

# **ENTERPRISE ZONE**

## **Business Survey**

Business Name: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Municipality: \_\_\_\_\_ Web Address: \_\_\_\_\_

Number of years at this location: \_\_\_\_\_ Own? \_\_\_\_\_ Rent? \_\_\_\_\_

Is this a Women-Owned Business:  Yes  No Is this a Minority-Owned Business:  Yes  No

Is your business Certified as Women or Minority Owned:  Yes by: \_\_\_\_\_  No

Would you like to be contacted about becoming Certified as Women or Minority Owned?  Yes  No

Present # of Employees: Full Time _____ Part Time _____	# of employees hired in past 3 years: Full Time _____ Part Time _____	Projected # of employees hired in next 3 years: Full Time _____ Part Time _____	# of employees laid off in past year: _____
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**PART I - BUSINESS INFORMATION** (please check all that apply)

1. Type of business activity in Bucks County:  
 Construction  Manufacturing  Transportation  Sales  Wholesale  Retail  
 Communications  Service  Other \_\_\_\_\_
2. Our last fiscal year gross income at this location was:  
 Under \$500,000  Under 1 million  Over 1 million  Over 10 million
3. What is the economic direction of business?  
 In decline  Steady  Growing
4. This business is affected by:  Season  National Trend  Local Conditions  
 Cyclical  Other \_\_\_\_\_

**PART II - BUSINESS LOCATION AND FACILITY**

1. Indicate the major reason for choosing this facility (Check all that apply):  
 Availability to Market/Suppliers  Labor Force  Property Cost  Taxes  
 Transit Network  Cost of Housing  Other: \_\_\_\_\_
2. Space Availability:  Adequate  Excess  Seeking Expansion  Seeking Downsizing
3. Present facility needs: (Check all that apply)  
 Parking  Office Space  Warehouse  Manufacturing  
 Other \_\_\_\_\_
4. Major facility concerns: (Check all that apply)  
 Environmental  Flooding  Security  Sewer & Water  
 Infrastructure  Energy Availability  
 Other \_\_\_\_\_

5. *What assistance do you need for your business to sustain growth and stay in the general area? (Check all that apply)*

- Financial    Technical    Training Assistance    Govt. Incentives  
 Other \_\_\_\_\_

6. *Please rate the quality of life in terms of:*

	Excellent	Good	Fair	Needs Improvement (specify)
Environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Cost of Living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Cultural Amenities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

### **PART III - MARKET AND COMPETITION**

1. *Our suppliers are located: (indicate number)*

# in Bucks County: \_\_\_\_\_ # in Pennsylvania: \_\_\_\_\_ # outside Pennsylvania: \_\_\_\_\_

2. *Reason suppliers are outside the Bucks County area:*

- Availability    Price    Quality    Other: \_\_\_\_\_

3. *Where are your principal competitors located?:*

- Bucks County    In Pennsylvania    Outside Pennsylvania

4. *What improvements would make your business more competitive?(Check all that apply)*

- A. Technological:  Modernization    Robot Production    Clinical Innovations    Other \_\_\_\_\_  
B. Facility:    Expansion    Upgrading    Adaptation    Major Repairs    Other \_\_\_\_\_

5. *Anticipated major concerns that may affect operations: (Check all that apply)*

- Interest Rates    Cost Increases    Technological Advances  
 Loss of Consumer Purchase Power    Other \_\_\_\_\_

6. *Rank the following business factors to the competitiveness of your company. (Rank from 1 to 7 with 1 being the most important.)*

\_\_\_\_ Location   \_\_\_\_ Facility Cost   \_\_\_\_ Labor   \_\_\_\_ Energy   \_\_\_\_ Water & Sewer  
\_\_\_\_ Financing   \_\_\_\_ Transportation   \_\_\_\_ Other \_\_\_\_\_

7. *What business strategies have already been adopted by your company to improve its competitiveness? (Check all that apply)*

- Lowered Prices    New Products    Improved Distribution    Other \_\_\_\_\_

8. *What types of assistance and programs would improve your company's competitiveness?(Check all that apply)*

- Less Regulation    Less Taxes    Transit Infrastructure Improvements  
 Technical Assistance    Job Training    Business Loans    Other \_\_\_\_\_

### **PART IV - LABOR AND TRAINING**

1. *What percentage of employees are covered with a collective bargaining agreement?*

- None    Less than 25%    25% - 49%    Over 50%

2. *Work force Composition: (Indicate Percent)*

	Most difficult to recruit:	
Managers/Professionals	_____%	<input type="checkbox"/>
Technicians/Operators	_____%	<input type="checkbox"/>
Laborers	_____%	<input type="checkbox"/>
Sales	_____%	<input type="checkbox"/>
Office & Clerical	_____%	<input type="checkbox"/>
Skilled Workers	_____%	<input type="checkbox"/>
Service Workers	_____%	<input type="checkbox"/>

Method used to find new employees:

- Newspapers
- Referrals
- Agencies
- Career Link

3. *Where do the majority of your employees live? (Indicate percentage)*

\_\_\_\_ Bucks County    \_\_\_\_ Delaware Valley/Greater Philadelphia Region    \_\_\_\_ Out of State

4. *The most significant labor issues confronting your company are:*

- Salaries     Benefit Packages     Dependent Care / Parental Leave
- Other \_\_\_\_\_

**PART V - NEEDS ASSESSMENT**

1. *Check those which are key to a successful operation and rate those presently available:*

	Adequate	Inadequate
<input type="checkbox"/> Fire Company	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Hospital	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Police	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Transportation	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Infrastructure	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Parking	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Educational Institutions	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>

2. *Which of the following has your company utilized: (Check all that apply)*

- SBA Financing     Commercial Financing     County Financing     State Financing
- Other Financing \_\_\_\_\_

3. *Which of the following would interest your company? (Check all that apply)*

- Low-Interest Loans     Tax Credits     Brownfields Cleanup Funding     Improved Infrastructure

4. *Overall assessment of the area your company is located in:*

	Excellent	Good	Fair	Needs Improvement (Specify)
Community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
County	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
State	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

5. *Availability of options for high speed internet access for business purposes:*

- Excellent     Good     Fair     Needs Improvement (specify) \_\_\_\_\_

6. *Accessibility of technology, e-commerce and other education and training courses:*

- Excellent     Good     Fair     Needs Improvement (specify) \_\_\_\_\_

7. *Accessibility of corporate or university research and development laboratories nearby:*  
Excellent      Good      Fair      Needs Improvement (specify)  
                   \_\_\_\_\_

8. *Would you like to be contacted by the Enterprise Zone Coordinator:*  Yes  No  
Contact Person: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

Thank you for taking the time to fill out the survey! Please return the completed survey to:

[bcrda@bcrda.com](mailto:bcrda@bcrda.com)

**or mail to:**

**Bucks County Enterprise Zone  
C/O Bucks County Redevelopment Authority  
One North Wilson Avenue  
Bristol, PA 19007**

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