

**INSKIP PARK PUBLIC SURVEY**

**AUGUST 13, 2009**



City of Knoxville Parks and Recreation Department  
Carol R. Johnson Associates, Inc.



Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone/Email: \_\_\_\_\_

**INSTRUCTIONS:** Please answer the following questions as best you can. Feel free to attach additional pages for your answers if necessary. Completed surveys should be returned by **August 27<sup>th</sup>** to:

City of Knoxville Parks and Recreation Department  
Attn: Joe Walsh  
Room 303 City County Building  
400 Main St.  
Knoxville, TN 37902

**Thank you** for your interest and participation.

1. How would you rate the park? \_\_\_excellent, \_\_\_good, \_\_\_fair/average, \_\_\_poor, \_\_\_unsure
2. How often do you visit the park? \_\_\_Several times a week, \_\_\_once a week, \_\_\_once a month, \_\_\_rarely or never, \_\_\_other (please specify)\_\_\_\_\_
3. During what time of day do you usually visit the park? \_\_\_AM, \_\_\_PM, \_\_\_dawn, \_\_\_dusk
4. What is your primary mode of transportation to and from the park? \_\_\_car, \_\_\_bus, \_\_\_walking, \_\_\_bike, \_\_\_other (please specify)\_\_\_\_\_
5. What recreational activities do you participate in the most at Inskip Park? \_\_\_picnics, \_\_\_playground, \_\_\_walking/jogging/exercising, \_\_\_swimming, \_\_\_pet exercising, \_\_\_gatherings, \_\_\_athletic leagues, \_\_\_other (please specify)\_\_\_\_\_
6. Are there any aspects of the park that hinder you from participating in specific kinds of recreation or from visiting the park during certain times (i.e. do you feel welcome and secure)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. How safe do you feel in the park? \_\_\_very safe, \_\_\_adequately safe, \_\_\_unsafe, \_\_\_unsure

8. Is there specific programming you think should be incorporated into the park (i.e. community activities, festivals, etc.)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Please check the five (5) most important site improvements you are interested in seeing implemented.

- | ( <input checked="" type="checkbox"/> ) | <u>Improvement</u>  |
|---|---|
| <input type="checkbox"/>                | Improved safety of vehicular entry and exit                                   |
| <input type="checkbox"/>                | Renovated parking   |
| <input type="checkbox"/>                | Drop-off and parking at pool house  |
| <input type="checkbox"/>                | Tennis court renovation   |
| <input type="checkbox"/>                | Security lighting   |
| <input type="checkbox"/>                | Site furnishings (benches, trash receptacles, bike racks, etc.)               |
| <input type="checkbox"/>                | Improved signage for entrance and site amenities                              |
| <input type="checkbox"/>                | Development of nature trails  |
| <input type="checkbox"/>                | Tree care and additional landscape beautification                             |
| <input type="checkbox"/>                | Development of larger picnic area   |
| <input type="checkbox"/>                | Development of grass and wildflower meadow                                    |
| <input type="checkbox"/>                | Renovation of recreational field  |
| <input type="checkbox"/>                | Additional recreational programming (i.e. playground equipment, etc.)         |
| <input type="checkbox"/>                | Renovation of existing shelters   |
| <input type="checkbox"/>                | Restrooms   |
| <input type="checkbox"/>                | Improved pedestrian routes, surfaces & connections including universal access |

Please list any other improvements not listed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

10. Please rank the condition of the following park amenities: P (poor/needs improvement), F (fair/could benefit from improvement), G (good/acceptable condition).

- \_\_\_ Tennis courts
- \_\_\_ Playground
- \_\_\_ Shelters/Pavilions
- \_\_\_ Volleyball court at pool
- \_\_\_ Parking lot
- \_\_\_ Concession building/ Pool house
- \_\_\_ Picnic areas
- \_\_\_ Vegetation
- \_\_\_ Walkways
- \_\_\_ Signage
- \_\_\_ Views

How might these amenities be improved? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Please answer the following questions, Yes (Y) or No (N):

- |  |   |   |
|--|---|---|
| A. Are the parking and recreation areas well lit?    | Y | N |
| B. Are walkways for pedestrian circulation adequate? | Y | N |
| C. Are there enough trash receptacles?               | Y | N |
| D. Are bicycle racks needed?                         | Y | N |
| E. Are there enough benches?                         | Y | N |
| F. Are there enough picnic tables?                   | Y | N |
| G. Is there adequate directional signage?            | Y | N |

Additional Thoughts and Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

