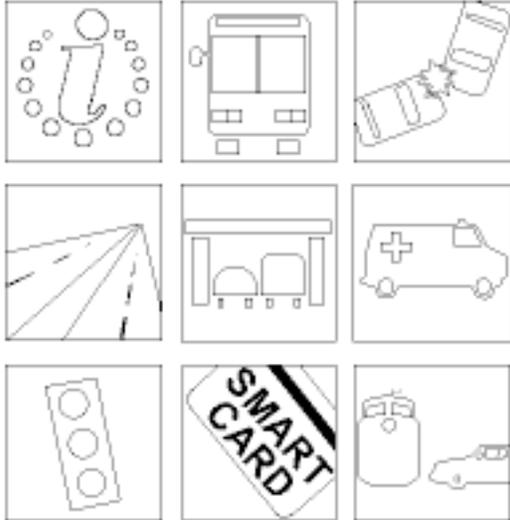




Metropolitan
Intelligent Transportation Systems (ITS) Infrastructure
2000 Freeway Management Survey



What are Intelligent Transportation Systems (ITS)?

The term "intelligent transportation system" means electronics, communications, or information processing used singly or in combination to improve the efficiency or safety of a surface transportation system.

*Transportation Equity Act
for the 21st Century*

This survey is one of several that are being distributed to a selected group of transportation agencies in 78 of the largest metropolitan areas in the United States. It is designed to collect changes made by your metropolitan area in the last year. The information collected by this survey is used by the U.S. Department of Transportation for ITS program planning, goal setting, performance assessment, and professional capacity building.

We are providing the information collected from your agency in 1999 and are asking you to make any changes that reflect conditions in your metropolitan area as of June 2000 as well as any changes to the 2005 estimate provided in 1999 in the space provided. If there are no changes from last year, please indicate so by checking the "2000 data same as 1999 response" box. There are also some additional questions that were not asked in 1999. A prompt response is appreciated.

Results of the 1999 data gathering effort are available at the following web site:
<http://itsdeployment.ed.ornl.gov/its99>. Site reports can be directly viewed or downloaded from the following URL: <http://itsdeployment.ed.ornl.gov/its99/sitereports.html>.

Please address any technical questions concerning this survey to either Jeff Trombly at 865-481-8563 or Juan Noltenius at 865-481-2839.

Thank you for your help.

Please mail the completed survey to:
Angela Ryan
Science Applications International Corporation
P.O.Box 2501
Oak Ridge, TN 37831-2501
Or Fax it at: 865-481-2941



The Map goes here!



Please use the enclosed map of your metropolitan area displaying the metropolitan planning area boundary established by your Metropolitan Planning Organization (MPO) to answer the questions in this questionnaire.

1. BASELINE COVERAGE:

Please review the first column containing information your agency provided in 1999. Enter any changes for 2000 in the second column or check the box at the bottom if there are no changes. (NR=No Response)

	1999 Response	2000 Response
Number of freeway centerline miles contained within the metropolitan transportation planning boundary that your agency owns or maintains:.....	<input type="text"/>	<input type="text"/>
Number of freeway centerline miles contained within the metropolitan transportation planning boundary that your agency considers when planning for deployment of technologies for freeway management and incident management:.....	<input type="text"/>	<input type="text"/>
Number of freeway entrance ramps contained within the metropolitan transportation planning boundary that your agency owns, operates, or maintains:.....	<input type="text"/>	<input type="text"/>
Number of freeway entrance ramps contained within the metropolitan transportation planning boundary that your agency considers when planning for deployment of technologies for freeway management and incident management:.....	<input type="text"/>	<input type="text"/>

2000 data same as 1999 response

2. Which of the following best describes the functional capabilities of your freeway management system? (Check all that apply)

- Network or roadway surveillance and data collection
- Incident management (e.g., detection, verification and monitoring of incident status)
- Information dissemination (public, private and interagency)
- En-route driver information
- Environmental monitoring (e.g., air quality, noise and weather)
- Special event traffic management
- Disaster management and traffic coordination
- Emergency services traffic control coordination
- Ramp management and control
- Lane management and control (e.g., HOV, reversible or freeway lanes)
- Corridor management/traffic signal coordination or control
- Network performance monitoring, evaluation and reporting
- No Freeway or Incident management activities
- Other (please describe)



3. Which of the following best describes the type of facilities used to conduct arterial management and/or incident management activities by your agency?

