

# CHARLESTON CITY PLAN

## COMMUNITY SURVEY

The City of Charleston Planning Division is conducting this survey to inform our new comprehensive plan, the City Plan. The City Plan survey will help us understand what is most important to you and what we should prioritize over the next 10 years to improve neighborhoods, transportation options, housing costs, access to outdoor community spaces, flooding protections and more. This survey consists of thirty (30) questions and should take about ten minutes to complete. Mail or deliver to 2 George St, Third Floor, Charleston, SC 29401 by November 1, 2020.

**All questions are optional and your individual responses will remain confidential.**

### 1. Please select all that apply:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> I own a home in the City of Charleston       | <input type="checkbox"/> I live in the Tri-County region but outside of the City of Charleston | <input type="checkbox"/> I live in the Tri-County region but outside of the City of Charleston        |
| <input type="checkbox"/> I rent a residence in the City of Charleston | <input type="checkbox"/> I work in the City of Charleston                                      | <input type="checkbox"/> Not sure if I live in the City of Charleston or not                          |
| Other (Please specify):   |  | <input type="checkbox"/> I live in the City of Charleston, but I don't own a home or rent a residence |

### 2. How long have you been a community member of Charleston? (Circle one)

0-4 years      5-10 years      11-20 years      21-30 years      31+ years

### 3. What zip code do you live in? (Circle one)

29401      29403      29405      29407      29412      29414      29455      29492

### 4. If you work, where is/are your job(s) located? (Check all that apply)

- |                                       |  |   |  |
|---------------------------------------|--|---|--|
| <input type="checkbox"/> Johns Island | <input type="checkbox"/> Daniel Island/Cainhoy Peninsula | <input type="checkbox"/> Summerville      | <input type="checkbox"/> Other city in Charleston, Berkeley or Dorchester County |
| <input type="checkbox"/> James Island | <input type="checkbox"/> West Ashley                     | <input type="checkbox"/> North Charleston | <input type="checkbox"/> Outside of the Tri-County area                          |
| <input type="checkbox"/> Peninsula    | <input type="checkbox"/> Mount Pleasant                  |   | <input type="checkbox"/> Not applicable  |

### 5. Age: (Circle one)

Under 18      18-24      25-34      35-44      45-54      55-64      65+      Prefer not to disclose

### 6. Gender identity: (Circle)

Man      Woman      Genderqueer/Non-binary      Other      Prefer not to disclose

### 7. Race or ethnicity (please specify):

### 8. Language(s) spoken: (Circle all that apply)

English      Spanish      Other (please specify):

### 9. What is your annual income? (Check one)

- |  |  |  |   |   |
|--|--|--|---|---|
| <input type="checkbox"/> Less than \$16,350  | <input type="checkbox"/> \$27,301 - \$32,760 | <input type="checkbox"/> \$43,651 - \$54,600 | <input type="checkbox"/> \$65,521 - \$81,900  | <input type="checkbox"/> Over \$109,200         |
| <input type="checkbox"/> \$16,351 - \$27,300 | <input type="checkbox"/> \$32,761 - \$43,650 | <input type="checkbox"/> \$54,601 - \$65,520 | <input type="checkbox"/> \$81,901 - \$109,200 | <input type="checkbox"/> Prefer not to disclose |

### 10. Which of the following are most important for improving overall quality of life for the Charleston community? Rank options from 1 (most important) to 12 (least important)

- |   |   |
|---|---|
| _____ Quality architecture and design                       | _____ Having multiple options for housing types and price levels                      |
| _____ Preservation of historic buildings and landmarks      | _____ Equitable access to nature (including water), parks and recreational facilities |
| _____ Preservation of cultural history and racial diversity | _____ Equitable access to art, culture and public spaces                              |
| _____ Effective drainage and flood management               | _____ Equitable access to nearby quality schools                                      |
| _____ Having multiple options for transportation            | _____ Other (specify below):  |
| _____ Living close to work                                  |   |
| _____ Clean environment (air, water, soil, etc.)            |   |

### 11. What do you like most about living in Charleston?

### 12. What is most challenging about living in Charleston?

### 13. Which do you use most often to travel around the city? (Circle one)

Personal car      Carpooling      Rideshare services (Taxi, Uber, Lyft, etc.)      Public transit or combination with public transit      Bike      Walking

### 14. If you had a safe and convenient way to bike or walk to places that you go to often, would you do so? Yes / No / Not Sure

### 15. If Charleston were to have a water ferry or water taxi as a public transportation option, how often would you use it? (Circle one)

Daily      Weekly      Monthly      Rarely      Never

### 16. If Charleston were to have a water ferry or water taxi as a public transportation option, where should stations be located?

