

# LEAGUE OF AMERICAN BICYCLISTS

Bicycle Friendly Community Application

## Name of Community

\* Name of Community

\* State

\* Mayor or top elected official  
*include title*

\* Phone

\* Email

\* Address

\* Website

## Applicant Profile

\* Applicant Name

\* Title

\* Employer

\* Address

\* City

\* State

\* Zip

\* Phone

\* Email

## Community Profile

The data in this section is gathered by the U.S. census. Click [here](#) to find the most recent information on your community.

\* 1. Type of Jurisdiction

Check One

- Town/City/Municipality**
- County**
- Metropolitan Planning Organization or Council of Governments**
- Regional Planning Organization**
- Rural Planning Organization**
- Indian Nation**
- Other**

If other, describe  
(50 word limit)

\* 2. Population

Enter a positive whole number, 1 or larger

3. Square milage of community

\* Total area  
(sq. mi.)

\* Water area  
(sq. mi.)

\* Land area  
(sq. mi.)

\* 4. Population Density

(Person per sq. mi.)

5. Climate

\* Average temperature for January  
in °F

\* Average temperature for April  
in °F

\* Average temperature for July  
in °F

\* Average temperature for October  
in °F

\* Average precipitation for January  
in inches

\* Average precipitation for April  
in inches

\* Average precipitation for July  
in inches

[Redacted]

\* Average precipitation for October  
*in inches*

[Redacted]

\* 6. Median Household Income  
*Enter a whole number, 0 or larger*

[Redacted]

7. Age distribution

\* % under 5

[Redacted]

\* % age 6-17

[Redacted]

\* % age 18-64

[Redacted]

\* % age 65+

[Redacted]

\* Totals  
*Total should equal 100*

[Redacted]

8. Race

\* % White

[Redacted]

\* % Black or African American

[Redacted]

\* % American Indian and Alask Native

[Redacted]

\* % Asian

[Redacted]

\* % Native Hawaiian and Other Pacific Islander

[Redacted]

\* % Some other race

[Redacted]

\* % One race

[Redacted]

\* % Two or more races

[Redacted]

\* Totals  
*Total should equal 100*

[Redacted]

\* % Hispanic or Latino (of any race)



\* 9. What is the name of your community's bicycle program manager?



\* 10. In which department does your bicycle program manager work?

- Engineering/public works**
- Planning**
- Parks and Recreation**
- Transportation**
- Other**

If other, describe  
(50 word limit)

\* 11. Are you the Bicycle Program Manager?

- Yes**
- No**

\* Bicycle Program Manager Phone



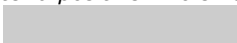
\* Bicycle Program Manager Email



\* 12. What percentage of the community's Bicycle Program Manager's time is spent on bicycling issues?

- 10% or less**
- 10-25%**
- 25-50%**
- 50-75%**
- 75-100%**

\* 13. How many government employees, expressed in full-time equivalents, work on bicycle issues in your community?  
*Enter a positive whole number, 1 or larger*



\* 14. Do you have a [Bicycle Advisory Committee](#)

- Yes**
- No**

\* 14a. How often does it meet?

- Monthly**
- Every two months**
- Quarterly**
- Annually**
- Other (describe)**

If other, describe  
(250 word limit)

\* 14b. How many members serve on the committee?  
*Enter a positive whole number, 1 or larger*



\* 14c. Which of the following groups are represented or regularly attend the Bicycle Advisory Committee?  
*Check all that apply*

- User group**
- Law enforcement**
- Chamber of commerce**
- Public health**
- Planning department**
- Transportation department**
- School board**
- Parks department**
- Recreation department**
- Transit agency**
- Other (describe)**

If other, describe  
*(250 word limit)*

\* 14d. Name of Bicycle Advisory Committee Chair

\* Email of Bicycle Advisory Committee Chair  
*e.g. myname@example.com*

\* 15. Is there a bicycle advocacy group(s) in your community?

- Yes**
- No**

15a. What is the name of the advocacy group(s) (if more than one, list them all)  
*(250 word limit)*

\* 15b. Are any of them working with you on this application?

