

WET & DRY MILL PRODUCERS OF ETHANOL OPERATION PROFILE – JULY 2014

OMB No. 0535-XXXX
 Approval Expires:
 Project Code: QID:
 SMetaKey:



**United States
 Department of
 Agriculture**



**NATIONAL
 AGRICULTURAL
 STATISTICS
 SERVICE**

USDA/NASS
 National Operations Division
 9700 Page Avenue, Suite 400
 St. Louis, MO 63132-1547
 1-888-424-7828
 FAX: 1-855-515-1328
 Email: nass@nass.usda.gov

Please make corrections to name, address and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, your responses will be kept **confidential** and will not be disclosed in identifiable form to anyone other than employees or agents. By law, every employee and agent has taken an oath and is subject to a jail term, a fine, or both if he or she willfully discloses ANY identifiable information about you or your operation. Response is **voluntary**.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-XXXX. The time required to complete this information collection is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

1. Will this firm operate a **dry mill** to produce ethanol in 2014?^{xxx} 1 Yes
 3 No
 2 Don't Know
2. Will this firm operate a **wet mill** to produce ethanol in 2014?^{xxx} 1 Yes
 3 No
 2 Don't Know

[**ENUMERATOR NOTE:** If Items 1 and 2 are both NO or DON'T KNOW, continue; otherwise go to Item 4]

3. Please provide notes about the status of this operation, the respondent's contact information, and conclude interview:

4. Will this firm operate a **wet or dry mill** in more than one location in 2014?

^{xxx} 1 Yes – List information on each separate location below 3 No – Go to Item 6

FIRM NAME	MAILING ADDRESS	CONTACT PERSON
-----------	-----------------	----------------

5. Considering all locations reported in Item 4, how would this firm prefer to report?

- ^{xxx}
- 1 Each location individually
 2 Combined total for all locations
 3 Headquarters reports all locations separately
 4 Other combination – Please list which locations you would like combined for reporting purposes:

6. What is the **maximum annual production capacity** for total alcohol produced at all of the locations that will be reported for under this firm?

Gallons
xxx

7. Who will be the primary contact at your warehouse for completing our monthly survey?

Name: _____

Position: _____

Telephone: _____

Address: _____

Fax: _____

Email: _____

8. Who will be the alternate contact at your warehouse for completing our monthly survey?

Name: _____

Position: _____

Telephone: _____

Address: _____

Fax: _____

Email: _____

OFFICE USE

[ENUMERATOR ACTION: Attempt to collect the prior month's information using the attached questionnaire or by accessing the EDR instrument.]

xxx

9. Is the overall monthly production reported by this operation higher, lower, or about the same as the average monthly production during the previous 12 months?

xxx 1 Higher 2 Lower 3 About the same

Days

10. How many days after the last day of the reference month can this operation provide the requested information about that reference month?

xxx

11. Does this firm store oils in a public or private warehouse at another location?

xxx 1 Yes 3 No

COMMENTS:

Respondent Name: _____	9911 Phone: (____) _____	9910 MM DD YY Date: __ __ __ __
------------------------	-----------------------------	---

OFFICE USE ONLY

Response	9901	Respondent	9902	Mode	9903	Enum.	Eval.	R. Unit	Change	Office Use for POID			
1-Comp		1-Op/Mgr		1-Mail		9998	9900	9921	9985	9989			
2-R		2-Sp		2-Tel						_____ - _____ - _____ - _____			
3-Inac		3-Acct/Bkpr		3-Face-to-Face						Optional/NOC Use			
4-Office Hold		4-Partner		4-CATI						9907	9908	9906	9916
5-R – Est		9-Oth		5-Web									
6-Inac – Est				6-e-mail									
7-Off Hold – Est				7-Fax									
8-Known Zero				8-CAPI									
				19-Other									
S/E Name													