

Town of Stoughton Official Community Plan – Community Questionnaire

The Town of Stoughton is planning for the future and would like your input! The Town is engaging community members and stakeholders in a comprehensive planning process to help guide future growth and development over the next 25+ years. As a result of this process, an Official Community Plan (OCP) will be developed that includes the community's shared vision, objectives and policies regarding land, economic, social, environmental and cultural development within the community. A Zoning Bylaw and related materials including a Future Land Use Map, Zoning District Map and Reference Maps will also be created.

As a community member, your input and feedback in this process is most important. There will be an opportunity for you to join us at an upcoming community meeting:

Friday, September 29, 2017 at the Stoughton Legion Hall from 6:00 PM – 8:00 PM.

Everyone welcome!

Prior to the Community Meeting a BBQ Fundraiser will start at 5:00 PM.

This survey will take approximately 10-15 minutes to complete. Your individual responses will be kept in confidence and only used in aggregated (grouped) form in documents shared with the community. Please mail, email, or drop the survey off before **September 22, 2017** either:

- To the Town office;
- Bring the completed form to the Community Meeting on September 29, 2017;
- Mail it to our planning consultants,
 - Prairie Wild Consulting Co. at 233 Ave C South; Saskatoon, SK, S7M 1N3; or,
- Scan and email it to alicia.buckley@prairiewildconsulting.ca.

You may also access this survey online at:

<https://www.surveymonkey.com/r/StoughtonOfficialCommunityPlanningProcess2017>

Thank you for contributing to your community and surrounding area!

Stoughton and Surrounding Area Today

1. What sets the Town of Stoughton and area apart is _____

2. What are three (3) important features or amenities that you value the most about Stoughton and the surrounding area?

a. _____

b. _____

c. _____

3. When considering the current state of the Town of Stoughton and surrounding area, please reflect on the following four qualities of what makes a great place: access and linkages; sociability; comfort and image; and, uses and activities. How would you rate the following?

| Access and Linkages | | | | | | Sociability | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | Poor | Fair | Average | Good | Great | | Poor | Fair | Average | Good | Great |
| Connectivity to Surrounding Communities/ Region | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Street Liveliness and Activity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ease of Walking/ Mobility in Community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Evidence of Volunteerism | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alternative Transportation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sense of Pride and Ownership | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Clarity of Information/Signage | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Presence of Children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overall Accessibility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Presence of Seniors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please share any comments regarding the above here:

| Comfort and Image | | | | | | Uses and Activities | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | Poor | Fair | Average | Good | Great | | Poor | Fair | Average | Good | Great |
| Overall Attractiveness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Mix of Uses (Housing, Services, Stores) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Feeling of Safety | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Frequency of Community Events | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cleanliness/ Maintenance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Overall 'Busy-ness' of the Area | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comfort of Places to Sit | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Economic Opportunity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please share any comments regarding the above here:

The Future of Stoughton and Surrounding Area

4. Thinking 25+ years from now, what is your most hoped for vision for the Town of Stoughton and surrounding area in 2042 (how do you see the community growing, how do you see community members interacting with each other, what does the landscape look like, what activities are people engaged in)?

5. What are some opportunities we can identify and work on together with our neighbours? e.g. Municipalities, First Nations, Métis, others.

6. What are some specific strategies you may suggest for the Town of Stoughton regarding the following:

| | | |
|--|------------------------------------|---|
| Agriculture: | Heritage and Culture: | Neighbourly Relations: |
| Natural Resources and Resource Extraction: | Health and Wellness: | Community Services (education, events, community organizations): |
| Public Safety: | Public Works: | Recreation: |
| Economic Development and Tourism: | Housing: | Open/Green Space: |
| Environment and Sensitive Areas (air, flood hazard, energy use): | Infrastructure and Transportation: | Other, Please Specify (including what you do and do not want to see): |

7. From your suggestions above, please share which strategies are your top three (3) priorities that you would like to see implemented:

- a. _____
- b. _____
- c. _____

8. What traditions, values, and principles would you like to see preserved and continued into the future?

Final Thoughts

9. Please share any other thoughts or suggestions that may help in the development of the Town of Stoughton’s Official Community Plan.

Survey Demographics

10. To help quantify this data, please provide the following demographic information. Your responses are kept in confidence and only used in aggregated (grouped) form.

a. Please share which municipality you live in?

- In the Village, Town or City of _____ Area (N/E/S/W): _____
- In the RM of _____; Please identify which Division: _____
- Elsewhere, please specify: _____
- Prefer not to say

b. Please share your age range:

- 19 and Under 20-29 30-39
- 40-49 50-64 65+
- Prefer not to specify

c. Please share your gender:

- Female
- Male
- Prefer not to specify

Questionnaire Finished!

Thank you for taking the time to complete this questionnaire!

If you would like to stay informed and updated throughout this process, please provide your name and email on a separate piece of paper. This will remain separate from your survey responses.