## Consultation questionnaire

## Marchmont Street proposed pedestrian

 and environmental improvementsPlease complete this questionnaire and return it by Friday 5 November 2010 in the FREEPOST envelope provided. We will only accept ONE reply per household, business or organisation.
You must give us your postal address if you want us to consider your views.

## Please indicate your preference by ticking the appropriate box for each question

1. Overall, do you agree with the principle of improving the streetscape along Marchmont Street?
Yes $\square$

No opinion

2. Do you agree with the proposal to widen the footway on Marchmont Street? (This would require the removal of the existing cycle lane).

> Yes
$\square$ No $\square$ No opinion $\square$
3. Do you agree with the proposal to create a build-out of the kerb on the western footway outside 49 Marchmont Street? - (this will not result in a loss of parking).
Yes $\square \quad$ No $\square \quad$ No opinion $\square$
4. Do you agree with the proposals to allow cyclists to travel northbound from Bernard Street to Coram Street?
Yes $\square \quad$ No $\square \quad$ No opinion $\square$
5. Do you agree with the proposed lengthening of the loading bay and removal of a residents parking bay?


No $\square$
No opinion $\square$
6. Would you prefer the footway to be widened on Marchmont St near the junction with Coram Street by approximately two metres or to build-out the footway by 1.5 metres outside the public house on Coram Street?

Two metre footway widening $\quad \square$ on Marchmont Street near
the junction with Coram Street
1.5 metre build-out of the $\square$

No opinion
 footway outside the public house on Coram Street.

[^0]
## You must give us your postal address if you want us to consider your views

Replies from local groups and associations, statutory groups and emergency services. Please only fill in if you are an official representive (i.e. chairperson, secretary)





Number of members in the group/association: $\square$
 Date of meeting or discussion? $\square \square \square|\square| \square$


Replies from residents, businesses or individuals

| Name: |  |  |  |  |  |  |  |  |  | $\square$ |  | II |  | $\square$ | $\square$ |  |  | $I$ |  |  |  |  |  |  |  | $\square$ |
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| Telephone number: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Address: | $\square$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | - |
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Please also indicate, by ticking one box or more, which of the following best describes you:
$\square$ Resident
$\square$ Business
$\square$ School (e.g. parent, guardian, teacher)

I learnt about this consultation via the Council's website camden.gov.uk/consultations $\square$
My email address is: $\square \square$

Would you like an acknowledgement that your completed questionnaire has been received?

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\square \text { Yes - by post } \quad \square \text { Yes - by email } \quad \square \text { No }
$$

## Office use only

Date received:


Date acknowledgement sent: $\square$ Late acknowledgement sent: Yes / No

Thank you for taking the time to complete this questionnaire. If you require any additional information or would like further explanation, please call Street Policy on 02079745280.

Please note, that in accordance with the Local Government (Access to Information) Act 1985, any questionnaires or correspondence received by the Council as part of this consultation will be available for public inspection and a summary of the report following the consultation will be made available on the Council's website.

Data Protection Act 1998 - All information gathered in this consultation will only be used for the purpose it was collected for.


[^0]:    Your comments (attach a separate sheet if necessary)