- Building:
 - Free-standing building dedicated to Freeway Management activities only
 - Building shared with other activities (e.g. transit, arterial management, public safety)
- Dedicated Control Room: →
 - Freeway Management activities only
 - Shared with other activities (e.g. transit, arterial management, public safety)

- control room contains operator console(s)
 - control room contains electronic wall map
 - control room contains CCTV display(s)
- Activities conducted in a room containing workstations or PCs that manage traffic (i.e., traffic signal control equipment)
- No Freeway Management Facilities
- Other (please describe) and/or additional information

Hours of operation:

- 24 hours a day
- Peak hours only
- Other:

4. STAFFING:

Dedicated Freeway Management Staff:

	Professional engineer	Other professional	Technical	Administrative	Other
Full time agency staff.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part time agency staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full time contractor.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part time contractor.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

How many agency staff not listed above perform transportation management as an ancillary duty?.....

What percentage of their work time is spent on Freeway Management duties?.....



5. REAL-TIME TRAFFIC DATA COLLECTION TECHNOLOGIES ON FREEWAYS:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

(NR=No Response)

	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
Total number of freeway centerline miles with real-time traffic data collection technologies (does not include CCTV):.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Miles Covered

	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
Real-time traffic data collection technologies deployed:				
Loop detectors.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Video imaging detectors.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Probe readers using ETC tags.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Probe readers using other technology.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Probe readers for transit vehicles.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Acoustic detectors.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Microwave radar.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (please specify) _____			<input type="text"/>	<input type="text"/>

2000 data same as 1999 response

6. VARIABLE MESSAGE SIGNS (VMS):

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

(NR=No Response)

	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
a. Total number of Permanent VMS deployed on freeways.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. Total number of Portable VMS deployed on freeways..... <i>Not collected in 1999</i>			<input type="text"/>	<input type="text"/>

2000 data same as 1999 response



6. (Continued)

c. Do you have a regional multi-year traveler information system plan?

- No
- Yes;

Are the VMS and FMS considered part of this plan?

- No
- Yes

d. Do you have established procedures and policies related to the messages that are displayed on VMS's?

- No
- Yes

e. Indicate what types of messages your agency displays on VMS. (Check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Freeway traffic congestion | <input type="checkbox"/> Alternate travel mode information |
| <input type="checkbox"/> Arterial traffic congestion | <input type="checkbox"/> Weather/Roadway conditions alerts |
| <input type="checkbox"/> Travel times for freeways | <input type="checkbox"/> Roadway access control (e.g., HOV, trucks) |
| <input type="checkbox"/> Travel speeds for freeways | <input type="checkbox"/> Parking information |
| <input type="checkbox"/> Travel times for arterials | <input type="checkbox"/> Upcoming event information |
| <input type="checkbox"/> Incident information | <input type="checkbox"/> Safety related messages |
| <input type="checkbox"/> Construction/Maintenance activities | <input type="checkbox"/> Air quality alerts |
| <input type="checkbox"/> Alternate routing directions | <input type="checkbox"/> Other: |

7. ROADSIDE TECHNOLOGIES TO DISTRIBUTE EN-ROUTE TRAVELER INFORMATION:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes. (NR=No Response)

Number of Miles Where Information is distributed by the following:

	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
Highway advisory radio.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other roadside technologies(please specify)_____			<input type="text"/>	<input type="text"/>

2000 data same as 1999 response



8. RAMP METERS:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes. (NR=No Response)

	<u>Number of Entrance Ramp Meters</u>			
	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
Total number of ramp meters	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of isolated (or stand-alone) ramp meters.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of centrally controlled ramp meters.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of freeway to freeway ramp meters.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number of ramp meters that provide preemption for emergency vehicles.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of ramp meters that provide priority for transit vehicles.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Ramp meter control strategy:				
Number of pretimed ramp meters.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number of traffic responsive ramp meters.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number of corridor coordinated ramp meters.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number of system coordinated ramp meters.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number of ramp meters installed but not operating.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>

2000 data same as 1999 response



9. LANE CONTROL, COMMUTE LANES, HOV LANES AND VARIABLE SPEED LIMIT SIGNS:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

(NR=No Response)

	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
Total number of freeway centerline miles under lane control.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of reversible commute lanes.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number of miles of commute lanes.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number miles of the following type of HOV lanes:				
Barrier separated.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Concurrent (non-barrier) flow lanes.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Buffer separated lanes.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Number of variable speed limit signs.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>

2000 data same as 1999 response

10. Does your agency have any technology agreements in place to establish and/or systematically maintain the ability to share information with other systems or agencies?

