

## **BUSINESS SURVEY 2009**

The Greater Hume Shire Council is currently conducting a business survey in the municipality.

The aims of the survey are to:

- Formulate an up-to-date profile of the local economy
- Identify strengths and potential growth areas for local businesses
- Assist local business with solving problems and exploring new opportunities
- Create employment opportunities in the region.

The success of this program depends on as many businesses as possible completing the survey and your cooperation in this regard would be most appreciated.

Please note that your individual answers to this survey are **strictly confidential** and will not be released.

A report covering the findings and recommendations of the survey will be published on the Greater Hume Shire Council website and will be available to all members of the community in hard copy on request.

If you have any questions relating to the survey or if you would prefer to have a member of staff assist you with completion please phone Alicia Power, Economic Development Officer, on (02) 6036 0100. Please return your survey in the reply paid envelope provided or drop into a Council office at either Holbrook (39 Young Street) or Culcairn (40 Balfour Street), or a Customer Service Centre at either Henty (30 Sladen Street), Jindera (Shop 8-9 Jindera Plaza, Urana Road) or Walla Walla (Commercial Street) **by Friday 11 December 2009**.

**Contact Name:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Town:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Postcode:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Facsimile:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Website:** \_\_\_\_\_

### **USE OF SURVEY**

- I agree to receiving emails from the Greater Hume Shire Council relating to the provision of business services and growth opportunities\*.

\* Please ensure you have completed the contact details section above, or alternatively contact Alicia Power on (02) 6036 0100



**Q8 (a) In the next 2 years do you see your business profit:**

- Increasing                       Staying the same                       Decreasing

**(b) This can be attributed to:**

- |   |   |
|---|---|
| <input type="checkbox"/> Growth in export market          | <input type="checkbox"/> Reduction in export market     |
| <input type="checkbox"/> Growth in local market           | <input type="checkbox"/> Reduction in local market      |
| <input type="checkbox"/> Higher productivity              | <input type="checkbox"/> Labour shortages               |
| <input type="checkbox"/> Increased need for your services | <input type="checkbox"/> Reduced need for your services |
| <input type="checkbox"/> Economic climate                 | <input type="checkbox"/> Drought                        |
| <input type="checkbox"/> Other: _____                     |   |

**PART B: EMPLOYEES**

**Q9 How many people do you employ?**

Employment status	Total	Male	Female
Full time			
Part time			
Casual/ contractor			
TOTAL			

**Q10 How many people did you employ 1 year ago?** \_\_\_\_\_

**Q11 How many people do you think you will employ in 1 years' time?** \_\_\_\_\_

**Q12 (a) Do you have problems recruiting employees?**

- Yes                                       No (go to Q13)

**(b) In what areas do you have problems recruiting employees?**

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Unskilled    | <input type="checkbox"/> Clerical                 |
| <input type="checkbox"/> Semi-skilled | <input type="checkbox"/> Professional/ management |
| <input type="checkbox"/> Skilled      |   |
| <input type="checkbox"/> Other: _____ |   |

**Q13 Do you have any long standing vacancies you are unable to fill?**

- Yes                                       No (go to Q14)

If yes please specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Q14 (a) Do your employees require any formal skills, training or job qualifications?**

- Yes                                       No (go to Q15)

**(b) What formal skills, training or job qualification do they require?**

- |   |   |
|---|---|
| <input type="checkbox"/> Undergraduate degree | <input type="checkbox"/> Traineeship/ apprenticeship      |
| <input type="checkbox"/> Post-graduate degree | <input type="checkbox"/> Diploma/ technical qualification |
| <input type="checkbox"/> Other: _____         |   |

**Q15 How does your business recruit or source new employees?**

- |  |   |
|--|---|
| <input type="checkbox"/> Advertise a job vacancy     | <input type="checkbox"/> Recruitment agency |
| <input type="checkbox"/> Traineeship/ apprenticeship | <input type="checkbox"/> Word of mouth      |
| <input type="checkbox"/> Universities/ TAFE          | <input type="checkbox"/> Schools            |
| <input type="checkbox"/> Overseas employment agency  | <input type="checkbox"/> Internet           |
| <input type="checkbox"/> Other: _____                |   |

**PART C: BUSINESS PLANS AND DECISIONS**

**Q16 (a) Does your business have an established Business Plan that you use to guide your business decision-making?**

- Yes  No

**(b) Would you like assistance with developing or reviewing a Business Plan?**

- Yes\*  No

*\* Please ensure you have completed the contact details section on the first page of this survey, or alternatively contact Alicia Power on (02) 6036 0100*

**Q17 Is your company considering expanding within the next 2 years?**

- Yes  Not sure  No (go to Q21)

