

LEAGUE OF AMERICAN BICYCLISTS

Bicycle Friendly Business Application

Business Profile

* 1. Name of Business

* 2. Name of CEO or Director

* 3. Contact Name

* 4. Position

* 5. Address

5. a. Address 2

* 6. City

* 7. State

* 8. Zipcode

* 9. Phone

* 10. Contact Email

* 11. Company Website

* 12. Number of employees

* 13. Type of business/organization

Accounting/Finance/Insurance

Agriculture/Farming

Biotech/R&D/Science

- Building Construction/Skilled Trades**
- Creative/Design**
- Education**
- Engineering**
- Entertainment**
- Food Service/Hospitality**
- Installation/Maintenance/Repair**
- IT/Software Development**
- Legal**
- Manufacturing/Production**
- Marketing**
- Medical/Health**
- Non-Profit**
- Public Relations**
- Sales/Retail**
- Transportation**
- Other Please list**

13. a. Other business type

* 14. Number of business/office locations. If more than one, please list the city/state of each.

- 1**
- 2-5**
- 6-25**
- more than 25**

14. a. Please list the locations.

14. b. Please list locations or provide a link to a business location directory.

* 15. Location of business(es). Click all that apply if multiple business locations exist.

- urban**
- suburban**
- rural**

* 16. What are the top three reasons your company has made bicycling a priority? Click only three.

- Company moral**

- Corporate Social Responsibility plan**
- Employee productivity**
- Environmental issues**
- Health**
- Recruitment**
- Reduce carbon footprint**
- Transportation options for employees**
- Other please list**

16. a. Please list other reasons.

Encouragement

* 17. Which of the following transportation-related benefits are provided to your employees? Click all that apply.

- [Commuter tax benefit for bicyclists \(effective January 1, 2009\)](#)
- Commuter tax benefit for transit**
- Commuter tax benefit for parking**
- Other cash incentives for bicycle commuters**
- Free secure bike parking**
- Free or subsidized car parking**
- Guaranteed ride home**
- Other please describe**

17. a. Please describe.

* 18. Does your business promote Bike to Work Day?

- Yes**
- No**

18. a. If yes, click all that apply.

- Provide commuters with breakfast**
- Hold a commuter challenge**
- Offer prizes**
- Host a CEO led ride**
- Other please describe**

18. b. Please describe.

* 19. Does your business promote National Bike Month?

- Yes**
- No**

19. a. If yes, click all that apply.

- Arrange social rides**
- Host maintenance clinics**
- Distribute bicycling information**
- Sponsor a community bike month event**
- Other please describe**

19. b. Please describe.

* 20. Do you provide reimbursement toward an employee's purchase of a bicycle or bicycling equipment?

Yes

No

20. a. If yes, please describe.

* 21. Do you provide a company fleet of bicycles for employee use?

Yes

No

21. a. If yes, how many?

1

2-5

6-25

More than 25

21. b. Do you track use of the bike fleet?

Yes

No

If yes, what percentage of employees use them?

less than 10%

11%-25%

26% - 50%

51%-75%

more than 75%

21. c. Additional information and statistics on the use of the company fleet of bicycles.

* 22. Does your company promote bicycling for means other than commuting? Click all that apply.

Employee bike club

Sponsor a bike team or club

Use local bicycle couriers

- Organize rides**
- Sponsor individual riders or encourage participation in charity rides**
- Other please describe**

22. a. Please describe.

* 23. Does your business sponsor or partner with any of the following bicycle advocacy groups? Click all that apply.

- Local (for a list of local bicycle advocacy groups [click here.](#))**
- State (for a list of state-wide bicycle advocacy groups [click here.](#))**
- National (i.e. [Bikes Belong](#), [International Mountain Bike Association](#), [The League of American Bicyclists](#))**

* 24. Does your top management commute to work by bicycle?

- Yes**
- No**

24. a. Additional comments.

Engineering

* 25. Do you provide bicycle parking for employees?

- Yes**
- No**

25. a. If yes, click all that apply.

- Covered**
- Uncovered**
- Secured area**
- Bicycle locker**
- Employees can park their bikes in their work space**

* 26. Do you provide bicycle parking for guests?

- Yes**
- No**

26. a. If yes, click all that apply.

- Covered**
- Uncovered**
- Secured area**
- Bicycle locker**
- Visitors can park bikes inside**

* 27. Does your bike parking meet the security and convenience guidelines recommended by the [Association of Pedestrian and Bicycle Professionals \(APBP\)](#)?

- All**
- Most**
- Some**
- Few**
- None**

* 28. How many bike parking spots do you have?

* 29. How many car parking spots do you have?

* 30. Is the bike parking ____ convenient than the closest car parking?

- more**
- equal**
- less**

* 31. Does your business provide any of the following for bicyclists? Click all that apply.

- Locker room**
- Shower facility**
- Discounted or complimentary gym membership**
- Bicycle repair station**

Maintenance supplies such as tools, pumps, and tubes

Dedicated bike maintenance person

None of the above

* 32. Is your business located in a [Bicycle Friendly Community \(BFC\)](#)?

Yes

No

* 33. How is your workplace accessible by bike? Click all that apply.

Direct access by trail

Adjoining streets have bike lanes

Located on a bike route system

Located on a low traffic street

It is not accessible by bike

Other please describe

33. a. Please describe.

* 34. Did bike accessibility influence your decision to locate your business in this area?

Yes

No

34. a. Additional comments.

* 35. Are you working with local government or advocacy groups to improve conditions for bicyclists?

Yes

No

35. a. If yes, please describe.

Education

* 36. What type of educational classes does your business offer on bicycling? Click all that apply.

- Safe riding skills**
- Maintenance**
- Driver safety on how to share the road with bicyclists**
- Other please describe**
- None**

36. a. Please describe.

* 37. Who teaches these classes? Click all that apply.

- [League Cycling Instructor](#)
- Bike shop employee**
- Knowledgeable staff member**
- Local bicycle advocate**
- No classes offered**

* 38. How often do you offer these classes?

- Monthly**
- Annually**
- As needed**
- No classes offered**
- Other please describe**

38. a. Please describe.

* 39. Is there a mentorship program at your organization that teams experienced bicycle commuters with newcomers?

- Yes**
- No**

39. a. If yes, please describe.

* 40. Does your company provide any of the following educational tools to employees outside of classes/clinics? Click all that apply.

- Information on safe bicycling**
- Help finding bike routes to work**
- Information on proper riding equipment**
- Information on safe driving and sharing the road with bicyclists**
- Calendar of local bicycling events**
- Other please describe**

40. a. Please describe.

* 41. How does the company provide bicycling information other than classes/clinics? Click all that apply.

- Company website or intranet**
- Newsletter or new hire packet**
- Company orientation program**
- Vehicle safety guidelines**
- Other please describe**

41. a. Please describe.

Evaluation

* 42. How many of your employees commute to work by bike more than twice a week?

* 43. Have goals been set for business-wide bike use?

Yes

No

43. a. If yes, what are they?

* 44. Is there a bike coordinator for your business?

Yes

No

44. a. If yes, which?

Full time, paid coordinator

Part time, paid coordinator

Volunteer coordinator

* 45. Are there other unique and innovative things that your business does to promote bicycling that have not been covered in this application?

* 46. What has been your business's most significant investment for bicycling?

* 47. Please list any plans you have for the coming year to improve your company's bicycle friendliness.

* 48. Briefly describe the most positive outcome of your company's support for bicycling. (i.e. improved employee health, increased productivity, moral boost, reduced parking/maintenance cost, etc.)

* 49. a. List three reasons your business should be recognized as a Bicycle Friendly Business.

* 49. b.

* 49. c.

* 50. a. List three areas of bicycle friendliness that you need to improve.

* 50. b.

* 50. c.