



AREA BEING AUDITED : _____

LOCATION : _____ (Zone # _____) _____

DATE : _____ **TIME :** _____

AUDITED BY : _____ **TEL :** _____

***The place to start is ...
with your own experiences!***

Stop and look closely at the different areas and take the time to consider the specific features of the place.

Share your feelings as you tour the building or area. Sometimes one person will remember something, and that will bring out another story. Each person's story will help get to the reasons that a place does or does not feel comfortable.

Take lots of notes as you tour the area. You may not remember everything you wanted to comment on if you wait until later.

Think about the area you are auditing in terms of real life situations :

- Suppose you were walking alone here at night?
- Suppose you had to wait in the lobby or in the parking lot for someone to come and pick you up at night?
- Why don't I like this particular place?
- When and why do I feel uncomfortable there?
- What changes would make me feel safer?

2. LIGHTING

Impression of lighting:

very poor poor satisfactory good

Is the lighting even?

yes no

How well does the lighting illuminate pedestrian walkways and sidewalks?

very poor poor satisfactory good

Comment :

How clearly does the lighting illuminate directional signs?

very poor poor satisfactory good

Comment :

How well does the lighting illuminate the parking area ?

very poor poor satisfactory good

Comment :

Are any nearby street lights out ? If yes, which ones?

Is the lighting obscured by trees or bushes ? If yes, please specify (where, which ones) :

Do you know who or where to call if lights are out?

COMMENTS :

3. SIGNAGE

Impression of overall signage:

very poor poor satisfactory good

Could an emergency vehicle find this building rapidly?

yes no n/a

Are parking areas well posted?

yes no n/a

Are parking areas for handicapped persons well posted?

yes no n/a

Are the street signs visible and easily identifiable?

yes no n/a

Is the lettering on the signs easy to read and large enough?

yes no n/a

Can I see telephones or signs directing me to emergency assistance?

yes no n/a

Are there signs that direct me to wheelchair access?

yes no n/a

Is the signage appropriate for pedestrians and for vehicles?

yes no n/a

What signs should be added or removed?

COMMENTS :

4. SIGHTLINES

Can you clearly see what's ahead?

yes no n/a

If no, why not?

bushes	<input type="checkbox"/>	trees	<input type="checkbox"/>
fences	<input type="checkbox"/>	snow-banks	<input type="checkbox"/>
hills/ditches	<input type="checkbox"/>	telephone polls	<input type="checkbox"/>
company signs	<input type="checkbox"/>	other	<input type="checkbox"/>

Please specify other:

What would make it easier to see ahead?

trimmed bushes	<input type="checkbox"/>	snow cleared	<input type="checkbox"/>
vehicles moved	<input type="checkbox"/>	security mirrors	<input type="checkbox"/>
relocated signs	<input type="checkbox"/>	Better lighting	<input type="checkbox"/>

other _____

COMMENTS :

5. ISOLATION

At the time of the audit, does the area feel isolated?

yes no

How many people are likely to be around?

1. In the early morning

none a few several many

2. During the day

none a few several many

3. In the evening

none a few several many

4. Late at night

none a few several many

Is it easy to predict when people will be around?

yes no n/a

Is there a monitor or surveillance system?

yes no n/a

Is the area patrolled?

yes no n/a

If yes, how frequently?

Is it easy to predict when the area is patrolled?

yes no n/a

Is there a place nearby where I can get or call for help?

yes no n/a

COMMENTS :

6. MOVEMENT PREDICTORS

How easy is it to predict a woman's movements, ie., her usual route?

very easy somewhat easy no way of knowing

Is there an alternative well-lit and frequently traveled route available? If yes, please specify :

Can I see all the way through the route I am using?

yes no n/a

On your route, are there places where someone could be hiding? Are there places where you could hide if necessary? If yes, please specify:

Are there emergency telephones along your path if necessary?

yes no n/a

7. POSSIBLE ASSAULT SITES

Are there places someone could be hiding?

yes no

If yes, where?

between garbage bins unlocked equipment or utility shed

alley or lane-way isolated parking lots

other _____

Are there areas that should be locked, fenced or barricaded?

