

PRIME ON-SITE VISIT FORM

To be filled out by the interviewer — Information is confidential

1.4.11

Company Information	
Company Name	Date of Visit (mm/dd/yy)
Contact Name	City/State/ZIP
Phone () -	
Interviewer(s)	
Lead Interviewer	Organization
Other Interviewer(s)	Organization

Market		
1. Is the company's primary market:	<input type="checkbox"/> Local <input type="checkbox"/> Regional <input type="checkbox"/> National <input type="checkbox"/> International	DNA/K Dcl
2. Are total company sales:	<input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing	DNA/K Dcl

Comments Summary

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<p>3. Does the company plan to expand in the next three years: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, estimated total investment \$ _____</p> <p>Approximate percentage equipment/technology _____ %</p> <p>Approximate percentage real estate _____ %</p> <p>Estimated number of jobs added or lost (-) _____</p> <p>Estimated facility size increase _____ sq. ft.</p> <p>Approximate date of expansion _____ (mm/yy)</p> <p>Types of skills Needed: _____</p> <p>Comments: _____</p>	DNA/K	Dcl
<p>4. Are international sales as a percentage of total sales: <input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing <input type="checkbox"/> No int'l sales</p> <p>If international sales, approximately what percentage of sales comes from international sales? 1-20% 41-60% 81-100%</p> <p style="text-align: right;">21-40% 61-80%</p> <p>Where are your international markets? _____</p>	DNA/K	Dcl
<p>5. Does the company have facilities outside the country? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, are they contract production or a company facility: <input type="checkbox"/> Contract production <input type="checkbox"/> Company facility <input type="checkbox"/> Both</p> <p>What is the function of the international location(s) _____</p> <p>Where are international facilities located? _____</p>	DNA/K	Dcl
Market Notes		

Industry		
<p>6. What is your current production capacity? <input type="checkbox"/> Under capacity <input type="checkbox"/> Balanced <input type="checkbox"/> Over capacity</p>	DNA/K	Dcl
<p>7. Do you anticipate any federal, state, or local legislation changes that will adversely affect your business in the next five years: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, what changes? _____</p> <p>How will they affect the company? _____</p>	DNA/K	Dcl

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<p>8. 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</p> <p style="margin-left: 20px;">If yes, what changes? _____</p> <p style="margin-left: 20px;">How will they affect the company? _____</p>	<p style="text-align: center;">DNA/K Dcl</p>
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<p>Industry Notes</p>

Management	
<p>9. Are the projected employment needs for this facility: <input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing</p>	<p style="text-align: center;">DNA/K Dcl</p>
<p>10. What are the community's strengths as a place to do business?</p> <p>_____</p> <p>_____</p>	<p style="text-align: center;">DNA/K Dcl</p>
<p>11. What are the community's weaknesses as a place to do business?</p> <p>_____</p> <p>_____</p>	<p style="text-align: center;">DNA/K Dcl</p>
<p>12. Are there any barriers to growth in this community <input type="checkbox"/> Yes <input type="checkbox"/> NO</p> <p style="margin-left: 20px;">If yes, what? _____</p> <p>_____</p>	<p style="text-align: center;">DNA/K Dcl</p>
<p>13. 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</p> <p style="margin-left: 20px;">If yes, please explain? _____</p> <p>_____</p> <p>_____</p>	<p style="text-align: center;">DNA/K Dcl</p>

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14. Are there any reasons the community may not be considered for future expansion?	<input type="checkbox"/> Yes <input type="checkbox"/> No	DNA/K Dcl
If yes, please explain? _____ _____		
15. Who are your largest suppliers in the area and the three largest out-of-area suppliers?	<input type="checkbox"/> Ans <input type="checkbox"/> No Ans	DNA/K Dcl
If Ans, product/service, company, and current location? _____		
Management Notes		

Workforce										
	Low	1	2	3	4	5	6	7	High	
16. 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"/>	DNA/K Dcl	
17. 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"/>	DNA/K Dcl	
18. 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"/>	DNA/K Dcl	
19. 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"/>	DNA/K Dcl	
20. Is the company experiencing recruitment problems with any employee positions or skills:									<input type="checkbox"/> Yes <input type="checkbox"/> No	DNA/K Dcl
If yes, what problems, positions, skills? _____ _____										
21. Is the number of unfilled positions:									<input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing	DNA/K Dcl
Estimated number of unfilled positions today: _____ Approximately when will these jobs be filled? _____ (mm/yy)										
22. Are primary recruitment problems limited to:									<input type="checkbox"/> Community <input type="checkbox"/> Industry	DNA/K Dcl
23. Is company investment in employee training:									<input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Decreasing <input type="checkbox"/> None	DNA/K Dcl
If investing in employee training, what percentage of the training budget is for:										
								New job skills training	_____ %	
								Proficiency training	_____ %	
								Remedial skill training	_____ %	
Workforce Notes										

Utility Services													
24. How is the consumption of the following utilities changing?					25. Please rate your satisfaction with your utility providers								
<u>Type of Utility</u>	I*	S*	D*		Low							High	
					1	2	3	4	5	6	7		
A) Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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) Sewer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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) Natural Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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) Electric	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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) Telecom (voice)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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) Cellular service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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) Internet access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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) Internet speed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DNA/K Dcl	<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 = Increasing, S = Stable, D = Decreasing													

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Please comment on any utility services with low satisfaction (3 or lower) or high (5 or above):	
Utility service comment 1 (circle one) A B C D E F G H	Low/High Rank Comment 1: (Interviewer: Circle one – Positive, Negative) _____ _____ _____
Utility service comment 2 (circle one) A B C D E F G H	Low/High Rank Comment 2: (Interviewer: Circle one – Positive, Negative) _____ _____ _____
Utility service comment 3 (circle one) A B C D E F G H	Low/High Rank Comment 3: (Interviewer: Circle one – Positive, Negative) _____ _____ _____
Utility Notes	

Quality of Life/Community Services								
26. 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

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27. Continued	1	2	3	4	5	6	7	
N) 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
O) 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
P) 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
Q) 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
R) Community services (not otherwise listed)	<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) County services (not otherwise listed)	<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) 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
U) 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
V) Workforce 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

Please comment on any community services with low satisfaction (3 or lower) or high (5 or above):	
Service comment 1 (C) ^ ^, ^/ ^ ^ [,) A B C D E F G H I J K L M N O P Q R S T U V W X Y	Low/High Rank Comment 1: (Interviewer: Circle one – Positive, Negative) _____ _____ _____
Service comment 2 (C) ^ ^, ^/ ^ ^ [, D A B C D E F G H I J K L M N O P Q R S T U V W X Y	Low/High Rank Comment 2: (Interviewer: Circle one – Positive, Negative) _____ _____ _____
Service comment 3 (C) ^ ^, ^/ ^ ^ [, D A B C D E F G H I J K L M N O P Q R S T U V W X Y	Low/High Rank Comment 3: (Interviewer: Circle one – Positive, Negative) _____ _____ _____
Community Service Notes	

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

Thank you for your assistance.