

INTERVIEWER TO COMPLETE (Heavy goods vehicles only)

Serial number _____ Site number _____ Date _____ Time _____

Vehicle Type? OGV1 ₁ OGV2 ₂ Other (WRITE) _____

Foreign Vehicle Indicator UK ₁ non-UK ₂ (If Non-UK state country of registration) _____

Q1 What is the Postcode of where you started this journey?

Postcode:

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If you do not know the postcode please state the address:

Q2 What type of location have you just come from? TICK ONE BOX ONLY

Residential ₁ Agricultural & fishing ₃ Freight facilities / terminal ₅
Retail ₂ Industrial / business ₄ Other (PLEASE STATE) ₆

Q3 What is the Postcode of your destination?

Postcode:

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If you do not know the postcode please state the address:

Q4 What type of location are you going to? TICK ONE BOX ONLY

Residential ₁ Agricultural & fishing ₃ Freight facilities / terminal ₅
Retail ₂ Industrial / business ₄ Other (PLEASE STATE) ₆

Q5 What type of goods are you transporting today? TICK ONE BOX ONLY

Agricultural products & Live animals ₁ Ores and mineral waste ₅ Chemicals ₉
Food stuffs and animal fodder ₂ Metal products ₆ Machinery, transport equipment ₁₀
Solid mineral fuels ₃ Minerals & building materials ₇ Leather & textiles, other manufactured articles ₁₁
Petroleum products ₄ Fertilisers ₈ Miscellaneous (PLEASE STATE BELOW) ₁₂

Q6 Have you made or will you be making multiple drops or pick ups today? Yes ₁ No ₂

Q7 What is the unladen weight of your vehicle? _____

Q8 What is the approximate weight of the goods you are transporting now? _____

Q9 How full is your vehicle? Full ₁ ¾ Full ₂ ½ Full ₃ ¼ Full ₄ Empty ₅

Q10 Would you be willing to take part in further research regarding your views on the Scottish transport system?

Yes ₁ Contact Details: Name _____ Tel No _____

Home address (if not noted above): _____

No ₂ END