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| Store Manager Questionnaire |
| Store ID number \_\_ \_\_ \_\_ \_\_ Survey staff ID\_\_ \_\_ Survey number \_\_ \_\_ \_\_Date of interview \_\_ \_\_ /\_\_ \_\_ /\_\_ \_\_ \_\_ \_\_ Time of interview \_\_ \_\_\_ : \_\_ \_\_ AM PM |
| A. Store Information |
| A.1 Name of storeA.2 Store type: A.3 How many convenience stores are owned by the company? A.4. Did you know that your city has a Convenience Store Safety Ordinance which requires security features? If no to A.4, then skip to A.8A.5 Did you know that the ordinance applied to your store?A.6 How did you hear about the ordinance?A.7 Do you understand what the ordinance requires?A.8 Is your store registered in your Police Department’s Convenience Store Safety Ordinance program? If no to A.8, then skip to B.1A.9 Who registered your store?Did the store open before (*enter the effective date of the ordinance*)? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Franchise-1 store Franchise-multiple stores  Single owner-multiple stores  Corporate chain store  Single owner operator-1 store 1 2-4  5-9 10-19  20-99  100+ Yes  No Yes  No  N/A Letter from police dept. From trade association Newspaper/radio Other store owner Community leader Other, specify:\_\_\_\_\_\_\_\_\_ N/A Yes  Some of it  No N/A Yes  No  Unk  Your company registered itself Registered by a trade organization Other, specify\_\_\_\_\_\_ N/A Yes  No  Unk |
| B. Evaluation of Compliance Ordinance Requirements |
| Training B.1 Does the store provide training in robbery prevention to employees?  If no, skip to question B.8B.2 Who conducts the training? (check all that apply)B.3 How often do employees receive the training? (check all that apply)B.4 As part of your robbery prevention training, please indicate what employees are told to do during a robbery? (check all that apply)1. Obey robbers comments and give up the money
2. Do not resist, argue, or fight
3. Do not use weapons
4. Maintain cash limits
5. Lock store and call police
6. Do not chase robber
7. Warn robber about anything unexpected
8. Keep robbery short and smooth
9. Make robber visible
10. Other, if yes, specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B.5 Did the store provide robbery prevention training to employees before (*enter the effective date of the ordinance*)?B.6 Has the training changed since (*enter the effective date of the ordinance*)? If no to B.6, then skip to B.8B.7 How did the training change? |  Yes  No  Unk Police officer Manager Security consultant Other, specify\_\_\_\_\_\_\_\_\_\_ Unk N/A Within 30 days after hire  Annually Twice a year or more No training given Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/A Yes  No  Unk  N/AYes After  Unk N/AYes After  Unk N/AProvided more frequentlyNew or additional contentDifferent instructional formatOther, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ N/A |
| SignageB.8 Were each of the following signages implemented before or after (enter *the effective date of the ordinance*)? (Check all that apply, before, after, or not implemented)a. No loitering or trespassing (signs at all public exits and on front, sides and rear of store)b. Surveillance cameras are in usec. Minimum cash is on handd. Employee cannot open drop safee. Security alarm system in usef. Height strips at all public exits | Before After N/I  UnkBefore After N/I  UnkBefore After N/I  UnkBefore After N/I  UnkBefore After N/I  UnkBefore After N/I  Unk |
| VisibilityB.9 Did the store implement a policy to keep unobstructed views from the cash register through outside doors and windows 3’-6’ above the ground before or after (*enter the effective date of the ordinance*)? (Check all that apply, before, after, or not implemented) | Before After N/I  Unk |
| Cash limit policyB.10 Does the store have a policy requiring a minimum amount of cash in the register? If no, skip to B.13B.11 What is your cash limit?B.12 Did the store implement a cash limit policy before or after (*enter the effective date of the ordinance*)?B.13 Does the store have a drop safe? If no to B.13, skip to question B.17B.14 Does the drop safe have a timed release?B.15 Is the safe bolted to the floor?B.16 Was the safe installed before or after (*enter the effective date of the ordinance*)? |  Yes  No  Unk\_\_\_\_\_\_\_\_\_\_Before After N/I  Unk Yes  No Unk  Yes  No N/A  Unk Yes  No N/A  UnkBefore After N/A  Unk |
| Alarm system B.17 Does your store have a silent panic or hold-up alarm system? If no, skip to question B.20B.18 Is there a panic button at each register out of view of the customer?B.19 Was the alarm system implemented before or after (*enter the effective date of the ordinance*)?B.20 Does the store have automatic door locks which can be activated by the register?  If no to B.20, then skip to B.22B.21 Are employees instructed to activate locks during a robbery before the robber leaves the store? |  Yes  No  Unk Yes  No N/A  UnkBefore After N/I  Unk Yes  No N/A  Unk Yes  No N/A  Unk |
| Surveillance camera systemB.22 Which features of your surveillance camera system were implemented before or after (*enter the effective date of the ordinance*)? (Check before, after or not implemented)* 1. Minimum of 2 color digital high-resolution surveillance cameras
	2. View of register
	3. View of main entrance/exit area
	4. Displays date and time of recording
	5. 24 hour operation
	6. Archives every 30 days
 | Before After N/I  UnkBefore After N/I  UnkBefore After N/I  UnkBefore After N/I  UnkBefore After N/I  UnkBefore After N/I  Unk |
| Other security featuresB.23 What other security features were installed in the store in addition to those required by the ordinance before or after (*enter the effective date of the ordinance*)? If B.23 is none or unknown, skip to question B.25B.24 Were these features added before or after the effective date of the ordinance? |  Security guards Fenced in property Lowering aisle height Increased interior or exterior lighting Other, specify \_\_\_\_\_\_\_\_\_\_ Unk NoneBefore After N/I  Unk |
| B.25 Explain reasons why the store complied to the ordinance requirements (Check all that apply) To avoid crime Good for business  Worth price to protect workers  Increases sales  Decreases employee stress To be in compliance with ordinance Other, specify\_\_\_\_\_\_\_\_\_\_\_\_\_ Unk  N/A (Store did not comply to ordinance requirements)B.26 Explain reasons why the store did not comply with each ordinance requirement (Check all that apply; check A/A if store is in compliance with requirement):1. Training Too busy  too expensive  Unnecessary  Unaware of ordinance  Unk  N/A

 Other, specify\_\_\_1. Signage Too busy  too expensive  Unnecessary  Unaware of ordinance  Unk  N/A

 Other, specify\_\_\_1. Drop safe Too busy  too expensive  Unnecessary  Unaware of ordinance  Unk  N/A

 Other, specify\_\_\_1. Visibility Too busy  too expensive  Unnecessary  Unaware of ordinance  Unk  N/A

 Other, specify\_\_\_1. Alarms Too busy  too expensive  Unnecessary  Unaware of ordinance  Unk  N/A

 Other, specify\_\_\_1. Cameras Too busy  too expensive  Unnecessary  Unaware of ordinance  Unk  N/A

 Other, specify\_\_\_B.27 Do you have the responsibility to implement security features such as those required by the ordinance?   Yes  No |
| C. Registration and Training Materials |
| C.1 Did your store receive registration and resource training materials from your Police Department’s Convenience Store Safety Ordinance program?  If no to C.1 then go to C.7C.2 Who sent the materials to your store?C.3 Did you review the resource materials?C4 Did you understand the resource material?C.5 Were the materials useful? C.6 Why were some or all of the materials not useful?(Check all that apply)C.7 Do you need additional resource and training materials to comply with the city C-store security ordinance?If yes, what materials do you need? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_C.8 Do you feel the police provides sufficient surveillance or presence in your store to protect employees and customers? If yes to C.8, then skip to D.1C.9 Please explain what help you need from the police.  |  Yes  No  Unk Police department Trade association Other , specify\_\_\_\_Yes No N/A Unk Yes No N/A Unk Yes No N/A Unk  Insufficient information Did not need materials Regional manager or owner received them, not your responsibility  Other, specify\_\_\_\_\_ N/A Unk Yes  No  Unk Yes  No  Unk\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| D. Robbery risk factors |
| D.1 Are there commercial businesses open 24 hours within 100 feet from your store?D.2 Is the store located within one mile of:* 1. Known drug trafficking activity
	2. Loitering youth, gangs, pan handlers or prostitutes
	3. Subsidized public housing projects
	4. Privately owned multi-family dwellings
	5. Areas with broken windows, graffiti, or abandoned cars on empty lots.
 |  Yes  No  Unk Yes  No  Unk  Yes  No  Unk Yes  No  Unk Yes  No  Unk Yes  No  Unk |
| E. Benefits from compliance |
| E.1 Did sales increase, decrease or stay the same since (*enter the effective date of the ordinance*)? If E.1 is same or unknown, then skip to E.3E.2 What percentage did your sales increase or decrease?E.3 How much was your total sales in 2010.E.4 Overall return on investment from compliance?E.4 Did the following problems occur in the **store** less or more frequently, or no difference since (*enter the effective date of the ordinance*)? 1. Loitering
2. Gang activity
3. Drug activity
4. Shoplifting
5. Theft
6. Robbery
7. Assaults to employees

E.5 Did the following problems occur in the **neighborhood** less or more frequently or no difference since (*enter the effective date of the ordinance)?** 1. Loitering
	2. Gang activity
	3. Drug activity
	4. Shoplifting
	5. Theft
	6. Robbery
	7. Assaults to employees

E.6 Please indicate whether the following items increased, decreased, or stayed the same since (*enter the effective date of the ordinance*)?a. Property value of the store?b. Employee turnover rate?c. Employee morale?d. Employee absenteeism?e. Storage capacity or in inventory on floor?f. Utility bills?g. Greater repeat customers?* 1. Improved or better clientele?
	2. Employee stress from threat of workplace violence
 |  Increased  Decreased Same  Unk<5% 5-9%10-19%  20+% UnkTotal sales:\_\_\_\_\_ Positive return on investment Negative return on investment Not applicable-not in compliance Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk L  M  ND  Unk Decreased Increased No change Unk Decreased Increased No change Unk Decreased Increased No change Unk Decreased Increased No change Unk Decreased Increased No change Unk Decreased Increased No change Unk Decreased Increased No change Unk Decreased Increased No change Unk Decreased Increased No change Unk None |
| F. Cost of security features |  |
| F.1 What is an estimate of the store’s cost to comply with the ordinance to implement the following requirements? *(Keep in mind product planning, implementation and maintenance)*1. Training
2. Alarms
3. Drop safes
4. Surveillance cameras
 | $\_\_\_\_\_\_\_  Unk$\_\_\_\_\_\_\_  Unk$\_\_\_\_\_\_\_  Unk$\_\_\_\_\_\_\_  Unk |
| G. Number of crimes during past three years |  |
| G.1 Please record the number of the following crimes which at your store occurred during 2009, 2010, and 2011? (If unknown, enter UNK) 2009 2010 2011 a. Robbery \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ 1. Were you working during any of these robberies?  Yes  No  Yes  No  Yes  No
2. Non-fatal injury from assault to a worker during a robbery \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_
3. Non-fatal injury from assault to a customer during a robbery \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_
4. Homicide of a worker during a robbery \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_
5. Homicide of a customer during a robbery \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_
6. Non-fatal injury of a worker from assault not due to robbery \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_
7. Homicide of a worker not due to robbery \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_
8. Sexual assault of a worker \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_
 |
| H. Information on the manager |  |
| H.1 Are you the owner of the store?H.2 What is your age?H.3 What is your gender?H.4 What is your highest educational attainment?H.5 Were you born in the U.S.? If yes go to question 55 If no, what country were you born in:H.6 What is your race?H.7 What is your ethnicity?H.8 How long have you worked in a C-store? |  Yes  No  N/A 16-19 years 20-24 years 25-34 years 35-44 years 45-54 years 55-64 years 65 years and over Male  Female Some high school Completed high  school/GED Some college Associate’s degree Bachelor’s degree Master’s degree Professional degree Doctoral degree Other  Yes  No  N/A\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_a. Whiteb. Black or African Americanc. American Indian, Alaskan Natived. Asiane. Native Hawaiian or Pacific Islanderf. Otherg. Multiple racesh. Unknown Latin American Eastern Asia (i.e. China, Korea, Japan) South Eastern Asian (i.e. Vietnam, Cambodia) South Central Asian (i.e. Indian, Iran, Pakistan) Western Asian (i.e. Iraq, Saudi Arabia, Israel, Jordan, Syria) African North American /European Other, Specify \_\_\_\_\_ Unknown <1 year 1-4 years 5-9 years 10 or more years |
| I. Information on store clerks |  |
| I.1 How many clerks are employed? a. In the store? b. On the third shift (10:00P.M. to 6:00 A.M.) (record N/A if no third shift)I.2 Please provide the number of store clerks employed by age groupI.3 Please provide the number of store clerks employed by genderI.4 Please provide the number of store clerks employed by born or not born in U.S.I.5 Please provide the number of store clerks employed by raceI.6 Please provide the number of store clerks employed by ethnicityI.7 Please provide the number of store clerks employed by how long they worked for the C-store | Number: \_\_\_Number: \_\_\_a. 16-19 years \_\_\_b. 20-24 years \_\_\_c. 25-34 years \_\_\_d. 35-44 years \_\_\_e. 45-54 years \_\_\_f. 55-64 years \_\_\_g. 65+ \_\_\_a. Male \_\_\_b. Female \_\_\_a. U.S. \_\_\_b. Not born in U.S. \_\_\_a. White \_\_\_b. Black or African American \_\_\_c. American Indian, Alaskan Native \_\_\_d. Asian \_\_\_e. Native Hawaiian or Pacific Islander \_\_\_f. Other \_\_\_g. Unknown Latin American \_\_\_ Eastern Asia (i.e. China, Korea, Japan) \_\_\_\_\_ South Eastern Asian (i.e. Vietnam, Cambodia) \_\_\_\_\_ South Central Asian (i.e. Indian, Iran, Pakistan) \_\_\_\_\_ Western Asian (i.e. Iraq, Saudi Arabia, Israel, Jordan, Syria) \_\_\_\_\_ African \_\_\_\_\_ North American /European \_\_\_\_\_ Other, Specify \_\_\_\_\_ Unknown a. <1 year \_\_\_b. 1-4 years \_\_\_c. 5-9 years \_\_\_d. 10 or more years \_\_\_ |
| J. Police enforcement |
| J.1 Has the store been cited by the police for being out of compliance with the city’s convenience store ordinance since (*enter the effective date of the ordinance*)? If No, skip to endJ.2 How many times were you cited for noncompliance?J.3 What was the total cost of the fines for all citations?J.4 Was your compliance a direct result of the citation? |  Yes  No  UnkNumber \_\_\_\_\_  UnkTotal cost\_\_\_\_\_\_\_\_  Unk Yes  No  N/A  Unk |

