

To be filled out by the interviewer — Information is confidential

12.5.07

18. Do you anticipate any federal, state, or local legislation changes that will benefit your business in the next five years: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what changes? _____ How will they affect the company? _____ _____	DNA/K Dcl
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Industry Notes

Management

19. Has the company's ownership changed in the last 18 months, or do you anticipate a change: <input type="checkbox"/> Changed <input type="checkbox"/> Change Pending <input type="checkbox"/> No If changing, please explain: _____ _____ _____	DNA/K Dcl
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Has the company's top management changed or is it expected to change in the next 18 months: <input type="checkbox"/> Changed <input type="checkbox"/> Change Pending <input type="checkbox"/> No If changing, please explain: _____ _____ If changed, what impact will this/these changes have on the local operation? _____ _____	DNA/K Dcl
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20. Are the projected employment needs for this facility: <input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing	DNA/K Dcl
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21. What are the community's strengths as a place to do business? _____ _____	DNA/K Dcl
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22. What are the community's weaknesses as a place to do business? _____ _____	DNA/K Dcl
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23. Are there any barriers to growth in this community? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what? _____ _____	DNA/K Dcl
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24. Does the attitude among executives at corporate headquarters toward this community as a place to do business differ from local management: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain? _____ _____ _____	DNA/K Dcl
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ON-SITE VISIT FORM 3.1

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25. Are there any reasons the community may not be considered for future expansion? <input type="checkbox"/>Yes <input type="checkbox"/> No If yes, please explain? _____ _____	DNA/K	Dcl
26. Are there suppliers or service providers that the company would like to have located closer to this facility: <input type="checkbox"/>Yes <input type="checkbox"/> No If yes, product/service, company, and current location? _____	DNA/K	Dcl
<i>Management Notes</i>		

Workforce										
	Low	1	2	3	4	5	6	7	High	
27. How do you rate the availability of workers in this area:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
28. How do you rate the quality of workforce in this area:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
29. How do you rate the stability of workforce in this area:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
30. As compared to other company facilities, how would you rate productivity in this facility:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
31. Is the company experiencing recruitment problems with any employee positions or skills: <input type="checkbox"/>Yes <input type="checkbox"/> No If yes, what problems, positions, skills? _____ _____										DNA/K Dcl
32. Is the number of unfilled positions: <input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing Estimated number of unfilled positions today: _____ Approximately when will these jobs be filled? _____ (mm/yy)										DNA/K Dcl
33. Have you experienced or do you anticipate any significant changes in the make-up of your workforce? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how did/will you deal with this change? _____ _____										DNA/K Dcl
34. Are primary recruitment problems limited to: <input type="checkbox"/>Community <input type="checkbox"/>Industry										DNA/K Dcl
35. Is company investment in employee training: <input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing <input type="checkbox"/> None If investing in employee training, what percentage of the training budget is for:										DNA/K Dcl
	New job skills training _____%									
	Proficiency training _____%									
	Remedial skill training _____%									
<i>Workforce Notes</i>										

Workforce Development Services								
A. Does your company use Workforce Development / One-Stop Career Center services? (These services include: job posting, recruitment, screening, referral, customized employee training, labor market information, etc.)		<input type="checkbox"/> Yes		<input type="checkbox"/> No				
If yes, On a scale of 1 to 7 with 1 being Very Dissatisfied and 7 being Very Satisfied, what was your level of satisfaction with these workforce services?		1	2	3	4	5	6	7
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you suggest any improvements in these workforce services?		<input type="checkbox"/> Yes		<input type="checkbox"/> No				
please explain: _____								

If no, Why is your company not using these workforce services? (Check all that apply)								
Did not know services were available		<input type="checkbox"/>						
Services not needed		<input type="checkbox"/>						
Tried the services and was dissatisfied		<input type="checkbox"/>						
Other (please indicate below):								

B. If unfamiliar with these workforce services,								
Would you like to receive information about workforce services?		<input type="checkbox"/> Yes		<input type="checkbox"/> No				
Would you like someone to contact you?		<input type="checkbox"/> Yes		<input type="checkbox"/> No				

Technology								
36. Is there new technology emerging that will substantially change either your company's primary product/service or how it is produced?		<input type="checkbox"/> Yes		<input type="checkbox"/> No		DNA/K Dcl		
Comments: _____								

37. Compared to your business segment, how would you rank your company's use of technology for:								
Use	Low			High				
Internal office operations	1	2	3	4	5	6	7	DNA/K Dcl
Business administration	1	2	3	4	5	6	7	DNA/K Dcl
Sales and inventory management	1	2	3	4	5	6	7	DNA/K Dcl
Marketing	1	2	3	4	5	6	7	DNA/K Dcl
Comments: _____								

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<p>38. Compared to your business segment, rate your company's technology investment:</p> <p style="text-align: center;"> Low High 1 2 3 4 5 6 7 </p> <p>Comments: _____</p>	DNA/K Dcl
<p>39. Is the community's technology infrastructure adequate for your company's growth plan? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Comments: _____</p>	
<p><i>Technology Notes</i></p>	

Utility Services																																																																																																																																								
<p>40. How is the consumption of the following utilities changing?</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Type of Utility</th> <th style="text-align: center;">I*</th> <th style="text-align: center;">S*</th> <th style="text-align: center;">D*</th> <th style="border-left: 1px solid black;"></th> </tr> </thead> <tbody> <tr><td>A) Water</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> <tr><td>B) Sewer</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> <tr><td>C) Natural Gas</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> <tr><td>D) Electric</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> <tr><td>E) Telecom (voice)</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> <tr><td>F) Cellular service</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> <tr><td>G) Internet access</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> <tr><td>H) Internet speed</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="border-left: 1px solid black;">DNA/K Dcl</td></tr> </tbody> </table> <p style="font-size: small;">* I = Increasing, S = Stable, D = Decreasing</p>	Type of Utility	I*	S*	D*		A) Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	B) Sewer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	C) Natural Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	D) Electric	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	E) Telecom (voice)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	F) Cellular service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	G) Internet access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	H) Internet speed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<p>41. Please rate your satisfaction with your utility providers</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"></th> <th style="text-align: center;">Low</th> <th colspan="5"></th> <th style="text-align: center;">High</th> <th style="border-left: 1px solid black;"></th> </tr> <tr> <th style="border-bottom: 1px solid black;"></th> <th style="text-align: center;">1</th> <th style="text-align: center;">2</th> <th style="text-align: center;">3</th> <th style="text-align: center;">4</th> <th style="text-align: center;">5</th> <th style="text-align: center;">6</th> <th style="text-align: center;">7</th> <th style="border-left: 1px solid black;"></th> </tr> </thead> <tbody> <tr><td style="border-bottom: 1px solid black;">A) Water</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input 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For any utility services with satisfaction rated 3 or below, please comment:																																																																																																																																								
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Community Services								
42. Please rate the quality of the following services provided by the community on a scale of 1 to 7, 7 being high.								
	Low						High	
	1	2	3	4	5	6	7	
A) Police protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
B) Fire protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
C) Ambulance paramedic service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
D) Health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
E) Child care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
F) School (K–12)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
G) Tech college	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
H) Community college	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
I) College(s) and university(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
J) Public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
K) Traffic control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
L) Streets and roads (local)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
M) Highways (State & Federal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
N) Airline passenger service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
O) Air cargo service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
P) Trucking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
Q) Property tax assessment (fair & equitable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
R) Zoning changes and building permits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
S) Regulatory enforcement (fair & equitable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
T) Community planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
U) Community services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
V) County services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
W) Chamber of Commerce or business association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
X) Economic development organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl
For services with satisfaction rated 3 or below, please comment:								
Service issue 1 (circle one) A B C D E F G H I J K L M N O P Q R S T U V W X	Low Rank Comment 1: _____ _____ _____							
Service issue 2 (circle one) A B C D E F G H I J K L M N O P Q R S T U V W X	Low Rank Comment 2: _____ _____ _____							

ON-SITE VISIT FORM 3.1

To be filled out by the interviewer — Information is confidential

12.5.07

Service issue 3 (<i>circle one</i>) A B C D E F G H I J K L M N O P Q R S T U V W X	Low Rank Comment 3: _____ _____ _____
Community Service Notes	

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

Confidentiality	
Confidentiality request signed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Thank you for your assistance.