
TAKING CARE OF BUSINESS

(CONFIDENTIAL)

Business Expansion and Retention Survey

Survey Number _____ SIC/NAICS _____

Interviewer _____ Date: _____

GENERAL INFORMATION

Name of Business _____

Street Address _____

P.O. Box _____

City, State, ZIP _____

Phone _____ Fax _____

CEO/Owner/Manager _____

Title _____

TAKING CARE OF BUSINESS

Business Expansion and Retention Survey

Survey Number _____ SIC/NAICS _____

PART I. COMPANY PROFILE

0010. What form of organization is your business?

1. ____ Corporation
2. ____ Nonprofit corporation
3. ____ Partnership
4. ____ Sole proprietor
5. ____ Family business

0020. When and where was your firm established?

1. ____ Year
2. ____ Place _____

0025. How long has your firm been established in the city?

1. ____ 1-2 years
2. ____ 3-5 years
3. ____ 6-10 years
4. ____ More than 10 years

0030. What is your primary type of business?

(Please select one or more of the fields listed below)

1. ____ Construction
2. ____ Finance
3. ____ Manufacturing
4. ____ Real Estate
5. ____ Retail
6. ____ Service
7. ____ Technology
8. ____ Transportation
9. ____ Wholesale

(Please describe) _____

0045. What is your principal market area? (Enter this as a percentage for each of the following categories. The total of all categories will be 100%)

1. ____ City
2. ____ Trade area (200-mile radius)
3. ____ State
4. ____ National
5. ____ International

0055. What specific product or service does your firm provide? _____

0060. Is your firm minority or female-owned?

1. ____ Yes.
2. ____ No

0080. Do you own or lease this facility?

1. ____ Own 2. ____ Lease

0085. If leased, does your lease expire within:

1. ____ 1 year
2. ____ 2 years
3. ____ 3-5 years
4. ____ More than 5 years

0086. Do you have multiple locations?

1. ____ Yes
2. ____ No
3. If yes, where? _____

0087. Approximately how much building space do you occupy?

1. ____ Less than 1,000 sq. ft.
2. ____ 1,001-3,000 sq. ft.
3. ____ 3,001-10,000 sq. ft.
4. ____ 10,001-50,000 sq. ft.
5. ____ More than 50,000 sq. ft.

0088. Number of acres: _____

0090. Have you made local capital investment in the past three years?

1. ____ Yes 2. ____ No

If yes, what kind of capital investment?

3. ____ Facilities renovation
4. ____ Machinery/equipment
5. ____ Computer(s)
6. ____ Trucks/mobile equipment

Other: _____

0092. Is your present facility and location adequate?

1. ____ Yes 2. ____ No

If no: _____

Acreage requirements: 3. _____

Facility requirements: 4. _____

0094. Have you expanded your business within the past 3 years?

1. ____ Yes 2. ____ No

0096. If yes, was it:

1. ____ at the same location
2. ____ at a new location within the community
3. ____ at a new location outside the community

0098. If the expansion was at a new location, did the old location remain an operative part of your business?

1. ____ Yes 2. ____ No

0100. Are you planning any expansion?

1. ☐ Yes 2. ☐ No If yes, when?
3. ☐ Within 1 year
4. ☐ 1-2 years
5. ☐ 2-5 years
6. ☐ More than 5 years

0102. If you were to expand, how much additional space would you occupy?

1. ☐ Less than 1,000 sq. ft.
2. ☐ 1,001-3,000 sq. ft.
3. ☐ 3,001-10,000 sq. ft.
4. ☐ 10,001-50,000 sq. ft.
5. ☐ More than 50,000 sq. ft.

0104. If you were to expand, where would you expand?

1. ☐ Within city
2. ☐ Outside city
3. ☐ Outside the region
4. ☐ Outside state
5. ☐ Not sure

0106. Do you expect your business to:

1. ☐ Expand 15% over the next 3 years
2. ☐ Expand less than 15% over the next 3 years
3. ☐ Remain about the same over the next 3 years
4. ☐ Decline over the next 3 years
5. ☐ Decline more than 15% over the next 3 years
6. To what do you attribute the expected increase or decline in your business? _____

0107. If the firm has not recently expanded, and does not plan to expand soon, please indicate the primary factor that keeps you from expanding:

1. ☐ Land
2. ☐ Cost of capital
3. ☐ Labor supply
4. ☐ market condition
5. ☐ Other _____

0108. Have you reduced your business operation in the last 3 years?

1. ☐ Yes 2. ☐ No

0110. What was the reason for the reduction?

1. ☐ Market decline
2. ☐ Increased competition
3. ☐ Increased cost of production
4. ☐ Other: _____

0112. Are you considering relocating your business?

1. ☐ Within the city
2. ☐ Outside the city
3. ☐ Outside the region
4. ☐ Outside the state
5. ☐ Not considering relocation

0115. Are the following factors adversely affecting your operations? (Check all that apply)

1. ☐ Availability of capital
2. ☐ Availability of land
3. ☐ Availability of suitable building space
4. ☐ Availability of labor
5. ☐ Labor productivity
6. ☐ Commute time for employees
7. ☐ Availability of technical personnel
8. ☐ Availability of management talent
9. ☐ Transportation
10. ☐ Access to R&D facilities
11. ☐ Access to air transportation
12. ☐ Proximity of suppliers
13. ☐ Company parking space
14. ☐ Traffic congestion
15. ☐ Telecommunications
16. ☐ Mail services
17. ☐ Utility services
18. ☐ Energy reliability
19. ☐ Utility costs
20. ☐ Educational facilities
21. ☐ Availability of labor training
22. ☐ Crime

0116. Are there technological innovations that would enable you to keep pace with or improve your competitive position or improve your firm's earnings if you were able to utilize them?

1. ☐ Yes 2. ☐ No

0117. If so, what innovations are critical to your business success? List:

0118. What changes is your business planning for the next 2-3 years? (Check all that apply)

1. ☐ Mix of goods and services
2. ☐ Expand facility
3. ☐ Relocate
4. ☐ Add employees
5. ☐ Reduce number of employees
6. ☐ Change production technology
7. ☐ Add product lines/services
8. ☐ Other (please describe): _____

0120. What resources (raw materials, components, etc.) is your company dependent on for its operations?
Provide annual dollar amount of purchases for each: _____

0121. Which of these resources do you purchase locally? Provide annual dollar amount for each resource: _____

0122. Which ones must you obtain from outside city? Provide annual dollar amounts for each resource:

0124. Where are most of your major competitors located? (Check all that apply)

- 1. ____ Within the city
- 2. ____ Elsewhere in the county
- 3. ____ Outside the city and county

0125. Would you say that your major competitors: (check all that apply)

- 1. ____ Are making significant inroads
- 2. ____ Have never been a consideration
- 3. ____ Are a future threat
- 4. ____ Have no real impact

0127. Do you import or export products (outside USA)?

- 1. ____ Import 2. ____ Export 3. ____ Both

0128. Would a relationship with a foreign country substantially increase the sales of your products or services?

- 1. ____ Yes 2. ____ No

0129. If so, are you interested in starting or expanding importing or exporting

- 1. ____ Import 2. ____ Export

If yes, what goods or services would this involve?

3. _____

Part II. Labor

0130. How many employees do you have?

- 1. ____ 0-4
- 2. ____ 5-9
- 3. ____ 10-19
- 4. ____ 20-49
- 5. ____ 50-99
- 6. ____ 100-249
- 7. ____ 250-499
- 8. ____ 500-499
- 9. ____ 1000+

0131. The average number of full-time employees at this location last year:

- 1. ____ Less than 10
- 2. ____ 11-25
- 3. ____ 26-50
- 4. ____ 51-200
- 5. ____ More than 200

0132. The average number of part-time employees at this location this year:

1. ____ Less than 10
2. ____ 11-25
3. ____ 26-50
4. ____ 51-200
5. ____ More than 200

0133. Of total work force, approximately what percentage requires at a minimum:

1. ____ % high school diploma or its equivalent
2. ____ % one year of college courses (30 hours)
3. ____ % associate degree
4. ____ % baccalaureate degree
5. ____ % graduate degree
6. ____ % certificate of training (6 months to a year)

0135: How many of your employees (full time) are in each of the following occupational categories?

