

On-Site Visit Form

11.21.05

Company Information

Company name: _____

Company Address: _____

Contact name: _____

Phone number: _____ No. of Employees: _____

N.A.I.C. code(s): _____ Community _____

Contact(s):

Person interviewed: _____ Phone #: _____

Title: _____ Date of visit (mm/dd/yy): _____

Name of interviewer(s): _____

Organization of interviewers: _____

Product/Service

1. What is your company's greatest achievement in the last 5 years?

2. Where is the company's primary product/service in its life cycle:

emerging growing maturing declining

3. Has the company introduced new products/services/capabilities during the last five years? Yes No

4. Are new products/services anticipated in the next two years? Yes No

5. Is there new technology emerging that will substantially change either your company's primary product or how it is produced? Yes No

If yes, please explain: _____

6. As a percent of sales, how much does the company spend on R&D? _____% 0 Under 3 3-6 Over 6

7. As a percentage, approximately how is the R&D budget divided among:

new product development: _____%

product improvement: _____%

production improvements: _____%

8. Where is the R&D facility located? _____

Notes:

On-Site Visit Form

11.21.05

Market

9. Is the company's **primary** market: local regional national international
10. Are total company sales: increasing stable decreasing
11. Is the market share of the company's **key product(s)** increasing stable decreasing
Please explain: _____

12. Does the company plan to expand in the next 3 years? Yes No
If yes, estimated dollar investment: \$ _____
estimated number of jobs to be created: _____
estimated facility size increase: _____ sq. ft.
approximate date of expansion: _____
13. Are export sales as a % of total sales: increasing stable decreasing no exports
Where are your export markets? _____
14. Is the percentage of products and/or components **imported** by the company:
increasing stable decreasing no imports
15. Does the company have **overseas production**? Yes No
If **yes**, where is the overseas production located? _____
Is it contract production or a company facility? Contract production Company facility

Notes:

Industry

16. Approximately what percentage of U.S. market share do **international competitors** control for your company's primary product? _____% 0 under 20 21-50 over 50
Where are the international competitors located (country or region)? _____
17. Is overseas production by **U.S. competitors**: increasing stable decreasing
Please explain: _____

18. Is merger, acquisition or divestiture activity in your industry:
increasing stable decreasing
19. Has the company's ownership changed in the last 18 months, or do you anticipate a change?
Yes No If yes, explain: _____

On-Site Visit Form

11.21.05

20. In your industry is production: under capacity balanced over capacity

21. Do you anticipate any federal, state, or local legislation changes that will **adversely affect** your business in the next five years? Yes No

If yes, what changes: _____

How will they affect the company? _____

Management

22. Do you anticipate any federal, state, or local legislation changes that will **benefit** your business in the next five years? Yes No

If yes, what changes: _____

How will they affect the company? _____

Can you suggest any legislation that will benefit your business? _____

Notes:

23. Has the company's top management changed or is it expected to change in the next 18 months?

Yes No If yes, explain: _____

24. Are the projected employment needs for this facility: increasing stable decreasing

25. Will the following projected utility needs for this facility be increasing, stable or decreasing?

Type of Utility	Increasing	Stable	Decreasing
Water	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sewer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Electric	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Telecommunications (type _____)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. Are the company's current facilities adequate for anticipated future operations? Yes No

If no, why not: _____

Notes:

On-Site Visit Form

11.21.05

27. What are the community's **strengths** as a place to do business?

28. What are the community's **weaknesses** as a place to do business?

29. Are there any **barriers to growth** in this community? Yes No

If so, what: _____

30. Does the attitude among **executives at corporate headquarters** toward this community as a place to do business differ from local management? Yes No

If yes, please explain. _____

31. Are there any reasons the community may not be considered for future expansion? Yes No

If yes, please explain: _____

Workforce

1 2 3 4 5

32. How do you rate the **availability** of workers in this area? O O O O O 1 low - 5 high

33. How do you rate the **quality** of workforce in this area? O O O O O 1 low - 5 high

34. How do you rate the **stability** of workforce in this area? O O O O O 1 low - 5 high

35. As compared to other company facilities, how would you rate **productivity** in this facility? O O O O O 1 low - 5 high

36. Is the number of unfilled positions: increasing stable decreasing

37. Is the company experiencing recruitment problems with any employee positions or skills? Yes No
If yes, what problems, positions, skills? _____

38. Do these recruiting problems relate to: industry community

39. Is company investment in employee training:

increasing stable decreasing no company training

40. If investing in employee training, what % of the training budget is for:
new job skills training _____%; **remedial skills training** _____%?

On-Site Visit Form

11.21.05

Marketing Information

41. Are there suppliers or services that would benefit by being located closer to this facility? Yes No

If yes, company and location: _____

42. Are there customers that would benefit by being closer to this facility? Yes No

If yes, company and location: _____

43. Please rate the quality of the following services provided by the community on a scale of 1 to 5.

1 low - **5** high **D** Does not apply

	1	2	3	4	5	D
Police protection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fire protection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ambulance paramedic service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Traffic control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sewage treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Water quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Schools (K-12)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Earnings Tax collection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regulatory enforcement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Village services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
County services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide us with additional information on any items that you have rated a 2 or less.

Do you have any other comments you would like to share?
