

# City of Springfield Community Survey

The City of Springfield is in the process of evaluating its goals for future land use and development, and will be seeking residents' ideas and comments about certain issues in our community. We need your valuable input; you and your family play a critical role as we plan to serve our community's long-term needs and desires. Please take a few minutes of your time to share your input. ALL responses are important and will be kept confidential. Surveys may be returned to the City Office at 601 Avenue A or via fax to 269-965-0114. If you have questions or comments please call the City Manager at 965-2354. Thank you for your input and your support! Please return your completed survey by October 8, 2009.

1. What is your age?  
 Under 18     18-24     25-34     35-44     45-54     55-65     Over 65
2. How many years have you lived in Springfield?  
 Not a resident     Less than 1     1 to 4     5 to 10     11 to 20     More than 20
3. How many people live in your household? \_\_\_\_\_
4. How many children under the age of 18 reside in your home? \_\_\_\_\_
5. What schools do your children attend?     BC Public     Lakeview     Harper Creek     Other
6. Please check the three most important reasons you chose to live Springfield:  
 Not a Resident                       Family in the Area                       Clean Air and Water  
 Quality of City Services               Overall Affordability                       Proximity to Job(s)  
 Quality of School System               Overall Safety                               Proximity to Battle Creek  
 Suburban Atmosphere                   Other: \_\_\_\_\_
7. Where do you work?  
 City of Springfield                       Kalamazoo County                       Branch County  
 City of Battle Creek                       Barry County                               Eaton County  
 Calhoun County                           Other: \_\_\_\_\_
8. In your opinion, which services are needed in Springfield (mark all that apply)  
 Single-Family Housing                   Retail Businesses                       Entertainment Facilities  
 Multi-Family Housing                   Warehousing/Distributing                   Light Manufacturing Facilities  
 Tourist Attractions                       Art/Cultural Facilities                       Heavy Industrial Facilities  
 Medical Services                           Professional/Corporate                       Motels/Hotels  
 Other: \_\_\_\_\_
9. Overall, how satisfied are you with the quality of life offered to you as Springfield resident?  
 Very Satisfied                       Satisfied                               Neutral                               Dissatisfied                               Very Dissatisfied
10. Do you plan to move from Springfield in the next five years?     Yes     No  
If yes, why? \_\_\_\_\_

11. Please indicate your level of satisfaction with the following aspects of Springfield

	Very Satisfied	Satisfied	Not Satisfied	No Opinion
Availability of Housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordability of Housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suburban Atmosphere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open Space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Job Opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Property Tax Rate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreational Opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic Volumes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retail/Shopping Opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Zoning Regulations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Please identify your level of satisfaction with the following public/private services in Springfield:

	Very Satisfied	Satisfied	Not Satisfied	No Opinion
Fire Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety from Crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition of Streets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition of Sidewalks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sewer Services (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Drinking Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electric Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Natural Gas Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cable/Satellite TV Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cellular Phone Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Springfield Wireless Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High Speed Internet Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Library Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services for Senior Citizens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks and Recreation Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments:

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