- Yes**
- No**

\* 15c. List the name of the primary group:

\* 15d. Does this group have paid staff?

- Yes**
- No**

\* 15e. Do you contract with this group for any services or programs?

- Yes**

**No**

\* 15f. Who is the primary contact for them?

\* 15g. Email of primary contact of advocacy group  
e.g. *myname@example.com*

\* 16. What are the primary reasons your community has invested in bicycling?  
*check all that apply*

- Improved quality of life**
- Improving public health**
- Community connectivity**
- Transportation options**
- Climate change concerns**
- Decrease traffic congestion**
- Increase tourism**
- Increase property values**
- Cooperation with adjacent communities**
- Public demand**
- Economic development**
- Traffic safety**
- Other (describe)**

If other, describe  
(250 word limit)

17. What was your community's most significant investment for bicycling in the past year?  
(100 word limit)

18. What specific improvements do you have planned for bicycling in the following year?  
(100 word limit)

**Engineering**

19. Does your community have

- a [complete streets policy](#)?
- a **bicycle accomodation policy (a policy that requires the accommodation of cyclists in all new road construction and reconstruction and resurfacing)?**
- Neither**

19a. When was it adopted

19b. Provide a link or attach a copy of this legislation or policy.  
(250 word limit)

19c. How was it adopted?

- Legislation**
- Resolution**
- Internal Policy**
- Other**

If other, describe  
(250 word limit)

19d. What tools are in place to ensure implementation?

*Check all that apply*

- Implementation Guidance**
- Design**
- Manual**
- Training**
- Other**

If other, describe  
(500 word limit)

20. How do you ensure your engineers and planners accommodate cyclists according to [AASHTO](#) and [MUTCD](#) standards?

*Check all that apply*

- Training**
- Offer [FHWA/NHI Training Course](#)**
- Hire Outside consultants to train staff**
- Send staff to [bicycle-specific conferences/training](#)**
- Require project consultants to have bike/ped qualifications**

**Internal training or [design manual](#)**

20a. Describe each checked  
(200 word limit)

\* 21. What percentage of bridges and tunnels in your community are accessible to bicyclists?  
Enter a whole number, 0 or larger

21a. What are the exceptions?  
(500 word limit)

\* 22. How do you ensure there are end-of-trip facilities for bicyclists?  
Check all that apply

- Bike parking ordinance**
- Bike parking ordinance for all new developments**
- Ordinance requiring showers and lockers**
- Building accessibility ordinance**
- On street bike parking**
- [Ordinance that allows bike parking to substitute for car parking](#)**
- Standards for bicycle parking that conform to [APBP guidelines](#)**
- Other**

If other, describe  
(500 word limit)

23. How many bike parking spaces are there in your community?  
Answer all that apply

23a. Bike racks  
Enter a whole number, 0 or larger

23b. Bike lockers  
Enter a whole number, 0 or larger

23c. Bike depot (i.e. [Bikestation](#))  
Enter a whole number, 0 or larger

23d. In-street bike parking  
Enter a whole number, 0 or larger

24. Approximately what percentage of these locations have bike racks or storage units?

24a. Schools

24b. Libraries

24c. Transit Stations

24d. Parks & Recreation Centers

24e. Government buildings

24f. Office buildings

24g. Shops

24h. Public Housing

\* 25. Does your community have transit service?

**Yes**

**No**

\* 25a. Are buses equipped with [bike racks](#)?

**Yes**

**No**

25b. What percentage?

25c. Are bikes allowed inside transit vehicles?

