Downham Road

Proposed road safety and public realm improvement scheme

Questionnaire

Please return this questionnaire in the FREEPOST envelope provided or complete online at consultation.hackney.gov.uk by 14 January 2024.

Please review all the information in the consultation document and accompanying plans before completing the questionnaire.

1. What is your postcode? (required)		
2. What is your connection to Hacki	ney?	
Tick all that apply		
I live here	I do the school run here	Other (please state if you wish):
I work here	I visit family and friends here	
I study here	I represent a local group or	
I own α business here	organisation	
I commute through here		
3. Please select which modes of tran	nsport you use to move around in H	lackney.
Walking	Motorcycle	Other (please state if you wish):
Cycling	Taxi	outer (pieuse state ij you wisii).
Car / van	Wheelchair / mobility aid	
Bus	Delivery vehicle	
Train		
4. Our ambition is to create a green public transport and cycle locally, agree or disagree with this aim?	er, healthier Hackney by supportin , and to improve the public realm. T	-
Strongly agree		
Agree		
Disagree		
Strongly disagree		
Not sure		



5. To what extent of this consultation	do you agree or disagree with our proposals for Downham Road as outlined in n?
Strongly agree	
Agree	
Disagree	
Strongly disagree	e
Not sure	
6. If you have any	other comments on our proposals for Downham Road, please provide these here

About you

This information will help us to understand our service users and residents, allowing us to establish if the response to the questionnaire is representative of the borough. All information is used under the strict controls of the 1998 Data Protection Act and the 2016 General Data Protection Regulations (GDPR).

This information is optional and will not be used in a way that identifies you.

7. Gender: Are you		
Male	Non Binary	Prefer not to say
Female	Another term	
If you prefer to use your own term please provide this I	nere:	
8. Age: what is your age group?		
Under 16	45-54	
16-17	55-64	
18-24	65-74	
25-34	75-84	
35-44	85+	
	g-term' negative effect on you	ve a physical or mental impairment or ability to do normal daily activities.
	nily member, partner or friend	ificant proportion of their time who is ill, frail, disabled or has mental inpaid support caring for someone?
Yes No		
11. Ethnicity: Are you		
Asian or Asian British	Mixed background	Other (please state if you wish):
White or White British	Other ethnic group	
Black or Black British		

2. Religion or belief: Are you or do you have					
Atheist/no re Christian Muslim Buddhist	eligious belief	Hindu Secular be Charedi Jewish	eliefs	Sikh Other (please state if you wish):	
13. Sexual orie	entation: Are you				
Heterosexuo	ıl	Pansexua	I	Prefer not to say	
Bisexual		Asexual		Other (please state if you wish):	
Gay man		Queer			
Lesbian or G	ay woman	All other s	exual orientations		
		following bes	Ponted (private)	rship of your home?	
	nt on a mortgage		Rented (private)		
Owned outri			Shared ownership (par	t rent/part buy)	
Rented (Loco	al Authority/Council)		Don't know		
of this page and re	eturn it to the address below.			, address and phone number at the bottom	
				ফান নম্বর লিখুন এবং এটি নীচের ঠিকানায় ফেরত পাঠান৷ (Bengali)	
Si vous désirez conna	aître le contenu de ce document, ve		你的名字、地址和電話號碼並寄到 propriée et indiquer votre nom, adresse	et numéro de téléphone au bas de cette page et la	
,	ndiquée ci-dessous. (French) pizanibin ku ev dokument çi dib	oêje, ji kerema xwe q	utîka minasib işaret bikin, nav, nav	rnîşan û hejmara telefona xwe li jêrê rûpel	
Jeśli chcesz dowie	vnîşana jêrîn re bişînin. (Kurdis dzieć się, jaka jest treść tego o orzeslij na poniższy adres. (Pol	dokumentu, zaznacz	odpowiednie pole, wpisz swoje na	zwisko, adres I nr telefonu w dolnej części	
	lahayd in aad ogaato waxa do aga boggan dhankiisa hoose k			boon, ku qor magacaaga, cinwaanka iyo	
	que trata este documento, marque		, ,	ero de teléfono al final de esta página y envíela a la	
	anlatıldığını öğrenmek istiyors ğıdaki adrese gönderin. (Turki		tuyu işaretleyerek, adınızı, adresir	iizi ve telefon numaranızı bu sayfanın alt	
				اگر آپ یه جاننا چاهتے هیں که دستاویز میں کیا لکھاھےتو ازراہ کرم منا và gửí lại theo địa chỉ đưới đây. (Vietnamese)	
If you would like thi address below.	is document in any of the follow	wing formats or in an	other language not listed above, p	lease complete and send the form to the	
In large print	☐ In Braille ☐	On Disk	On audio tape In another I	anguage, please state:	
Name:					
Address					

Return to: FREEPOST STREETSCENE

Telephone: