

SURVEY ON WILDLIFE DAMAGE AND ATTITUDES TOWARDS DEER AND OTHER WILDLIFE – Crop Year 2015

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**UNITED STATES
DEPARTMENT OF
AGRICULTURE**



**NATIONAL
AGRICULTURAL
STATISTICS
SERVICE**

National Agricultural Statistics Service
U.S Department of Agriculture
NOC Division
9700 Page Avenue, Suite 400
St. Louis, MO 63132-1547
Phone: 888-424-7828
Fax: 855-515-1328
E-mail: nass@nass.usda.gov

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

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PLEASE ANSWER THE FOLLOWING QUESTION(S) FOR THE TOTAL ACRES YOU (NAME ON LABEL) OPERATE.

1. Did you operate land used for agricultural purposes in 2015? *(Include cropland, pastureland, fruit and vegetable, etc.)*
 xxxx **Yes** – Go to Item 2 **No** – Go to Item 35, Back Page

	ACRES
2. In 2015, how many acres did this operation:	xxxx
a. Own.....+	xxxx
b. Rent or Lease from others or use Rent Free.....+	xxxx
c. Rent to others?.....-	xxxx
3. Calculate item 2a + 2b – 2c. then the total acres operated in 2015 is.....=	xxxx

	ACRES
4. Of the (Item 3) total acres, how many acres of farmed and unfarmed woodlands are on the area you operate?.	xxxx

5. In which county was the largest value of your agricultural products raised or produced?	OFFICE USE
County: _____	xxxx

6. Of the (Item 3) total acres operated for agricultural purposes, how many acres were used to grow the following	ACRES
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crops?

- a. Corn
- b. Soybeans
- c. Hay
- d. Wheat
- e. Oats
- f. Orchards
- g. Tree Plantations
- h. Pasture
- i. Nursery
- j. Other (*specify* ^{xxxx} _____)

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ACRES

7. How many acres were enrolled in government conservation programs on this operation in 2015? (*Include CRP, WRP, WHIP, etc*)?.....

xxxx

8. Was there any crop damage caused by wildlife on this operation in 2015?

xxxx **Yes** – Continue **No** – Go to Item 15 on page 4

ACRES

9. Of the (Item 3) total acres operated for agricultural purposes, how many acres had crop damage caused by wildlife?.....

xxxx

10. Of the (Item 9) acres with crop damage, how many acres can be attributed to the following wildlife?

SPECIES	NUMBER OF ACRES AFFECTED BY LOSS
a. Deer	xxxx
b. Resident Geese	xxxx
c. Migrant Geese	xxxx
d. Bears	xxxx
e. Groundhog	xxxx
f. Other (specify:xxxx)	xxxx
Total Acres With Crop Damage Caused by Wildlife <i>(Should match Item 9 above)</i>	

DOLLARS

xxxx

11. How many dollars in crop damage were caused by wildlife on this operation in 2015?.....

12. Of the (Item 11) dollars in crop damage, what percentage can be attributed to the following wildlife.....?

SPECIES	PERCENT OF TOTAL LOSS
g. Deer	xxxx
h. Resident Geese	xxxx
i. Migrant Geese	xxxx
j. Bears	xxxx
k. Groundhog	xxxx
l. Other (specify:xxxx)	xxxx
Total Economic Loss	100%

14. How would you describe the level of damage suffered by each specie on your operation in 2015?(Check one box in each row)

SPECIES	No Damage	Slight Damage	Moderate Damage	Severe Damage
a. Turkeys..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Geese..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Rabbits..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Pheasants..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Beaver..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Coyotes..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. Raccoons..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. Other (specify: ^{xxxx}) ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

15. How would you describe the number of each specie on your operation in 2015?(Check one box in each row)

SPECIES	None	Low	Moderate	High
a. Turkeys..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Geese..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Rabbits..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Pheasants..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Beaver..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Coyotes..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. Raccoons..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. Other (specify: ^{xxxx}) ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

16. How would you describe the number of deer on the area you operate?

- ^{xxxx}
- 1 Too Low
 - 2 About Right
 - 3 Too High
 - 4 No Opinion

17. In 2015, were any control methods used on this operation in order to reduce crop damage from wildlife?

^{xxxx}

- 1 Yes
- 3 No – [Skip to question 19]

DOLLARS

18. How many dollars did this operation spend on control methods to reduce crop damage by wildlife? (Include frightening devices, repellents, fences only for wildlife control, etc.).....

^{xxxx}

19. Are there currently deer on the area you operate?

^{xxxx}

- 1 Yes
- 3 No
- 2 Don't Know

[If any damage from deer was reported in Item 10a, then continue, otherwise go to Item 21.]

20. What level best describes the damage caused in 2015 by deer for the following crops produced on the land you operate?
(Check one box in each row)

CROPS	No Damage	Slight Damage	Moderate Damage	Severe Damage
a. Corn..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Soybeans..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Hay..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Wheat/Oats..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Orchards..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Tree Plantations..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. Pasture..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. Nursery..... ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
i. Other (specify: ^{xxxx}) ^{xxxx}	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

21. Have you initiated any deer damage control measures on the area you operate?

- ^{xxxx} 1 Yes - Continue
 3 No - Go to Item 23
 2 Don't Know - Go to Item 23

22. Which of the following deer control methods were used on this operation in 2015?

CONTROL METHODS	Used on operation in 2015?			Did this action achieve desired results?		
a. Electric fence.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
b. Deer proof fences.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
c. Allow more hunters on your farm.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
d. Encourage hunters to take more Does.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
e. Encourage neighbors to allow more deer hunting.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
f. Chemical repellants.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
g. Changed farming practices to discourage deer.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
h. Devices to scare deer away.....	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>
i. Other (specify ^{xxxx})	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>	^{xxxx} 1 <input type="checkbox"/>	Yes 3 <input type="checkbox"/>	No <input type="checkbox"/>

23. Are you aware of depredation programs offered by your State's Department of Natural Resources?

- ^{xxxx} 1 Yes
 3 No

24. During the five-year period 2011 through 2015, did you contact your State's Department of Natural Resources offices about deer damage?

- ^{xxxx} 1 Yes
 3 No

25. During the five-year period 2011 through 2015, has the amount of deer on this operation increased, decreased, or stayed the same?

- ^{xxxx} 1 Increased
 2 Stayed the Same
 3 Decreased
 4 Don't Know

26. During the five-year period 2011 through 2015, has the amount of deer damage on this operation increased, decreased, or stayed the same?

- xxxx 1 Increased
 2 Stayed the Same
 3 Decreased
 4 Don't Know

27. Would you prefer the deer population on this operation increase, decrease, or stay the same?

- xxxx 1 Increase Greatly
 2 Increase Slightly
 3 Remain The Same
 4 Decrease Slightly
 5 Decrease Greatly

28. Who was allowed to hunt deer on this operation in 2015? (Check all that apply)

- xxxx You
 xxxx Your Family
 xxxx Friends or neighbors
 xxxx Strangers who ask for no rent/fee
 xxxx Strangers who pay a rent/fee
 xxxx Anyone regardless of permission

29. Are you currently renting or leasing hunting privileges out to hunters for deer hunting on any of the land you operate?

- xxxx 1 Yes - Continue
 3 No – Go to Item 31

30. In 2015, which of the following species did this operation rent or lease hunting rights out to hunters?

SPECIES	Rent or Lease Hunting Rights to Hunters
Deer.....	xxxx <input type="checkbox"/>
Turkey.....	xxxx <input type="checkbox"/>
Waterfowl.....	xxxx <input type="checkbox"/>
Pheasants & Quail.....	xxxx <input type="checkbox"/>
All Game.....	xxxx <input type="checkbox"/>

31. What percentage of your household income is derived from farming? *(Check one)*

- xxxx
- 1 None
 - 2 Less than 25%
 - 3 25% - 49%
 - 4 50% - 74%
 - 5 75% - 100%

32. What was your age on December 31, 2015? *(Check one)*

- xxxx
- 1 Less than 25 years
 - 2 25 – 34 years
 - 3 35 – 44 years
 - 4 45 – 54 years
 - 5 55 – 64 years
 - 6 65 years and over

33. What is your gender?

- xxxx
- 1 Male
 - 2 Female

34. Do you currently live on your operation?

- xxxx
- 1 Yes
 - 3 No

35. Please comment on crop conditions, weather, wildlife damage:

36. **Survey Results:** To receive the complete results of this survey on the release date go to
 (http://www.nass.usda.gov/Statistics_by_State/Oregon/index.asp)

Would you rather have a brief summary mailed to you at a later date? ⁹⁹⁹⁰ 1 Yes 3 No

Respondent Name: _____

9911	9910	MM	DD	YY
Phone: () --				

This completes the survey. Thank you for your help.

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