### 17. Are you concerned about being able to stay in your current housing? (Circle one)

Not at all      Somewhat      Very

Please list the reasons for your level of concern:

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**18. The following tools have been used in other cities to increase the amount of stable housing for all income levels. Which of the following would you support in your community? (Check all that apply)**

- |  |   |
|--|---|
| <input type="checkbox"/> Allow attached-style housing, such as townhomes, condominiums and flats | <input type="checkbox"/> More flexibility for building design and architectural standards   |
| <input type="checkbox"/> Encourage smaller private yards and more shared community open space    | <input type="checkbox"/> Encourage mixed-income development (market rate and subsidized units mixed together within the same development) |
| <input type="checkbox"/> Other (please specify):   | <input type="checkbox"/> Allow duplexes, triplexes and fourplexes   |

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**19. Has your home or property been damaged by flooding in the past? (Circle one)** Yes / No / Not applicable

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**20. How concerned are you about your home or property being impacted by flooding in the future? (Circle one)**

Not concerned at all                      Somewhat concerned                      Very concerned                      Not Applicable

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**21. Have you taken any actions to protect your home from flood damage recently or in the past? Yes / No / Not applicable**  
If so, describe actions that you have taken. If not, explain why:

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**22. How has flooding impacted your ability to travel around the city?**

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**23. The recent Dutch Dialogues study adopted by City Council recommended a variety of strategies to decrease impacts of flooding and better manage water. Which of the following strategies would you support? (Check all that apply)**

- Prioritize areas of the city at higher elevation for higher-density development
- Require new development to better use the natural landscape to manage flooding and stormwater
- Strengthen building code and stormwater management requirements for new development
- Improve and maintain drainage infrastructure
- Design parks and green space to store water and reduce runoff
- Reduce fill (adding new soil) in low-lying, marsh and areas impacted by tides
- Create a public organization to manage stormwater and flood prevention projects between different cities/towns and counties throughout the region
- Other (please specify):

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**24. Would you like to see more land and water access preserved for recreational public use? Yes / No / Not sure**  
Are there specific locations where you like to see more land and water access preserved for recreational public use?

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**25. Do any of the following make it difficult for you to obtain a job in your preferred field, or to advance in your current field? (Check all that apply)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> No classes and/or training offered locally     | <input type="checkbox"/> Lack of access to reliable transportation   | <input type="checkbox"/> Hard to find affordable office, production, and/or commercial space |
| <input type="checkbox"/> Difficult to access continuing education loans | <input type="checkbox"/> Limited job openings                        | <input type="checkbox"/> Difficult to secure childcare or other family care                  |
| <input type="checkbox"/> Other (please specify):                        | <input type="checkbox"/> Difficult to access business start-up loans | <input type="checkbox"/> Job not offered at an acceptable pay rate                           |

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**26. Which of the following does your neighborhood lack that you wish you had nearby? (Check all that apply)**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Local retail/restaurants                            | <input type="checkbox"/> Trade Workshops/Studios                     | <input type="checkbox"/> Public access to water |
| <input type="checkbox"/> Cultural Institutions (ex: museums, theaters, etc.) | <input type="checkbox"/> Offices/Co-working Spaces                   | <input type="checkbox"/> Employment options     |
| <input type="checkbox"/> Grocery or other food stores                        | <input type="checkbox"/> Community centers & recreational facilities | <input type="checkbox"/> Medical Offices        |
| <input type="checkbox"/> Schools/Educational Facilities                      | <input type="checkbox"/> Parks and open space                        |   |

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**27. How has the Covid-19 pandemic impacted your household? (Check all that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> I or my family member have lost income                             | <input type="checkbox"/> My children's education has been negatively impacted            |
| <input type="checkbox"/> I or my family member lost a job                                   | <input type="checkbox"/> I or my family has changed our work location/commuting patterns |
| <input type="checkbox"/> I or my family member lost housing or is at risk of losing housing | <input type="checkbox"/> None of the above   |
| <input type="checkbox"/> Other (please specify):  |  |

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**28. Is there anything else that you would like to share that was not addressed in the questions above?**

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**29. How did you hear about this survey? (Check all that apply)**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Television  | <input type="checkbox"/> Word of mouth | <input type="checkbox"/> City of Charleston website |
| <input type="checkbox"/> Social media (Facebook, Twitter, Instagram, etc.) | <input type="checkbox"/> Newspaper     | <input type="checkbox"/> Neighborhood organization  |
|  |  | <input type="checkbox"/> Flyer/sign/postcard        |