**Q18 Does your company currently own or lease sufficient property to allow for the expansion you would like to make?**

- Yes  Not sure  No

**Q19 Are there any factors which could prevent you going ahead with expansion plans?**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Q20 (a) Have you approached anybody in local government or business development organisations to discuss your expansion plans?**

- Yes  No

**(b) Would you like to be contacted about your possible expansion?**

- Yes\*  No

*\* Please ensure you have completed the contact details section on the first page of this survey, or alternatively contact Alicia Power on (02) 6036 0100*

**Q21 Please list the main products or services your business purchases from outside your local community and indicate why by placing a tick in the appropriate column(s).**

Product or service	Availability	Price	Quality	Delivery time	Unaware of local provider	Other (please specify)
	<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"/>	<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"/>
	<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"/>	<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"/>
	<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"/>	<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"/>

**Q22 Are there any products or services which you have considered manufacturing or providing locally but did not proceed with the idea?**

- Yes  No (go to Q23)

If yes, what were the products or services and your reasons for not proceeding?

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**Q23 Are there any products or services you find difficult to obtain locally?**

- Yes  No (go to Q24)

If yes, please specify: \_\_\_\_\_

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## **PART D: LOCAL ENVIRONMENT**

**Q24 What do you believe are the main advantages of running a business in your town?**

- |   |   |
|---|---|
| <input type="checkbox"/> Local customer loyalty                               | <input type="checkbox"/> Proximity to key industries                |
| <input type="checkbox"/> Quality and supply of local labour                   | <input type="checkbox"/> Reliable transport and freight services    |
| <input type="checkbox"/> Housing availability for employees                   | <input type="checkbox"/> Proximity to markets                       |
| <input type="checkbox"/> Positive image of the community                      | <input type="checkbox"/> Quality of life the community has to offer |
| <input type="checkbox"/> Access to national highways                          | <input type="checkbox"/> Good car parking                           |
| <input type="checkbox"/> Communication networks                               | <input type="checkbox"/> Proximity to major regional centres        |
| <input type="checkbox"/> Reliable support businesses and other local services |   |
| <input type="checkbox"/> Other: _____   |   |

**Q25 What do you believe are the main disadvantages of running a business in your town?**

- |  |  |
|--|--|
| <input type="checkbox"/> Transport costs                 | <input type="checkbox"/> Lack of local support and loyalty |
| <input type="checkbox"/> Negative image of the community | <input type="checkbox"/> Poor service of local businesses  |
| <input type="checkbox"/> Quality of infrastructure       | <input type="checkbox"/> Slow growth of local market       |
| <input type="checkbox"/> Shortage of skilled labour      | <input type="checkbox"/> Small size of local market        |
| <input type="checkbox"/> Road networks                   | <input type="checkbox"/> Lack of support by Council        |
| <input type="checkbox"/> Communication costs             | <input type="checkbox"/> Planning restrictions             |
| <input type="checkbox"/> Other: _____                    |  |

**Q26 If you were asked to recommend the town your business is located in as a place to live and own/ operate a business, how would you rate it in the following categories?**

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Very Poor</b>
Schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other education and training providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sporting and recreation facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural facilities (eg. museums, libraries)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Labour costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local rates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Land costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q27 What opportunities do you see for the town your business is located in, in terms of making the local economy stronger and creating more jobs?**

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**Q28 Is your business involved in the local community, whether it be through sponsorship, support of local sporting groups etc.?**

Yes

No (go to Q29)

If yes please specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Q29 Is your business a member of any business or community networks?**

Yes

No (go to Q30)

If yes please specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **PART E: EXTERNAL FACTORS**

**Q30 Which 5 factors are likely to have a major impact on your business profit during the next 2 years? Rank the factors from 1 to 5 with 1 being most important.**

- |                                |                            |
|--------------------------------|----------------------------|
| ___ New products               | ___ Wage rates             |
| ___ Changing consumer tastes   | ___ Raw material costs     |
| ___ Population changes         | ___ Raw material shortages |
| ___ Victorian economy          | ___ New technology         |
| ___ Australian economy         | ___ Government policies    |
| ___ International economy      | ___ Labour shortage        |
| ___ Foreign competition        | ___ Finance availability   |
| ___ Local/domestic competition | ___ Interest rates         |
| ___ Energy costs               | ___ Taxes                  |
| ___ Drought                    |                            |

\_\_\_ Other: \_\_\_\_\_

\_\_\_ Other: \_\_\_\_\_

**Q31 Are there any major innovations/ changes looming in your industry that might affect your business?**

Yes

Not sure

No (go to Q32)

If yes, what are these innovations or changes?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