**Yes**

**Sometimes**

**No**

If yes or sometimes, describe  
(100 word limit)

\* 26. What is the mileage of your total road network?  
*Enter a whole number, 0 or larger*

\* 27. What is the mileage of your total shared-use path network?  
*Enter a whole number, 0 or larger*

28. List your current and planned bicycle accommodations?

Complete all that apply

a. [Bike lanes](#)

Current

Enter a whole number, 0 or larger

Planned

Enter a whole number, 0 or larger

b. [Shared lane markings](#)

Current

Enter a whole number, 0 or larger

Planned

Enter a whole number, 0 or larger

c. [Bike boulevards](#)

Current

Enter a whole number, 0 or larger

Planned

Enter a whole number, 0 or larger

d. Signed bike routes

Current

Enter a whole number, 0 or larger

Planned

Enter a whole number, 0 or larger

e. Paved shared use paths

Current

Enter a whole number, 0 or larger

Planned

Enter a whole number, 0 or larger

f. Natural surface shared use paths

Current

Enter a whole number, 0 or larger

Planned

Enter a whole number, 0 or larger

g. [Singletrack](#)

Current

Enter a whole number, 0 or larger

Planned

Enter a whole number, 0 or larger

\* 29. What other innovative ways have you improved on-road conditions for bicyclists?

Check all that apply

[Road diets](#)

- [Area wide traffic calming](#)
- [Cycle tracks](#)
- [Contra-flow bike lanes](#)
- Speed limits 20 mph or less on residential streets**
- Bike cut thrus**
- [Way-finding signage with distance and/or time information](#)
- None**
- Other**

If other, describe  
(500 word limit)

\* 30. What percentage of arterial streets have bike lanes or paved shoulders?  
Enter a whole number, 0 or larger

\* 31. What percentage of natural surface, trails and singletrack are open to bicyclists?  
Enter a whole number, 0 or larger

31a. What are the exceptions?  
(500 word limit)

32. What maintenance policies or programs ensure *bike lanes* and *shoulders* remain usable and safe?  
Answer all that apply

\* 32a. Street sweeping

- Before other travel lanes**
- Same time as other travel lanes**
- Weekly**
- Monthly**
- Quarterly**
- Annually**
- Never**
- Other**

If other, describe  
(250 word limit)

\* 32b. Snow clearance

- Before other travel lanes**

- Same time as other travel lanes
- Within 48 hours of storm
- Never
- Other
- Not applicable

If other, describe  
(500 word limit)

\* 32c. Pothole maintenance

- Within 24 hours of complaint
- Within one week of complaint
- Within one month of complaint
- Never
- Other

If other, describe  
(500 word limit)

32d. Other Maintenance policies or programs for bike lanes and shoulders (describe)  
(500 word limit)

33. What maintenance policies or programs ensure *shared-use paths* remain safe and usable?  
*Answer all that apply*

\* 33a. Path sweeping

- Weekly
- Monthly
- Quarterly
- Annually
- Never
- Other

If other, describe  
(250 word limit)

\* 33b. Vegetation maintenance

- Weekly
- Monthly
- Quarterly
- Annually

- Never**
- Other**

If other, describe  
(250 word limit)

- \* 33c. Snow clearance
- Before roadways**
  - Same time as roadways**
  - Within 48 hours of storm**
  - Never**
  - Other**
  - Not applicable**

If other, describe  
(250 word limit)

- \* 33d. Surface repair
- Within 24 hours of complaint**
  - Within one week of complaint**
  - Within one month of complaint**
  - Never**
  - Other**

If other, describe  
(500 word limit)

33e. Other Maintenance policies or programs for shared-use paths (describe)  
(500 word limit)

\* 34. How do you accommodate cyclists at intersections in your community?  
Check all that apply

- All /Most signals are timed for bicyclists**
- All /Most signals are timed**
- [Loop detector markings](#)
- [Video detection](#)
- [Advance stop line or Bike Box](#)

[Bicycle signal heads](#)

**Other**

**None of the above**

If other, describe  
(500 word limit)

\* 35. Are there other infrastructure improvements in your community to promote bicycling?

**Yes**

**No**

If yes, describe  
(500 word limit)

## Education

\* 36. Do schools in your community offer a [Safe Routes to School](#) (or comparable) program that includes bicycling education?

**Yes**

**No**

What percentage of schools in your jurisdiction participates?

a. Elementary (percentage)

Enter a whole number, 0 or larger

b. Middle School (percentage)

Enter a whole number, 0 or larger

c. High School (percentage)

Enter a whole number, 0 or larger

\* 37. Outside of schools, how are children taught safe bicycling skills?