- No **Go to question 11**
- Yes **Please indicate the following components covered: (Check all that apply)**

- Hardware standars and/or specifications (e.g. VMS, traffic controllers, CCTV, etc.)
- Software and/or specifications
- Database and data elements
- Communications protocol
- Configuration management
- Maintenance concept
- Testing and Acceptance



11. USE OF NATIONAL ITS STANDARDS:

Please review the first column containing information your agency provided in 1999. Enter any changes for 2000 in the second column or check the box at the bottom if there are no changes.

	Used in 1999	Use in 2000
Advanced Transportation Management Systems (ATMS) Data Dictionary Sections 1 and 2 (ITE TM 1.01).....	<input type="checkbox"/>	<input type="checkbox"/>
ATMS Data Dictionary Sections 3 and 4 (ITE TM 1.02).....	<input type="checkbox"/>	<input type="checkbox"/>
Message Set for External TMC Communication (ITE-9604-1).....	<input type="checkbox"/>	<input type="checkbox"/>
National Transportation Communications for ITS Protocol (NTCIP) Class B Profile (AASHTO TS 3.3).....	<input type="checkbox"/>	<input type="checkbox"/>
NTCIP Data Collection and Monitoring Devices (AASHTO TS 3.DCM).....	<input type="checkbox"/>	<input type="checkbox"/>
NTCIP Object Definitions for Environmental Sensor Stations (AASHTO TS 3.7).....	<input type="checkbox"/>	<input type="checkbox"/>
NTCIP Object Definitions for Dynamic Message Signs (AASHTO TS 3.6).....	<input type="checkbox"/>	<input type="checkbox"/>
NTCIP Object Definitions for Highway Advisory Radio (AASHTO TS 3.HAR).....	<input type="checkbox"/>	<input type="checkbox"/>
NTCIP Object Definitions for Ramp Meter Control (AASHTO TS 3.RMC).....	<input type="checkbox"/>	<input type="checkbox"/>
NTCIP Object Definitions for Transportation Sensor Systems (AASHTO TS 3.TSS).....	<input type="checkbox"/>	<input type="checkbox"/>
NTCIP Object Definitions for Video Camera Control (AASHTO TS 3.VCC).....	<input type="checkbox"/>	<input type="checkbox"/>
IEEE P1512 - Common Incident Management Message Sets for Use by Emergency Management Centers.....	<i>Not collected in 1999</i>	<input type="checkbox"/>
Do not use.....	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify).....		<input type="checkbox"/>

2000 data same as 1999 response

12. Would your agency be willing to participate in the testing of ITS standards?

- No **Go to question 13**
- Yes **Please provide name and phone number of contact if different from respondent.**

13a. Does your agency have a multi-year strategic plan that focuses on HIGHWAY TRAFFIC OPERATIONS?

- No
- Yes



13b. Does your agency have a multi-year strategic plan that focuses on FREEWAY MANAGEMENT SYSTEMS?

No

Yes. Please indicate the following components: **(Check all that apply)**

- System goals, objectives, performance measures and thresholds
- System architecture and standards
- System hardware and software
- Operational strategies, procedures, and plans
- System operational requirements and concepts
- System maintenance concept and plan
- Staffing and system support resources
- Performance monitoring, evaluation, and reporting
- Multi-year implementation plan to expand or upgrade system components:
 - System management software
 - System support
 - Communication network
 - TMC
 - Traffic control devices
 - Surveillance devices

14a. DATA COLLECTION:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

Type of information collected in real-time	1999 Plan		2000 Plan	
	Collected in 1999	to Collect by 2005	Collect in 2000	to Collect by 2005
Traffic volumes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic speeds.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lane occupancy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle classification.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle location.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ramp queues.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ramp meter preemptions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Metering rate.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Road conditions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weather conditions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Incidents.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type of information collected electronically				
Route designations (snow emergency, etc.).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Current work zones.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scheduled work zones.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intermodal (air, rail, water) connections.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency/evacuation routes and procedures.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highway operations coordination information.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle occupancy.....	<i>Not collected in 1999</i>		<input type="checkbox"/>	<input type="checkbox"/>
Violation rates for HOV lanes.....	<i>Not collected in 1999</i>		<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify).....			<input type="checkbox"/>	<input type="checkbox"/>
Do not collect information.....			<input type="checkbox"/>	<input type="checkbox"/>

