

OLEAN AREA TRANSIT SYSTEM RIDER SURVEY

1. Why do you use Public Transportation Services (check all that apply)?

- Shopping
- Medical Appointments
- Personal Business
- Visiting Friends
- Work
- School
- Other _____

2. Please add any comments or suggestions that you feel may help shape the future of Public Transportation Services

3. Contact Information (optional)

Name: _____

Address: _____

Phone Number: _____

Email: _____

Surveys may be returned to:

City of Olean
Community Development
101 East State Street
Olean, NY 14760
OR
kmonroe@cityofolean.org