Check all that apply

**Youth bike clubs**

[Bike clinics or rodeos](#)

**Youth recreation programs**

**Helmet fit seminars**

[Safety town](#)

**Trail riding classes**

**Other**

**None of the above**

If other, describe  
(500 word limit)

\* 38. Do you have a [diversion program](#) for cyclists or motorists?

- Yes**  
 **No**

If yes, describe  
(500 word limit)

\* 39. What have you done in the last 18 months to educate motorists and bicyclists on sharing the road safely?  
*Check all that apply*

- Public service announcements**
- Community newsletter article**
- New resident packet**
- Utility bill insert**
- Bicycle ambassador program**
- Newspaper column/blog on bicycling**
- Dedicated bike page on community Web site**
- Billboards**
- Share the Road Signs**
- Share the road information in driver's education**
- Other**
- None of the above**

If other, describe  
(500 word limit)

40. What of the following options are available on a regular basis to your community?

\* 40a. [Traffic Skills 101](#) (or equivalent) classes -- including classroom and on-bike instruction.

- Weekly**  
 **Monthly**  
 **Quarterly**  
 **Annually**  
 **Never**  
 **Other**

If other, describe  
(250 word limit)

\* 40b. Cycling Skills classes -- three to four hour classroom training courses

- Weekly**
- Monthly**
- Quarterly**
- Annually**
- Never**
- Other**

If other, describe  
(250 word limit)

\* 40c. Commuter classes - one/two hour classes

- Weekly**
- Monthly**
- Quarterly**
- Annually**
- Never**
- Other**

If other, describe  
(250 word limit)

\* 41. Has your community hosted a [League Cycling Instructor seminar](#) in the past two years?

- Yes**
- No**

\* 42. How many [League Cycling Instructors](#) are there in your community?  
Enter a whole number, 0 or larger

43. List active League Cycling Instructors (active means they have taught at least one class during the past 12 months).  
(500 word limit)

44. Does your community have driver training for any of the following professional drivers that include information on sharing the road with cyclists?  
Check all that apply

- City staff**

- Taxi drivers**
- Transit operators**
- School bus operators**
- Delivery drivers**
- Other**

\* If other, describe  
(250 word limit)

\* 44a. If yes to any of the above, describe the program.  
(500 word limit)

\* 45. Describe any efforts your community has made to ensure your education programs reach traditionally underserved populations.  
(500 word limit)

\* 46. Are there other education efforts in your community to promote bicycling?

- Yes**
- No**

\* 46a. If yes, describe  
(1000 word limit)

### **Encouragement**

\* 47. How do you promote [National Bike Month](#)?  
Check all that apply

- City Proclamation**
- Community Ride**
- Mayor-led Ride**
- Public Service Announcements**
- Publish a guide to Bike Month Events**
- Bike Month Web site**

- Commuter Challenge**
- Commuter Breakfasts**
- Trail construction or maintenance day**
- Other**
- No promotion**

\* If other, describe  
(1000 word limit)

\* 48. How many people participate in [Bike Month](#) events?  
Enter a whole number, 0 or larger

\* 49. How do you promote bicycling outside of [National Bike Month](#)?  
Check all that apply

- Community Ride**
- Mayor-led Ride**
- Public Service Announcements**
- Trail construction or maintenance day**
- [Summer Streets/Ciclovia/Sunday Parkways](#)
- Commuter Challenge**
- Commuter Breakfasts**
- Other**
- No promotion**

\* If other, describe  
(500 word limit)

\* 50. Do you actively promote Bike to Work Day or other bicycle commuting incentive programs?

- Yes**
- No**

\* 50a. If yes, describe  
(500 word limit)

\* 50b. Approximately what percentage of the community workforce do you reach?



\* 51. List the signature cycling events in your community?  
(500 word limit)

\* 52. Does the municipality sponsor or actively support any of these rides?

- Yes**
- No**

\* 52a. If yes, how?  
(500 word limit)

\* 53. Does your local tourism board promote bicycling in your area?