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| Store Evaluation Form |
| A. Store Information (pre-recorded) |
| Store ID number \_\_ \_\_ \_\_ \_\_Name of store\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Company name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Store address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Store telephone number \_\_ \_\_ \_\_ -\_\_ \_\_ \_\_ -\_\_ \_\_ \_\_ \_\_Date of store site visit \_\_ \_\_ /\_\_ \_\_ /\_\_ \_\_ \_\_ \_\_Time of store visit \_\_ \_\_\_ : \_\_ \_\_ AM PMStore is registered in Police Department’s compliance program  Yes  NoSurvey staff ID \_\_ \_\_ |
| B. Ordinance Requirements |
| Registration* + - 1. Ordinance compliance Program registration sticker is posted
 |  Yes  No |
| Signage* + - 1. Signs posted saying the following:
	1. No loitering or trespassing (signs at all public exits and on front, sides and rear of store)
	2. Surveillance cameras are in use
	3. Minimum cash is on hand
	4. Employee cannot open drop safe
	5. Security alarm system in use
		+ 1. Are there height strips at all public exits
 |  Yes  No Yes  No Yes  No Yes  No Yes  No Yes  No |
| Visibility* + - 1. Unobstructed view of outside from cash register through all windows and public access doors extending from 3 to 6 feet above the ground.
 |  Yes  No |
| Alarms5 Silent panic or holdup alarm system evident in store |  Yes  No |
| Surveillance camera system* + 1. Minimum of two surveillance cameras
		2. View of register
		3. View of main entrance/exit area
 |  Yes  No Yes  No Yes  No |
| C. Other CPTED features |
| Access/escape routes* + 1. A person outside can be observed from the register station before entering store
		2. There is opportunity for a person outside to hide from customers and clerks in store
		3. Access to parking lot is visible from within store?
		4. Property is fenced to force entrance and exit in view of register
 |  Yes  No Yes  No Yes  No Yes  No |
| Interior visibility1. Are mirrors used to view rear aisle areas
2. Does the shelf height block view of persons in aisles
3. Is there a place to hide which is not visible from cash register
 |  Yes  No Yes  No Yes  No |
|  Bullet-resistant shielding 1. Is bullet resistant shielding around cash register?

If no to 16 then go to 181. Is bullet resistant shielding in use?
2. Does the store have a pass-through cash box?
3. Is there a security guard present?
 |  Yes  No Yes  No Yes  No Yes  No |
| Store characteristics1. Does store have a off-street parking lot?
2. Are there multiple clerks present?
3. Is store open 24 hours?
4. Is store located in a strip mall?
5. Is store located within ½ mile of an expressway?
6. Does store have gas pumps?
7. Describe store type:
8. Is the store located within one mile of:
9. Known drug trafficking activity
10. Loitering youth, gangs, pan handlers or prostitutes
11. Subsidized public housing projects
12. Privately owned multi-family dwellings
13. Areas with broken windows, graffiti, or abandoned cars on empty lots.
 |  Yes  No Yes  No Yes  No Yes  No Yes  No Yes  No Convenience  Gasoline station with nightly closed kiosk with pass thru cash box Gasoline station with nightly open kiosk without pass thru cash box Small grocery store  Other, describe\_\_\_ Yes  N o  Unk Yes  No  Unk Yes  No  Unk Yes  No  Unk Yes  No  Unk |