1. ____ Professional (engineer, architect, etc.)
2. ____ Managerial (executive, plant managers, etc.)
3. ____ Sales (parts person, salesperson, etc.)
4. ____ Clerical (bookkeeper, clerk, secretary, etc.)
5. ____ Services (guard, cook, waitress, maid, etc.)
6. ____ Agriculture (groundskeeper, gardener, etc.)
7. ____ Machine operative (machinist, welder, etc.)
8. ____ Precision production (plumber, repair, maintenance, etc.)
9. ____ Technical (dental asst., drafter, etc.)
10. ____ Handler/laborer (driver, package handler, etc.)
11. ____ Other: _____

0136. What is your percentage of employee turnover, if known?

1. ____ 0-1%
2. ____ 1.1% - 3%
3. ____ 3.1 – 5%
4. ____ 6% - 10%
5. ____ 10% +

0137. Will your work force over the next year be:

1. ____ Increasing
2. ____ Reducing
3. ____ Other

0140. What is your average pay rate?

1. ____ Management \$ _____
2. ____ Non-management \$ _____

0142. What is the total annual payroll for your business? \$ _____

0143. What benefits do you offer employees? (Check all that apply)

1. ____ Medical insurance
2. ____ Profit sharing
3. ____ Retirement plan
4. ____ Vacation and sick leave
5. ____ Other: _____

0144. Where do you get your employees? (Check all that apply)

1. ☐ Area vocational schools
2. ☐ College/universities
3. ☐ Employment agency
4. ☐ Job service (TWC)
5. ☐ Job training
6. ☐ Newspaper ads
7. ☐ Other employees
8. ☐ Word of mouth
9. ☐ Chamber of commerce
10. ☐ Other (specify): _____

0146. Have you experienced any difficulties in RECRUITING any of the following categories of employees? (Check all that apply)

1. ☐ Professional/managerial
2. ☐ Clerical
3. ☐ Sales and marketing
4. ☐ Heavy equipment operators
5. ☐ Skilled technicians
6. ☐ Other (specify): _____

0149. Would you like to be contacted about training assistance that is available?

1. ☐ Yes
2. ☐ No

0150. What is your opinion of the following institutions as sources of new employees?

0152. Local High Schools

1. ☐ Favorable
2. ☐ Unfavorable
3. ☐ No opinion
4. ☐ Why? _____

0154. Community College District

1. ☐ Favorable
2. ☐ Unfavorable
3. ☐ No opinion
4. ☐ Why? _____

0156. Vocational Technical School

1. ☐ Favorable
2. ☐ Unfavorable
3. ☐ No opinion
4. ☐ Why? _____

0158. Local University

1. ☐ Favorable
2. ☐ Unfavorable
3. ☐ No opinion
4. ☐ Why? _____

0160. Rate all the following factors as they relate to the RECRUITMENT of employees:

1=Significant

2=Somewhat significant

3=Not significant

1. ____ Remoteness of the area
2. ____ Area skill & labor supply shortages
3. ____ Local training programs
4. ____ Seasonal nature of the work
5. ____ Lack of educational facilities
6. ____ Wage rates
7. ____ Other (specify): _____

0162. Rate all of the following factors as they relate to the RETENTION of employees:

1=Significant

2=Somewhat significant

3=Not significant

1. ____ Remoteness of the area
2. ____ Area skill & labor supply shortages
3. ____ Local training programs
4. ____ Seasonal nature of the work
5. ____ Lack of educational facilities
6. ____ Wage rates
7. ____ Other (specify): _____

