**Traffic Volume Assessment Survey Form**

Day, date (Gregorian): ……………………………………………………………….

Enumerator: ………………………………………………………………………….

School: ………………………………………………………………………………

Road name & Location of survey: …………………………………………………..

GPS coordinates: ……………………………………………………………………

Weather (e.g. no rain, light rain, heavy rain):……………………………………….

Road Surface: ……………………………………………………………………….

Time period (e.g. 06:00 -06:15): ……………………………………………………

Traffic Direction (e.g. Towards Town): …………………………………………….

|  |  |
| --- | --- |
| **Vehicle type** | **Number of vehicles** |
| Bicycle |  |
| Motorcycle |  |
| Motorised 3-wheeler (Bajaji etc) |  |
| Taxi |  |
| Saloon car |  |
| SUV |  |
| Minivan |  |
| Mini bus (Daladala) |  |
| Bus |  |
| Light truck |  |
| Large truck |  |
| Other |  |