COMMENTS :

8. ANIMALS

Are there any domestic animals in the area?

yes no n/a

If so, are dogs secured or under surveillance?

yes no n/a

9. NEARBY LAND USES

What is the surrounding or nearby land used for?

stores	<input type="checkbox"/>	vacant lot	<input type="checkbox"/>
school	<input type="checkbox"/>	restaurants/bars	<input type="checkbox"/>
garage	<input type="checkbox"/>	busy traffic street	<input type="checkbox"/>
offices	<input type="checkbox"/>	residential houses	<input type="checkbox"/>
factory	<input type="checkbox"/>	other - specify below	<input type="checkbox"/>

What atmosphere do the surroundings project ?

What could be done to improve the atmosphere ?

Can I identify who owns or maintains nearby land?

yes no n/a

COMMENTS :

10. MAINTENANCE

Impressions of maintenance:

very poor poor satisfactory good

Do you know whom maintenance concerns should be reported to ?

yes no

Is there litter lying around ? (Where?, What kind?)

From your experience, how long do repairs generally take?

COMMENTS :

11. FACTORS WHICH MAKE THE PLACE MORE HUMAN

Does the place feel cared for ?

yes no n/a

Does the place feel abandoned ?

yes no n/a

Is there graffiti on the walls ?

yes no n/a

In your opinion are there racist, or sexist slogans/signs/images ?

yes no n/a

Are there signs or vandalism ?

yes no n/a

Would other materials, tones, textures or colors, signs or symbols improve your sense of safety ?

yes no n/a

How do you feel walking in this area ?

Are there benches where people can sit, read, chat , etc.

COMMENTS :

12. OVERALL DESIGN

Impressions of overall design :

very poor poor satisfactory good

If you weren't familiar with the place, would it be easy to find your way around ?

yes no n/a

Are there curb cuts at crosswalks and corners ?

yes no n/a

Are there benches placed for rest stops ?

yes no n/a

Is there sufficient and visible parking for users and visitors ?

yes no n/a

Is the place accessible for a person with mobility impairment ?

yes no n/a

Is the area well laid out? Explain

COMMENTS:

13. INTERSECTIONS

VEHICLES:

How is the visibility approaching this intersection?

very good good satisfactory very poor

Comment:

Do you have good line of sight of oncoming vehicles when you are in the turning-lane?

very good good satisfactory very poor

Comment :

Do you feel there is sufficient stopping distance for the unexpected?

yes no

Comment :

Is there sufficient storage space for traffic waiting for light to change at all times of the day?

yes no

Comment :

Do you have good line of sight of pedestrians at all times?

yes no

Comment :

Are stop signs and traffic lights easily visible?

yes no

Comment :

Do you feel safe and comfortable driving through this intersection?

very somewhat not at all

Comment :

Would the time of day change how you feel?

yes no

Comment :

Is there good visibility of oncoming traffic from all directions?

very good good satisfactory very poor

Comment :

VEHICLES AND PEDESTRIANS

Is there sufficient time for everybody to cross the intersection?

yes no

Comment :

Do wheelchairs and walkers easily cross the sidewalks and median?

yes no

Comment :

Do the walking signals have bells & buzzers for the visually impaired?

yes no

(If yes, please comment on the volume of the bell/buzzer, is it loud enough?, are there different bells/buzzers depending on the direction you are going - and are they appropriate?)

Comment :

Are all signs clearly visible?

yes no

Comment :

How is the quality of lighting?

very good good satisfactory very poor

Comment :

How safe do you feel crossing the intersection?

very safe safe somewhat safe very unsafe

Comment :

Would the time of day change your feelings?

yes no

Comment :
