

# GoGet VOUCHER APPLICATION FORM FOR EMPLOYEES WORKING IN PARRAMATTA CITY CENTRE



**Note: In order for you to be eligible for the GoGet / Council voucher:**

- You must be over 21 year old and provide evidence that your business/ office is located in Parramatta.
  - **Evidence could include:** office letterhead business cards  
a rental agreement / phone / electricity bill which indicate your business address
- You can either send the evidence in or have Council's staff sight the evidence when you submit your application.  
If you have any questions about the scheme please contact Nancy Hermoso on 9806 5634 or email:  
nhermoso@parracity.nsw.gov.au

**Office Use Only**

Evidence provided   
Voucher No \_\_\_\_\_  
Date Issued \_\_\_\_\_

**1. Demographic Questions (and contact details)**

**TITLE:** Mr/Mrs/Ms/Miss/Dr

**FIRST NAME:** \_\_\_\_\_ **SURNAME:** \_\_\_\_\_

**ORGANISATION / COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DATE OF BIRTH:**     \_\_ / \_\_ / \_\_ \_\_  
                                  D D   MM   Y Y Y Y

**SUBURB OF YOUR RESIDENTIAL ADDRESS (if in Parramatta LGA please specify the street address)**

\_\_\_\_\_

**Q. What is your profession?** \_\_\_\_\_

**What is your organisation type?**

- |  |   |
|--|---|
| <input type="checkbox"/> Single Self Employed Business | <input type="checkbox"/> Government Agency    |
| <input type="checkbox"/> Private / Public Company      | <input type="checkbox"/> Other _____          |
| <input type="checkbox"/> Non Government Organisation   | <input type="checkbox"/> Prefer Not To Answer |

**What type of office building do you work in?**

- |  |   |
|--|---|
| <input type="checkbox"/> House                               | <input type="checkbox"/> Detached Commercial Building |
| <input type="checkbox"/> Multi Storey Office Building        | <input type="checkbox"/> Factory / Warehouse          |
| <input type="checkbox"/> Ground Floor Shop / Consulting Room | <input type="checkbox"/> Other _____                  |

**Are you:**            Male            Female            Prefer Not To Answer

**FUTHER CONTACT DETAILS & BACKGROUND**

**WORK:** \_\_\_\_\_ **HOME:** \_\_\_\_\_ **MOBILE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ Preferred Contact Method:  Mail  Email

**2. Transportation Questions**

**Q. Do you own a car?**            Yes  No **(Please select one answer only)**



**How often on average would you use the GoGet car? (Please select one answer only)**

- |  |  |
|--|--|
| <input type="checkbox"/> Daily                     | <input type="checkbox"/> Once a month        |
| <input type="checkbox"/> Several times a week      | <input type="checkbox"/> Once every 6 months |
| <input type="checkbox"/> Once a week               | <input type="checkbox"/> Never               |
| <input type="checkbox"/> A couple of times a month |  |

**What is the main reason you would use the GoGet car? (Please select one answer only)**

- |  |  |
|--|--|
| <input type="checkbox"/> Use of free car         | <input type="checkbox"/> Use it to transport colleagues to a meeting |
| <input type="checkbox"/> Recreation              | <input type="checkbox"/> Journey to work                             |
| <input type="checkbox"/> Short trips eg shopping | <input type="checkbox"/> Other (Please list) _____                   |
| <input type="checkbox"/> Use it to visit clients |  |

**Which would you say is your main form of transport for work? (Please select one answer only)**

- |                                |                                |                                     |  |   |
|--------------------------------|--------------------------------|-------------------------------------|--|---|
| <input type="checkbox"/> Boat  | <input type="checkbox"/> Bus   | <input type="checkbox"/> Bicycle    | <input type="checkbox"/> Car as driver                   | <input type="checkbox"/> Car as passenger |
| <input type="checkbox"/> Ferry | <input type="checkbox"/> Jog   | <input type="checkbox"/> Motorcycle | <input type="checkbox"/> Mo-ped                          | <input type="checkbox"/> Walk             |
| <input type="checkbox"/> Taxi  | <input type="checkbox"/> Train | <input type="checkbox"/> Tour Bus   | <input type="checkbox"/> Skateboard/Roller Blade/Scooter |   |

**How many people in your office of driving age (17+)?** \_\_\_\_\_

**How many staff cars located at your office?** \_\_\_\_\_

**Do you personally own or have primary access to a car?**  Yes  No

**How many off-street parking spaces does your office have?** \_\_\_\_\_

**What is the availability of on street parking in your street?**

- |   |  |
|---|--|
| <input type="checkbox"/> Always available no restrictions       | <input type="checkbox"/> Mostly not available no restrictions    |
| <input type="checkbox"/> Always available, with restrictions    | <input type="checkbox"/> Mostly not available, with restrictions |
| <input type="checkbox"/> Sometimes available no restrictions    | <input type="checkbox"/> Never available no restrictions         |
| <input type="checkbox"/> Sometimes available, with restrictions | <input type="checkbox"/> Never available, with restrictions      |

**How long do you anticipate you would need the car each time you use it?**

- |                                    |                                    |                                    |  |
|------------------------------------|------------------------------------|------------------------------------|--|
| <input type="checkbox"/> 0-2 hours | <input type="checkbox"/> 2-4 hours | <input type="checkbox"/> 4-8 hours | <input type="checkbox"/> more than 8 hours |
|------------------------------------|------------------------------------|------------------------------------|--|

### 3. Awareness Questions - General Mediums

#### Q. How did first hear about the GoGet scheme?

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Banner          | <input type="checkbox"/> Leaflet picked up          | <input type="checkbox"/> Word Of Mouth                         |
| <input type="checkbox"/> Bus Shelter     | <input type="checkbox"/> Pamphlet                   | <input type="checkbox"/> Don't remember seeing any advertising |
| <input type="checkbox"/> Cinema          | <input type="checkbox"/> Poster                     | <input type="checkbox"/> Other _____                           |
| <input type="checkbox"/> Council website | <input type="checkbox"/> Radio                      | <input type="checkbox"/> Don't know                            |
| <input type="checkbox"/> Direct Mail     | <input type="checkbox"/> What's On Brochure         |  |
| <input type="checkbox"/> Direct Email    | <input type="checkbox"/> Newspaper (please specify) |  |
- \_\_\_\_\_

### 4. Additional Research

Would you be interested in participating in future research to help Parramatta City Council?  
*This could include surveys and focus groups?*       Yes       No

*(Please note that all personal information will be maintained in accordance to Parramatta City Council's Privacy Management Policy and would not be disclosed under any circumstance to a third party)*

### 5. Disclaimer

Parramatta City Council (*the Council*) will collect and use the personal information obtained through the completion of this questionnaire only for the purpose of research. The Council will in collecting and holding any personal information provided by you, comply with the requirements of the Privacy and Personal Information Protection Act 1998, and in particular with the Information Protection Principles contained in Part 2 thereof.

#### Mail to:

Nancy Hermoso  
Parramatta City Council  
PO Box 32  
Parramatta NSW 2124

Please cut along the dotted line ✂ \_\_\_\_\_

Date Issued \_\_\_/\_\_\_/\_\_\_      Voucher Number \_\_\_\_\_      Voucher Expires on \_\_\_/\_\_\_/\_\_\_  
DD / MM / YYYY      (GoGet Promotional Code)      DD / MM / YYYY



**PARRAMATTA  
CITY COUNCIL**