



City of Canby

**Canby Urban Renewal District
Economic Development Department**

Business Name: _____
Business Address: _____

Date: November 14, 2007

Introduction: The following survey is an instrument for us to gain a greater understanding of the business climate here in Canby. Your participation is greatly important to the success of our future efforts to undergo economic development as a community and as individual businesses. Your honesty is appreciated and your responses will be kept confidential.

We appreciate your time and look forward to your responses. If you have any questions, please direct them to Stephan J. Lewis at the City of Canby's Economic Development Department. He can be reach by phone at 503-266-7001 or via e-mail at lewiss@ci.canby.or.us.

Contact Information:

Name: _____ **Title:** _____

Telephone Number: _____ **E-Mail:** _____

Best way to contact you: (circle best)

- a. E-Mail b. Telephone c. Mail

I. Business and Workforce Information:

1. Please give a brief description of the primary role of your business.

2. How long has your business been in operation? _____ years **Date:** _____ (MM/YY)

3. Does your business own or lease the space in which it is located? _____

4. How many people, including owners, does your business employ as full time or equivalent?

(Full-time = 32 or more hours per week) _____

5. Of your employees, what percentage has a Canby address for their residence? _____%

6. What is an estimate of your gross sales? _____

(Note: This information is confidential)

7. Approximately how many square feet does your business occupy? _____

8. How many of your employees use Canby Area Transit? _____

II. Needs and Opportunities Assessment:

1. Overall, how would you rate Canby as a place to do business? (circle best)

- a. Excellent b. Good c. Fair d. Poor

Explain: _____

2. Do you have plans to expand or reduce operations in the foreseeable future? (circle best)

- a. I plan to expand products/services or square footage in Canby.
b. I plan to expand products/services or square footage at a location outside of Canby.
c. I plan to reduce products/services or square footage in Canby.
d. I don't have any plans for change.

3. Are you thinking of expanding into a storefront location? Yes No

4. Does your business have a need for local lodging? Yes No

5. If you use hotels for your business in Canby, can you estimate how many room nights per month? _____

6. Do you need meeting and/or conference space for your business? Yes No

Describe needs: _____

7. What areas of assistance are most needed to help your business grow and succeed?

(circle all that apply)

- a. Façade/Building/Signage Improvements
b. Employee Education and/or Training
c. Employee Recruitment and/or Retention
d. Information on Business Planning/Marketing
e. Information on Local Market Characteristics
f. Networking Groups and/or Business Clusters
g. Wage, Benefits, or Insurance Issues
h. No Assistance
i. Not Sure
j. Other: _____

III. Market and Marketing Information:

1. Why is your business located in Canby? _____

2. Where are your suppliers located? Please fill in blanks with rough percentages:

- a. _____ % Canby Area
b. _____ % Clackamas, Multnomah, Marion, Washington counties
c. _____ % Oregon, Washington
d. _____ % United States
e. _____ % Canada
f. _____ % Other countries (please specify) _____

3. Please describe the target market of your business. (circle all that apply)

- a. Gender: 1. Male 2. Female 3. Both
b. Age: 1. under 18 2. 18-24 3. 25-44 4. 45-54 5. 55-64 6. over 64

4. Who is the toughest competition for your business? (Specify up to 3 competitors by name)

- c. _____ b. _____ c. _____

5. What three Canby businesses complement your business the most?
 d. _____ b. _____ c. _____
6. Name two businesses you would like to see come to Canby.
 a. _____ b. _____
7. Would you be interested in joint advertising and/or group marketing? Yes No

IV. Follow-Up Questions:

1. Are you interested in receiving a preliminary and/or final report? Yes No
2. Would you like to be contacted by our Economic Development staff to discuss issues related to doing business in Canby or other issues you may have? Yes No
3. Would you like to participate in a focus group to discuss issues related to doing business in Canby and other issues facing local business markets? Yes No
4. Please provide any additional comments you would like in regards to your needs and/or concerns. (E.g. barriers to doing business in Canby, specific issues, etc.)

Please return this survey using the enclosed envelope or FAX to 503-266-1574 within ten days. An online version of the survey is available at the City of Canby website at www.canbybusiness.com.

Thank you for participating in this survey. Your input is very valuable to us. If you have any questions or comments please address those to Stephan J. Lewis via e-mail at lewiss@ci.canby.or.us or at 503-266-7001 during business hours.