PART III. BUSINESS SERVICES

0170. What importance do you give the following factors in considering remaining, expanding of relocating?

1=Important

2=Somewhat important

3=Not important

1. ____ Labor (Cost, skill, etc.)
2. ____ Transportation (air, rail, roadways)
3. ____ Land (zoning, cost, lease space, etc.)
4. ____ Permit processes
5. ____ Public utilities and services
6. ____ Government programs (assistance, incentives)
7. ____ Locations to other companies
8. ____ Availability of capital (conventional, venture, etc.)
9. ____ Business services (financial, legal, research, etc.)
10. ____ Market access (local, regional, state, national international)
11. ____ Quality of life (environment, recreation, cultural, housing, etc.)
12. ____ Racial, language, ethnic differences
13. ____ State/local taxes
14. ____ Education
15. ____ Supply access (raw materials, components, etc.)
16. ____ Local government
17. ____ Law enforcement (crime rate)
18. ____ Medical services
19. ____ Chamber of commerce
20. ____ News media support
21. ____ Location

0171. What factors listed in Question 0170 do you regard as most ADVANTAGEOUS or favorable to remaining, expanding or relocating within this community? (Specify by number, up to four corresponding factors from the list above)

1. ____
2. ____
3. ____
4. ____

0172. What factors in Question 0170 could DISCOURAGE you from expanding or remaining? (Specify by number up to four corresponding factors from the list above)

1. ____
2. ____
3. ____
4. ____

0175. Have you sought management assistance from any of the following? (Check all that apply)

1. ____ Bank/savings and loan
2. ____ College/university
3. ____ Community college
4. ____ Area vocational technical institute
5. ____ Chamber of commerce
6. ____ State agency
7. ____ Federal agency (SBA, etc.)
8. ____ Attorney
9. ____ Professional consultant
10. ____ Other: _____

0176. Have you received business financing assistance within the last five years from any of the following? (Check all that apply)

1. ____ Bank/savings and loan
2. ____ Accountant
3. ____ Venture capital money
4. ____ Private investor
5. ____ Chamber of commerce
6. ____ State agency
7. ____ Federal agency
8. ____ Family or personal savings
9. ____ Other: _____

0180. Please indicate which of the following problems, if any, you experienced in seeking external financing:

1. ☐ Lender reluctant to fund NEW projects
2. ☐ Insufficient collateral
3. ☐ Insufficient track record in business
4. ☐ Insufficient management experience
5. ☐ Insufficient credit history
6. ☐ Lender reluctant to make working capital loans
7. ☐ Insufficiently developed business plan and marketing strategy
8. ☐ Inadequate equity contribution
9. ☐ Lender's emphasis on larger projects
10. ☐ Geographic unavailability of funds
1. ☐ Inability of local banks to lend without parent company approval
12. ☐ Other (specify): _____

0182. In your opinion, is sufficient financing available through your community financial institutions or other community sources of capital?

1. ☐ Yes 2. ☐ No

0184. Have you obtained capital outside of your community?

1. ☐ Yes 2. ☐ No

0186. Please indicate financing currently needed for your business, if any:

1. ☐ Fixed assets
2. \$ ☐ Amount
3. ☐ Working capital
4. \$ ☐ Amount
5. ☐ Other (specify): _____
6. \$ ☐ Amount

0190. Have you looked for marketing assistance from any of the following? (Check all that apply)

1. ☐ Bank/savings and loan
2. ☐ Private consultant
3. ☐ Chamber of commerce
4. ☐ State agency
5. ☐ Federal agency (SBA, etc.)
6. ☐ Marketing club or group
7. ☐ Corporate franchise
8. ☐ Trade association(s)
9. ☐ College/university
10. ☐ Other: _____

0195. Have you used any of the following programs for training or financial assistance? (Check all that apply)

1. ☐ Jobs tax credit
2. ☐ Economic development corporation
3. ☐ State university
4. ☐ Community college
5. ☐ Vocational technical college
6. ☐ Other: _____

0200. Are locally available (off-plant site) training programs adequate to train unskilled workers to fulfill your job requirements?

1. ☐ Yes 2. ☐ No

0201. Are locally available (off-plant site) training programs adequate to fulfill your needs for training supervisory and management categories?

1. ☐ Yes 2. ☐ No

0202. Do you think productivity (output) of production workers could be improved through additional training to upgrade their skills?