- Yes**
- No**

\* 53a. If yes, how?  
(500 word limit)

\* 54. Are there cycling organizations in your area?  
*Check all that apply*

- Recreational Bike Clubs**
- Mountain Bike Clubs**
- Friends of the Trail Groups**
- National Mountain Bike Patrol**
- Racing Clubs or Teams**
- Bicycle Co-ops**
- Other**
- None**

\* If other, describe.  
(500 word limit)

\* 54a. For each type of club checked, list names of the organizations.  
(500 word limit)

\* 55. How many [specialty bicycle retailers](#) ( i.e shops dedicated primarily to selling bikes and bike-related equipment) are there in your community?

Enter a whole number, 0 or larger

\* 55a. List their names.

(500 word limit)

\* 56. Which of these bicycling areas or facilities do you have in your community?

Check all that apply

- BMX track**
- Velodrome**
- Cyclocross course**
- Mountain bike park**
- Pump Tracks**
- Other**
- None**

\* If other, describe.

(500 word limit)

\* 57. Is there a skatepark in your community?

- Yes**
- No**

\* 57a. If yes, do bikes have access to the skatepark?

- Always**
- Sometimes**
- Never**

\* 58. Are there opportunities to rent bicycles in your community?

- Yes**
- No**

\* 59. Does your community have a bike sharing program?

- Yes**
- No**

59a. If yes, of what use is it?

Check all that apply

- Public use**

**Private institution**

**Other**

\* If other, describe  
(500 word limit)

\* 60. Do you have any current [Bicycle Friendly Businesses](#) in your community?

**Yes**

**No**

\* 60a. If yes, list the names of the businesses.  
(500 word limit)

\* 61. Does your community have youth recreation and/or intervention programs centered around bicycling?  
*Check all that apply*

[Recycle a Bicycle](#)

[Trips for Kids chapter](#)

[Earn a Bike program](#)

**Co-op or Community Cycling Center**

**Other**

**None**

\* If other, describe  
(500 word limit)

\* 62. What mapping and route finding information is available for your community which has been updated in the last 18 months?

*Check all that apply*

**Online route finding service**

**Online map**

**Printed on-road bike-routes map**

**Printed mountain bike trails map**

**Other**

**None available**

\* If other, describe  
(500 word limit)

\* 63. Does your community have other programs or policies to encourage cycling?

- Yes**  
 **No**

\* 63a. If yes, describe  
(500 word limit)

### **Enforcement**

\* 64. How does your police department interact with the local cycling community?  
*Check all that apply*

- A police officer is an active member of bicycle advisory committee**
- Identified law-enforcement point person to interact with cyclists**
- No current formal interaction**
- Other**

\* If other, describe  
(500 word limit)

\* 65. What kind of training is offered to police officers regarding traffic law as it applies to bicyclists?  
*Check all that apply*

- Basic academy training**
- [International Police Mountain Bike Association](#) or Law Enforcement Bicycle Association training**
- [National Highway Traffic Safety Administration Law Enforcement Training](#)**
- Completion of [Smart Cycling course](#) by Police**
- Presentation by League Cycling Instructor or local cyclist**
- Institute for Police Training and Development bicycle training**
- Other**
- No training currently offered**

\* If other, describe  
(500 word limit)

\* 66. What enforcement campaigns are targeted at improving cyclist safety?  
*Check all that apply*

- Helmet/light giveaways**
- Targeting motorist infractions**
- Targeting cyclist infractions**
- Share the road campaigns**
- Other**
- None of the above**

\* If other, describe  
*(500 word limit)*

\* 67. Do you have police department employees on bikes?

- Yes**
- No**

\* 67a. If yes, what percentage of police department employees is on bike?  
*Enter a whole number, 0 or larger*

\* 68. Are there any other public safety (e.g. fire department or EMS) employees on bikes?

