•	Do you rent, own, or reside within the Study Area boundary?
	RentOwnShare with another household
•	What do you like most about your neighborhood?
•	What do you like least about your neighborhood?
•	Do you or anyone in your extended family living in Wilmington have any respiratory issues, like asthma, or any other health issues? If yes, and you are comfortable disclosing them,

please specify the health problem(s).



	Yes No
	Specific health problems (optional):
•	What would you like to change with regards to the environment in the area?
•	Other comments:
3. Bus	iness Owners:
•	When did you open for business in Wilmington?
•	Is your business within the Study Area?
	Yes No
•	What type of business do you operate?
•	If you know, is your business in a commercial (C) zone, or in a Manufacturing (M) zone? Commercial (C)Manufacturing (M)
•	What type of business assistance would benefit your business?
•	Have you heard of, or participated in, any business assistance programs sponsored by the City or any other agency? If so, which program(s)?
•	What regulatory challenges do you face in doing business within the Study Area?
•	Other comments:



4. Employees:			
•	Do you work within the Study Area?		
	Yes No		
	If yes, for how long? MonthsYears		
•	In what sector do you work? What type of work do you do?		
•	Do you also live within the Study Area?		
	Yes No		
•	How do you get to work?  Drive Alone Drive with Others/Carpool Bus Train Bicycle Walk Other or combination : Please describe:		
•	Do you work during the day or the night?		

## 5. Students:

• What school do you attend?

• Other comments:



•	Is your school or school yard close to industrial businesses?		
	Yes No		
	If yes, approximately how close?ft		
•	Is your school or school yard next to a freeway?		
	Yes No		
	If yes, approximately how close?ft		
•	Do you have operable windows in your classrooms/labs/workspaces?		
•	If you could change one thing about the environment in Wilmington, what would it be?		
•	Other comments:		
6. Other (visit friends and/or family, recreate, shop, eat, etc)			
•	What brings you to the Wilmington area?		
•	How often do you visit the Wilmington Area?		
•	What is your favorite thing about the area?		
•	What is your least favorite thing about the area?		
•	Other comments?		

## Thank you!



Please turn form into the facilitator at your table.