

Providence Parks & Public Spaces Survey

Park Name: _____ **Your Name (optional):** _____

Location of Park: _____ **Phone Number (optional):** _____

Date: _____ **Email Address (optional):** _____

1. **Is graffiti present now?** YES NO If yes, how much? Minimal Moderate Significant

Comments: _____

2. **Is graffiti a recurring problem?** (answer if you visit this park regularly) YES NO

Comments: _____

3. **Is litter present?** YES NO If yes, how much? Minimal Moderate Significant

Comments: _____

4. **Is playground equipment:** Painted? YES NO Broken? YES NO
Up-to-date? YES NO Worn? YES NO

Comments: _____

5. **Are trash receptacles:** Well-Placed? YES NO Rusty? YES NO
Chained? YES NO Dented? YES NO

Comments: _____

6. **What signs are posted?** (park name, park rules, no dogs, park closes at 9pm, no littering, etc.)

Please List: _____

7. **Are there curb cuts at entrances?** YES NO

Comments: _____

8. **Are there crosswalks at street entrances?** YES NO

Comments: _____

9. Does the landscaping allow for a safe view corridor, with bushes no higher than 2 ft. and tree branches no lower than 6 ft.? YES NO

Comments: _____

10. Is there some shade over the sitting areas? YES NO

Comments: _____

11. Is there some shade over the play areas? YES NO

Comments: _____

12. Are there any safety issues? YES NO

If yes, what are they? _____

13. Does the park appear well maintained? (grass mowed, trash removed, etc.) YES NO

Comments: _____

14. How often do you visit this park? Weekly Monthly Less Than Monthly First Visit

Comments: _____

15. Why do you visit this park? _____
(recreation, kids, walking dog, relaxation, etc.)

16. Do you visit other parks? YES NO

If yes, which parks? _____

17. Comments: _____