2000 data same as 1999 response



14b. DATA ARCHIVING:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

Type of information archived from real-time sources	1999 Plan Archived in 1999	1999 Plan to Archive by 2005	2000 Plan Archive in 2000	2000 Plan to Archive by 2005
Traffic volumes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic speeds.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lane occupancy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle classification.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle location.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ramp queues.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ramp meter preemptions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Metering rate.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Road conditions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weather conditions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Incidents.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type of information archived from other sources				
Route designations (snow emergency, etc.).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Current work zones.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scheduled work zones.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intermodal (air, rail, water) connections.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency/evacuation routes and procedures.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highway operations coordination information.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle occupancy.....	<i>Not collected in 1999</i>		<input type="checkbox"/>	<input type="checkbox"/>
Violation rates for HOV lanes.....	<i>Not collected in 1999</i>		<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____			<input type="checkbox"/>	<input type="checkbox"/>
Do not archive information.....			<input type="checkbox"/>	<input type="checkbox"/>

2000 data same as 1999 response

14c. GROUPS THAT TYPICALLY REQUEST DATA:

	1999 Response	2000 Response
Universities.....	<input type="checkbox"/>	<input type="checkbox"/>
State DOT personnel.....	<input type="checkbox"/>	<input type="checkbox"/>
Federal DOT personnel.....	<input type="checkbox"/>	<input type="checkbox"/>
Media (e.g., TV stations, radio stations).....	<input type="checkbox"/>	<input type="checkbox"/>
MPOs.....	<input type="checkbox"/>	<input type="checkbox"/>
Consultants.....	<input type="checkbox"/>	<input type="checkbox"/>
Advanced Traveler Information Systems (ATIS) providers.....	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____		<input type="checkbox"/>
None.....		<input type="checkbox"/>

2000 data same as 1999 response



14d. DATA USES:

	1999 Response	2000 Response
Do not know.....	<input type="checkbox"/>	<input type="checkbox"/>
Traffic analysis.....	<input type="checkbox"/>	<input type="checkbox"/>
Construction impact determination.....	<input type="checkbox"/>	<input type="checkbox"/>
Planning.....	<input type="checkbox"/>	<input type="checkbox"/>
Incident detection algorithm development.....	<input type="checkbox"/>	<input type="checkbox"/>
Roadway impact analysis.....	<input type="checkbox"/>	<input type="checkbox"/>
Accident prediction models.....	<input type="checkbox"/>	<input type="checkbox"/>
Dissemination to the public.....	<input type="checkbox"/>	<input type="checkbox"/>
Monitor system performance.....	<i>Not collected in 1999</i>	<input type="checkbox"/>
Other (please specify)_____		<input type="checkbox"/>

2000 data same as 1999 response

15a. FREEWAY TRAVEL TIMES: Methods used to distribute freeway travel times to the public. Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

	1999 Plan Distributed to Distribute in 1999	1999 Plan to Distribute by 2005	2000 Plan Distribute in 2000	2000 Plan to Distribute by 2005
Dedicated cable TV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automated telephone system.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet Web sites.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pagers or personal data assistants.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interactive TV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kiosks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-mail or other direct PC communication...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-vehicle navigation systems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated voice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated data.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facsimile.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)_____			<input type="checkbox"/>	<input type="checkbox"/>
Do not distribute information.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2000 data same as 1999 response



15b. FREEWAY TRAVEL SPEEDS: Methods used to distribute freeway travel speeds to the public. Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

	1999 Plan		2000 Plan	
	Distributed in 1999	to Distribute by 2005	Distribute in 2000	to Distribute by 2005
Dedicated cable TV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automated telephone system.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet Web sites.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pagers or personal data assistants.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interactive TV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kiosks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-mail or other direct PC communication...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-vehicle navigation systems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated voice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated data.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facsimile.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do not distribute information.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2000 data same as 1999 response

15c. FREEWAY INCIDENTS: Methods used to distribute incident location and severity to the public. Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

	1999 Plan		2000 Plan	
	Distributed in 1999	to Distribute by 2005	Distribute in 2000	to Distribute by 2005
Dedicated cable TV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automated telephone system.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet Web sites.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pagers or personal data assistants.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interactive TV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kiosks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-mail or other direct PC communication...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-vehicle navigation systems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated voice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated data.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facsimile.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do not distribute information.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2000 data same as 1999 response



15d. METHODS USED TO DISTRIBUTE OTHER INFORMATION TO THE PUBLIC (e.g. WEATHER, SPECIAL EVENTS): This information was not collected in 1999.

