



MOTOR VEHICLE ACCESS FOR PEOPLE WITH DISABILITIES FOR THE USE OF STATE LAND

User Survey

1. Approximately how many times per year do you use your permit and drive the designated routes?

- 0
- 1-10
- 11-20
- 21-30
- 31-40
- 41-50
- 51-60
- 61-70
- 71-80
- 81-90
- 91-100

2. In what county are the routes located that you visit most frequently?
(Please list all and circle the county you visit most frequently)

3. What outdoor activities do you use your permit to pursue?
(Check all that apply)

- Hunting
- Fishing
- Camping
- Other (s)
- Photography
- Wildlife Viewing
- Picnicking

Please Specify: _____

(See other side)

4. What type of motor vehicle do you use on these routes?
(Check all that apply, please circle the one you use most frequently)

- Truck
- Car
- All Terrain Vehicle (ATV)
- Other

5. How would you rate your satisfaction with the MAPPWD program?

- Strongly Satisfied
- Satisfied
- No Comment
- Strongly Dissatisfied
- Dissatisfied

6. Do you have any additional comments about this program?

7. Name and Address (optional)

Please return completed Survey to:
NYSDEC, Public Land Access Unit, Attn: Carole Fraser, 625 Broadway,
Albany, NY 12233-4254