



# 20XX EQUINE SURVEY

Form Approved  
O.M.B. Number 0535-0227  
Approval Expires xx/xx/xx

[State] Agricultural Statistics Service  
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[http://www.nass.usda.gov/\[FIPS\]](http://www.nass.usda.gov/[FIPS])

(AREA QUESTIONNAIRE MASTER)

Authority for collection of information on the Equine Survey is Title 7, Section 2204 of the U.S. Code. The information will be used to compile and publish agricultural estimates for Virginia. Individual reports are held confidential. Response is voluntary.

**Segment Number:** \_\_\_\_\_ **Tract Letter:** \_\_\_\_\_ **County:** \_\_\_\_\_

State	Stratum	Segment	Tract No
99	00000	00	00

OL/NOL
925

**I need to make sure we have your (the operator's) correct name and mailing address.**

Name of Farm, Ranch, or Operation: \_\_\_\_\_

Name of Operator: \_\_\_\_\_  
(First)      (Middle)      (Last)

Mailing Address: \_\_\_\_\_  
(Route or Street)

\_\_\_\_\_ (City)      (State)      (Zip Code)

Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_  
(Area Code)

## SECTION 1 - ACREAGE

1. How many acres are inside this blue tract boundary drawn on the photo (map)? ..... 840

2. Now I would like to ask about the **total acres operated**.

2a. On June 1, how many acres did you or this operation own? .....	+	901
2b. Rent from others? ( <i>Exclude land used on an animal unit month (AUM) basis</i> ) ..	+	902
2c. Rent to others? .....	-	905

2d. [Total of Items 2a + 2b - 2c.]  
 Then the total acres operated (*must be greater than or equal to Item 1*) ..... = 900

## SECTION 2 - EQUINE INVENTORY

HORSES AND PONIES	MULES, DONKEYS OR BURROS
211	212

1. How many of the equine [*horses, ponies, mules, or donkeys*] does **this operation own**? ..... Number

2. On June 1, how many equine [*horses, ponies, mules, or donkeys*] **regardless of ownership**, were on the total acres operated? ..... Number  
(If NONE continue, otherwise skip to Item 4)

209	208
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3. If there are no equine on the total acres operated (Item 2), where are the Item 1 equine kept or boarded?  
(Record name and address where boarded)

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

4. Which of the following best describes the **MOST IMPORTANT ACTIVITY** of your operation?

- 1 - Commercial boarding, training, riding, or show/event facility
- 2 - Commercial or private breeding or breeding service place
- 3 - Farm
- 4 - A place to keep horses, ponies, or other equine for personal use?
- 5 - Other (*Specify:* \_\_\_\_\_) ?

Office Use

213
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Enumerator: \_\_\_\_\_

Date: \_\_\_\_\_

Enumerator ID
098

*Note: Card with burden statement is given to respondents as this is a personally enumerated questionnaire.*