

Light Truck driver survey questions

Home postcode: _____

1. What is (or was) the make and model of the light truck which was involved in the crash?
2. Do you (or did you) own the light truck that was involved in the crash?
Yes No
3. If yes, how long have you (or had you) owned the light truck that was involved in the crash? ____
4. If no, was the vehicle __ borrowed __ hired
5. How many years experience have you had driving light trucks (any vehicle not just the one involved in the crash)
6. Is the vehicle which was involved in the crash a vehicle you drive (or drove) regularly eg more than 3 times per week? __ Yes
__ No
7. Do you (or did you) drive this vehicle __ monthly __ weekly __ daily
8. Why did you choose to own this type of vehicle? _____
9. What is this vehicle primarily used for? _____
10. Is this (or was this) your primary vehicle or a second vehicle? Primary/Secondary
11. What do you believe caused the crash? Eg if you were distracted could you please identify how you were distracted, if it was fatigue related please let us know what the circumstances leading to your fatigue were, etc.

12. Did you ever have any new or additional on road or off road training in how to handle your vehicle? __ Yes __ No
 13. If yes what? _____
 14. Do you believe additional skills or information about safe loading, acceleration and stopping distances in laden vehicles, towing etc could have helped you to avoid the crash you were involved in?
__ Yes __ No
 15. If so which skills would be particularly useful?
__ safe loading
__ stopping distances in a laden vehicle
__ towing
__ acceleration and handling ability in laden vehicles especially cornering
__ assessing gaps when overtaking
__ driving a light truck in heavy winds, rain or ice
__ Any others? _____
 16. Do you still drive this type of vehicle? __ Yes __ No
 17. Have you changed the way you drive this vehicle (behaviour) since the crash?
__ Yes __ No
 18. If yes what's different _____
 19. Has your attitude to driving this vehicle changed since the crash? __ Yes __ No
 20. If yes what's different _____
 21. Is there anything you could have safely done to avoid the crash? __ Yes __ No
 22. If yes what could you have done or what would you do differently if you were in the circumstances again? __
 23. From your experience what message what you pass on to other drivers of light trucks?
 24. We are planning to hold defensive driver training days for light truck owners later in the year. Would you be interested in attending such a day? __ Yes __ No
 25. If yes would you like us to contact you with dates and further information?
__ Yes __ No
 26. If yes please provide your email or phone number _____
- Thank you for taking the time to assist us in this valuable road safety project.

Please send my \$20 petrol gift voucher to:-

Note: Only the first 100 participants will be sent a \$20 petrol gift voucher and postal address details must be provided.

Name:

Address: