



August 24, 2011

Dear DBA member:

Periodically the DBA surveys its members to assist us in measuring our revitalization progress, furthering our marketing and business development strategies, and assessing how we may improve our service to the membership.

Supplementing this letter is a survey form prepared by our Economic Restructuring Committee (ERC) which I ask that you complete and return to the DBA. Since the form is a Word document, you may fill it out and email it to info@visitdanvillepa.org, or in the alternative, print it, complete it, and return it to the DBA office. The more complete the information provided, the better the ERC will be able to analyze the survey data. ***As an incentive to complete the survey, CATV is willing to offer a free week for an ad on its Channel 8 Community Calendar.***

Some of you may wonder what we will do with the information gathered in the survey. I can assure you of the following:

- all information will be confidential; not shared with any other organization, business, or governmental body; and kept under the custody and control of the DBA
- the data will be released in the form of an aggregate analysis, meaning the data will be expressed in a collective manner, without identifying any specific businesses, in order to show broad trends
- the DBA will present and explain the data in a public meeting to which the DBA membership will be invited, provided we receive enough completed surveys to constitute a reliable sample of the downtown business community

Should you have any questions about the survey, please contact our office at 284-4502/4503. Thank you in advance for your support, and we look forward to working with you in 2011 to continue to make Danville a downtown to turn to!

Sincerely,

James D. Wilson
Executive Director

BUSINESS OWNERS SURVEY

NAME OF YOUR BUSINESS _____

PART A. BUSINESS DESCRIPTION

1. What primary NAICS¹ Code do you use in completing the Census Bureau's Economic Census Form? _____

2. How long has this business been in operation? _____ **Years** _____ **Months**

3. How long has the business been at this address? _____ **Years** _____ **Months**

4. Which of the following applies to this business:

_____ **I own this building** _____ **I rent this building**

5. In this building, how many square feet (sf) of your business operation are devoted to?

Sales _____ **sf** **Production** _____ **sf** **Office** _____ **sf** **Storage** _____ **sf**

6a. What are your hours of operation?

Day of the Week	Open	Close
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____
Sunday	_____	_____

6b. Would you be willing to open and close later at least one day a week?

_____ **Yes** _____ **No**

6c. Would you be willing to participate in uniform hours, if other downtown businesses did?

_____ **Yes** _____ **No**

PART B. BUSINESS CUSTOMER PROFILE

7. How many customers /clients come into this business during an average week? _____

8. How many sales transactions do you make in an average week? _____

¹ NAICS is the North American Industrial Classification System. The Number you place in this box should be the same primary number that you enter when you complete your US Economic Census report.

9. What is your busiest day of the week in terms of sales volume?

_____ **Monday** _____ **Tuesday**

Wednesday *Thursday*
 Friday *Saturday*
 Sunday

10. On Your busiest day, what are your two busiest times of the day in terms of sales volume?

8-10 AM *6-8 PM*
 10 AM – Noon *8-10 PM*
 Noon – 2 PM *10pm – Midnight*
 2-4 PM *Midnight- 8AM*
 4-6 PM

11. What are your three busiest months of the year, in terms of sales volume?

January *July*
 February *August*
 March *September*
 April *October*
 May *November*
 June *December*

12. Do you know the top five zip codes from which you make most of your sales?

Yes *No*

13. If Yes, what are they?

<i>Top 5 Zip Codes</i>	<i>Percent of Sales</i>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

14. How do you know these are the top five zip codes?

I have point-of-sales computer register that tracks my sales.
 I computerize the records of my sales receipts.
 I keep a handwritten log.

_____ *I know my customers.*

_____ *This is a best guess.*

15. What was the gross sales volume of this store for the last completed fiscal year?

_____ *\$1.00 - \$10,000*

_____ *\$ 200,001 - \$ 500,000*

_____ *\$ 10,001 - \$ 50,000*

_____ *\$ 500,001 - \$ 1,000,000*

_____ *\$ 50,001 - \$100,000*

_____ *\$ 1,000,001 - \$ 2,000,000*

_____ *\$ 100,001 - \$ 200,000*

_____ *Over \$ 2,000,000*

16a. Compared to the previous fiscal year, the amount you checked above can best be described as...

_____ *An increase from the previous year*

_____ *A decrease from the previous year*

_____ *The same range as the previous fiscal year*

16b. Express as a percentage, how much did your gross sales volume increase or decrease over the previous fiscal year? _____%

16c. In your opinion, what factor(s) most contributed to this change?

PART C. MARKET POSITIONING

17. What products or services that you sell best differentiate you from your competition? _____

18. Who is your toughest competition? _____

19. What is the main competitive edge that you have over your competitors? _____

20. What three downtown businesses best complement your business?

1. _____

2. _____

3. _____

PART D. ADVERTISING & MARKETING

21. When do you typically plan to run major sales and/or specials? _____

22. In an average year, how much do you spend on advertising? \$ _____

23. Do you advertise on radio?

_____ Yes On Which Stations? _____

_____ No

24. Do you advertise on TV?

_____ Yes On Which Stations? _____

_____ No

25. Do you advertise in print?

_____ Yes In Which Publications? _____

_____ No

PART E. E-COMMERCE

26. Do you use computers in the operation of your business?

_____ Yes _____ No

27. What specific functions do you use the computer for?

_____ Internet – E-Mail _____ Video-conferencing _____ On-Line Purchasing

_____ Accounting _____ Geographic Information _____ On-Line Sales

_____ Database Maintenance _____ Basic Research _____ Product Research

_____ On-Line Banking _____ Other: _____

28. Does your business have a Web site?

_____ Yes If Yes, please list the web address: _____

_____ No

29. How often do you update it?

_____ Daily _____ Weekly _____ Monthly _____ Less Than Monthly

30. Do you update the web site internally?

_____ Yes, I or a member of my staff update the web site.

_____ *No, we contract out the web site maintenance.*

31. Does your business offer on-line purchasing of your goods or services over the internet?

_____ *Yes*

_____ *No*

32. Does your business deliver customer service over the internet?

_____ *Yes*

_____ *No*

33. Does your business purchase goods and services over the internet?

_____ *Yes*

_____ *No*

PART F. LABOR & EMPLOYMENT

34. How many full-time people do you employ? _____

35. How many part time people do you employ? _____

36. What employee benefits do you offer?

_____ *Basic Health Care*

_____ *Dental*

_____ *Vision*

_____ *A Retirement Plan (of any type)*

_____ *Life Insurance*

_____ *Relevant Educational Reimbursements*

_____ *Paid Time off for Relevant Educational Courses*

_____ *Other* _____

PART G. PARKING

37. Where do your customers typically park?

_____ *I have my own parking in this parcel. How many spaces for customers?* _____

_____ *On the street.*

_____ *In a public parking lot/garage.*

_____ *I rent space in a third party private lot.*

38. Where do your employees typically park?

_____ *I have my own parking in this parcel How many spaces for workers?* _____

_____ *On the street.*

_____ *In a public parking lot/garage.*

_____ *I rent space in a third party private lot.*

PART H. RETENTION & FEEDBACK

39a. What community events have best increased your foot traffic? _____

39b. What community events have most decreased your foot traffic? _____

40a. What community events have best increased your sales volume? _____

40b. What community events have best decreased your sales volume? _____

41. What three products or services would you most like to see available downtown?

1. _____

2. _____

3. _____

42. What three businesses would you most like to see move into downtown?

1. _____

2. _____

3. _____

43. Would a business similar to yours...

_____ *Enhance and complement your business*

_____ *Help your business somewhat*

_____ *Take away some of your business*

_____ *Threaten the existence of your business*

44. Are you planning to expand your business physically?

_____ *Yes* *If Yes, When?* _____

_____ *No*

45. Are you planning to expand the line of goods or services you provide?

_____ **Yes** **If Yes, When?** _____

_____ **No**

46. Are you planning to downsize?

_____ **Yes** **If Yes, When?** _____

_____ **No**

PART I. BUSINESS ASSISTANCE REQUIREMENTS

47. In which of the following areas could you use technical assistance?

_____ **Exterior store curb appeal and window display**

_____ **Internal merchandise presentation**

_____ **Merchandise selection / market**

_____ **Customer service**

_____ **Developing / revising a business plan**

_____ **Improving advertising and promotions**

_____ **Identifying and capturing new markets**

_____ **Accounting and record keeping**

_____ **Planning for business expansion**

_____ **Inventory control**

_____ **Using computers to assist my business**

_____ **Selling my goods and services on-line**

_____ **On-line order fulfillment**

_____ **Personnel management and training**

_____ **Financial assistance**

_____ **Complying with local, state and/or federal regulations (including local zoning)**

_____ **Business succession as I near retirement**

_____ **Other:** _____