	Distribute in 2000	Plan to Distribute by 2005
Dedicated cable TV.....	<input type="checkbox"/>	<input type="checkbox"/>
Automated telephone system.....	<input type="checkbox"/>	<input type="checkbox"/>
Internet Web sites.....	<input type="checkbox"/>	<input type="checkbox"/>
Pagers or personal data assistants.....	<input type="checkbox"/>	<input type="checkbox"/>
Interactive TV.....	<input type="checkbox"/>	<input type="checkbox"/>
Kiosks.....	<input type="checkbox"/>	<input type="checkbox"/>
E-mail or other direct PC communication...	<input type="checkbox"/>	<input type="checkbox"/>
In-vehicle navigation systems.....	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated voice.....	<input type="checkbox"/>	<input type="checkbox"/>
Cell phone/automated data.....	<input type="checkbox"/>	<input type="checkbox"/>
Facsimile.....	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)_____	<input type="checkbox"/>	<input type="checkbox"/>
Do not distribute information.....	<input type="checkbox"/>	<input type="checkbox"/>

If your agency or another organization has one or more World Wide Web sites reporting freeway conditions and/or incident information, please provide the URLs below:

16. TOLL COLLECTION AGENCIES FROM WHICH YOUR AGENCY CURRENTLY RECEIVES FREEWAY TRAVEL TIMES DERIVED FROM VEHICLE PROBES:

Please review the first column containing information your agency provided in 1999. Enter any changes for 2000 in the second column or check the box at the bottom if there are no changes.

	1999	2000
List of local agencies go here.....	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify).....		<input type="checkbox"/>
Do not receive freeway travel times derived from vehicle probes.....		<input type="checkbox"/>

2000 data same as 1999 response



18. SERVICE PATROLS:

Please review the first column(s) containing information your agency provided in 1999. Enter any changes for 2000 in the next column(s) or check the box at the bottom if there are no changes.

(NR=No Response)

	Operated or sponsored in 1999	Operate or sponsor in 2000
Publicly operated service patrol vehicles.....	<input type="checkbox"/>	<input type="checkbox"/>
Privately operated service patrol vehicles operated under public contract.....	<input type="checkbox"/>	<input type="checkbox"/>
None of the above.....	<input type="checkbox"/>	<input type="checkbox"/>

	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
Total number of freeway miles patrolled by these services.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total number of vehicles operated.....	Not collected in 1999		<input type="text"/>	<input type="text"/>

2000 data same as 1999 response

19a. INCIDENT DETECTION METHODS:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes.

(NR=No Response)

Miles Covered by Method

	Total in 1999	1999 Estimated Total by 2005	Total in 2000	2000 Estimated Total by 2005
Free cellular phone call to a dedicated phone number other than 911.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Free cellular phone call to an area radio station.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cell call to 911.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Cellular E-911 (allows locating cell caller).....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Service patrol and/or maintenance vehicles.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Police patrols.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Computer algorithms.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
CCTV.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Private sector sources (e.g., Metro Traffic, SmartRoutes).....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Call boxes.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Other (please specify).....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do not detect incidents.....			<input type="checkbox"/>	<input type="checkbox"/>

2000 data same as 1999 response



19b. INCIDENT VERIFICATION METHODS:

Please review the first two columns containing information your agency provided in 1999. Enter any changes for 2000 in the next two columns or check the box at the bottom if there are no changes. (NR = No Response)

	Miles Covered by Method			
	1999		2000	
	Total in 1999	Estimated Total by 2005	Total in 2000	Estimated Total by 2005
Free cellular phone call to a dedicated phone number other than 911.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Free cellular phone call to an area radio station.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cell call to 911.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Cellular E-911 (allows locating cell caller).....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Service patrol and/or maintenance vehicles.....	<i>Not collected in 1999</i>		<input type="text"/>	<input type="text"/>
Police patrols.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
CCTV.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Private sector sources (e.g., Metro Traffic, SmartRoutes).....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (please specify)_____			<input type="text"/>	<input type="text"/>
Do not verify incidents.....			<input type="checkbox"/>	<input type="checkbox"/>

2000 data same as 1999 response

20. Do you have a formal multi-agency Incident Management program in your region?

No **Go to question 21**

Yes **Please provide the following information:**

a. What are the components of the program (check all that apply)

- Program goals, objectives, performance measures and thresholds
- Legislation
- Agency agreements and policies
- Training
- ITS deployment
- Operational plans and procedures
- Performance monitoring and evaluation
- Area incident response teams
- Specific incident response team
- Other (Please specify)_____

b. Are there geographic boundaries of this program?

- Yes
- No

c. Is it limited to only freeways/expressways?

- Yes
- No

d. Is there a multi-year IM program plan that provides the direction of the regional IM program and future initiatives to be undertaken related to all of the identified components of the program?

- Yes
- No



23. Is your agency involved in an organized effort to develop a regional ITS architecture?

Yes

If yes, what is the status of the regional architecture?

Our region has a fully developed regional ITS architecture undergoing continuing development and updating.

Our regional ITS architecture is under initial development

No

If not, why not?

There is no such effort under way in our region. **Go to question 28**

There is such an effort in our region, but we are not involved with it. **Go to question 28**

Don't know if my agency is involved with architecture development. **Go to question 28**

24. If you answered yes to question 23, what other agencies are involved, and which one is the lead for the effort? Check the type(s) of agency involved in the effort (*Do not check your own agency type unless there is another agency of your type that is involved with the effort.*) Circle the agency that is leading the regional architecture effort (*If you are the lead agency, circle your agency type; if it is also checked, we will know that you are the lead and there is another agency of your type involved in the effort.*)

- State department of transportation
- County highway authority(s)
- City transportation department(s)
- Transit property(s)
- Rail agency
- MPO
- Fire department(s)
- Local police department(s)
- State police/Highway patrol
- Other emergency services provider(s) (*please specify*) _____
- Toll authority(s)
- Airport authority
- Other port authority (*please specify*) _____
- Freight shippers (*private sector*)
- Traveler information service providers (*private sector*)
- Other (*please specify*) _____
- Don't know

25. What is the nature of the regional architecture?

- Encompasses a single county
- Encompasses more than one county
- Encompasses entire state
- Encompasses a corridor
- Don't know

26. Have you attempted to develop project architectures within your regional architecture? If so, how many?

- Yes Number:
- No
- Don't know



27. How long has your agency been involved with the region's architecture development effort?

- Less than one year
- One to two years
- Longer than two years
- Don't know

28. Has any organization provided you with information concerning architecture development activities?

- No **Go to question 29**
- Don't know **Go to question 29**
- Yes **Please indicate which organization and check if the information was useful.**

Organization	Check if Information Was Received	Check if Information Was Useful
FHWA.....	<input type="checkbox"/>	<input type="checkbox"/>
ITS America State Chapter.....	<input type="checkbox"/>	<input type="checkbox"/>
FTA.....	<input type="checkbox"/>	<input type="checkbox"/>
ITS America (national).....	<input type="checkbox"/>	<input type="checkbox"/>
APTA.....	<input type="checkbox"/>	<input type="checkbox"/>
ITE.....	<input type="checkbox"/>	<input type="checkbox"/>
AASHTO.....	<input type="checkbox"/>	<input type="checkbox"/>
APA.....	<input type="checkbox"/>	<input type="checkbox"/>
AMPO.....	<input type="checkbox"/>	<input type="checkbox"/>
Other (<i>please specify</i>).....	<input type="checkbox"/>	<input type="checkbox"/>

29. COST INFORMATION: Is your agency willing to share COST information on ITS-related equipment (i.e., capital and O&M cost, and brief equipment description)? This information will be used to update the ITS JPO sponsored ITS unit cost database. This database provides ITS cost data for ITS implementation and is accessible at the following URL: <http://www.its.dot.gov/eval/itsbenefits.htm>.

- No
- Yes please provide name and phone number of the **cost** information contact if different from respondent. This person will be contacted for the cost information at a later date.

30. BENEFITS INFORMATION: Is your agency willing to share information on BENEFITS from ITS deployment?

- No
- Yes Please provide name and phone number of the **benefits** information contact if different from respondent.



If there is anything else you want to tell us about any ITS efforts in your agency, please use this space for that purpose. Also, any comments you wish to make that you think may help us in future efforts to track ITS deployment will be appreciated, either here or in a separate letter.

Your contribution to this effort is greatly appreciated. If you would like to receive a copy of your metropolitan area report and the national summary report, please indicate below.

- Yes, send a copy of the reports to me.
- No, do not send a copy of the reports to me.