1. ☐ Yes 2. ☐ No

0203. Do you think your operation could be improved through additional supervisory or management training?

1. ☐ Yes 2. ☐ No

0204. Do you think your operations could be improved through motivational and attitude training for your employees?

1. ☐ Yes 2. ☐ No

0210. What were your primary reasons for locating your business here? (Check top four reasons)

1. ☐ Family ties

2. ☐ Area labor cost

3. ☐ Labor supply

4. ☐ Quality of life

5. ☐ Proximity to market

6. ☐ Financial incentives

7. ☐ Availability of land

8. ☐ Cost of land

9. ☐ Availability of raw materials

10. ☐ Educational system

11. ☐ Profit potential of area

12. ☐ Cost of doing business/low startup cost

13. ☐ Tax rates

14. ☐ Utility costs

15. ☐ Other (please describe): _____

0215. For each of the following factors in the community, please indicate the degree of satisfaction as related to the success of your business.

1=Good 2=Fair 3=Poor

1. ____ Roads
2. ____ Sewers
3. ____ Water
4. ____ Police protection
5. ____ Fire protection
6. ____ Solid waste disposal
7. ____ Liquid waste disposal
8. ____ Adequacy of hazardous waste disposal
9. ____ Emergency medical service (ambulance)
10. ____ Medical services (doctor, hospital)
11. ____ Electric utilities
12. ____ Gas utilities
13. ____ Availability of local telecommunications service
14. ____ Quality of local telecommunications
15. ____ Public school system quality
16. ____ Higher education quality
17. ____ Availability of continuing business education
18. ____ Capital availability (conventional, venture, industrial development bonds, etc.)
19. ____ Availability of business services (legal, financial, research)
20. ____ Business networking
21. ____ Building codes
22. ____ City zoning
23. ____ Availability of facility space
24. ____ Cost of facility space
25. ____ Availability of land
26. ____ Land cost
27. ____ Land regulations
28. ____ Adequacy of air transportation
29. ____ Adequacy of rail transportation
30. ____ Automobile traffic flow
31. ____ Roadways adequacy and conditions
32. ____ Public Transportation
33. ____ Permit processes
34. ____ Availability of government assistance and incentives
35. ____ State taxes
36. ____ Local taxes
37. ____ Quality of life
38. ____ Other (please specify): _____

0216. If you indicated a problem above, have you contacted the appropriate agency or office about this problem?

1. ____ Yes 2. ____ No

0218. If yes, was the problem solved?

1. ____ Yes 2. ____ No

0220. Has your business experienced a financial loss due to crime in the past year?

1. ____ Yes 2. ____ No

0220. Have any of your employees been the victim of a crime on or near your premises in the past year?

1. ____ Yes 2. ____ No

0224. Were you satisfied with the police response and assistance?

1. ____ Yes 2. ____ No

3. ____ If not, why not? _____

0226. Are you satisfied with entrance, exit, traffic control, and road conditions around your place of business?

1. ____ Yes 2. ____ No

3. ____ If not, why not? _____

0228. Have you experienced any fire damage at any of your facilities in the last 12 months?

1. ____ Yes 2. ____ No

0230. If yes, was the Fire Department responsive to your call?

1. ____ Yes 2. ____ No

0232. Do you feel that the city's code enforcement efforts are being properly accomplished? (Weeds, litter, maintenance of structures)

1. ____ Yes 2. ____ No

0234. Have you been satisfied with the process of getting a building permit for your business?

1. ____ Yes 2. ____ No

0252. What is the single most significant action that other private and public organizations could do to improve your business?

0254. What can the State do to improve your business?

0260. What is your overall opinion of doing business with the city of _____

- 1. ____ Excellent
- 2. ____ Good
- 3. ____ Fair
- 4. ____ Poor
- 5. ____ No opinion

0262. What kind of support do you think the Chamber of Commerce should give?

0264. Are you a Chamber member?

1. ____ Yes 2. ____ No

If not, why not? (Choose all that apply)

3. ____ Dues structure

4. ____ Value received

5. ____ Services provided

6. ____ Leadership

7. ____ Other (please describe): _____

0266. Your opinions are important. Is there anything else you would like to tell us about your business needs or ways we can improve the community's economy?