- Yes**
- No**

\* 68a. If yes, what percentage of police department employees is on bike?  
*Enter a whole number, 0 or larger*

\* 69. Do your local ordinances treat bicyclists [equitably](#)? (examples can be found on the [BFC resources page](#)).  
*Check all that apply*

- There are specific penalties for failing to yield to a cyclist when turning. It is illegal to park or drive in a bike lane (intersections excepted)**
- There are penalties for motor vehicle users that 'door' cyclists**
- There is a ban on cell phone use while driving.**
- There is a ban on texting while driving.**
- The community uses photo enforcement for red lights and/or speed**
- There is a state or local law that requires cyclists to use sidepaths regardless of their usability.**
- There is a state or local law that requires cyclists to use bike lanes where they are provided.**
- Cyclists are required to ride as far to the right of the road as practicable without exceptions listed in [Uniform Vehicle Code](#).**
- There is a general restriction on bicyclists riding on the sidewalk.**

- There are local or school policies that restrict youths from riding to school.**
- None of the above**
- Additional information on any of the above mentioned ordinances as it pertains to your community.**

\* If Additional Information, describe  
(500 word limit)

\* 70. Are there any additional prohibitions or restrictions on cyclists in your community?

- Yes**
- No**

\* 70a. If yes, describe  
(500 word limit)

\* 71. Does your community have other programs or policies to enforce safe cycling?

- Yes**
- No**

\* 71a. If yes, describe  
(100 word limit)

## Evaluation and Planning

\* 72. What is the most current journey-to-work data for your community? (this percentage can be found in the [U.S. Census or the American Community Survey](#))

*Enter a whole number, 0 or larger*

\* 73. What additional information do you have on bicycle use for your community?

*(500 word limit)*

\* 74. How many cyclist/motor vehicle fatalities have occurred in your community in the past five years?

*Enter a whole number, 0 or larger*

\* 75. How many cyclist/motor vehicle crashes have occurred in your community in the past five years?

*Enter a whole number, 0 or larger*

\* 76. Do you have a specific plan or program to reduce these numbers?

- Yes**

**No**

\* 76a. If yes, provide the link to the plan or describe.  
(500 word limit)

\* 77. Does your community have a bicycle plan?

**Yes**

**No**

\* 77a. When was it passed or most recently updated?

▼

\* 77b. Is there a dedicated funding source for implementation?

**Yes**

**No**

\* 77c. If yes, describe.  
(500 word limit)

\* 77d. What percentage of the plan has been implemented?

▼

\* 77e. Are you meeting annual target goals for implementation?

**Yes**

**No**

\* 77f. Provide a link to the plan or describe.  
(250 word limit)

\* 78. Do you have a trails master plan that addresses mountain bike access?

**Yes**

**No**

\* 78a. If yes, provide the link to the plan or describe.  
(500 word limit)

\* 79. Is there [formal cooperation](#) between the mountain biking community and the community recreation and planning staff?

**Yes**

**No**

\* 79a. If yes, describe.  
(500 word limit)

\* 80. Do you have [trip reduction ordinances, policies or programs](#)?

- Yes**
- No**

\* 80a. If yes, describe.  
(500 word limit)

\* 81. Have you done an [economic impact study](#) on bicycling in your community?

- Yes**
- No**

\* 81a. If yes, describe.  
(500 word limit)

\* 82. Do you have a mechanism to ensure facilities, programs and encouragement efforts are implemented in traditionally underserved communities?

- Yes**
- No**

\* 82a. If yes, describe.  
(500 word limit)

\* 83. Does your community have other programs or policies to evaluate and/or plan bicycling conditions, programs, and facilities in your community?

- Yes**
- No**

\* 83a. If yes, describe.  
(500 word limit)

## Final Overview

84. What are the three primary reasons your community deserves to be designated a Bicycle Friendly Community?

\* 84a.  
(100 word limit)

\* 84b.  
(100 word limit)

\* 84c.  
(100 word limit)

85. What are the three aspects of your community most in need of improvement in order to accommodate bicyclists?

\* 85a.  
(100 word limit)

\* 85b.  
(100 word limit)

\* 85c.  
(100 word limit)

\* 86. Are you planning any new projects based on your completion of the Bicycle Friendly Community application?

- Yes**
- No**

\* 86a. If yes, describe.  
(500 word limit)

\* 87. Has completing this application made you more aware of what your community needs to do to be bicycle friendly?

- Yes**

**No**

\* 87a. If yes, describe.  
(500 word limit)