

**Whale Watching Operator Survey**  
**Channel Islands Region, California**

**This is a voluntary survey.**

The public reporting burden for this collection of information is estimated to average 2.5 hours including the time for reviewing instructions, searching for existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to: Dr. Theresa L. Goedeke, NOAA National Ocean Service, National Centers for Coastal Ocean Science, 1305 East-West Highway, Silver Spring, MD 20910. Responses provided for this survey will be anonymous. No personally identifiable information is being collected with this survey; responses will not be attributed to individual businesses. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply, with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number.

**GENERAL INFORMATION**

Respondent ID Number \_\_\_\_\_  
(assigned by interviewer)

1. Which of the following includes your age?  
18-30    31-40    41-50    51-60    over 60
2. Are you Hispanic or Latino? \_\_\_ YES \_\_\_ NO
3. What is your race? (Mark one or more)  
\_\_\_ White    \_\_\_ Black or African American    \_\_\_ American Indian or Alaska Native  
\_\_\_ Asian    \_\_\_ Native Hawaiian or Other Pacific Islander  
\_\_\_ Other
4. How many family members do you support (including yourself)?  
Myself only    2    3    4    5    6    7    Greater than 7
5. What is your primary port/marina? \_\_\_\_\_
6. Do you have a secondary port/marina from where you operate part of the year?  
YES \_\_\_ NO \_\_\_
- 6a. If YES, which one? \_\_\_\_\_
7. How many years have you been a whale watching vessel operator? \_\_\_ (number of years)

8. How many years have you been a whale watching vessel operator in the Santa Barbara Channel? \_\_\_\_ (number of years)

9. Do you visit marine reserves/conservation areas specifically during your tours?  
(Interviewer—Please show map to identify specific quadrants)  
YES \_\_\_\_ NO \_\_\_\_

9a. Why? \_\_\_\_\_

9b. How often? \_\_\_\_\_

9c. If YES, how many years have you taken whale watchers to the Channel Islands National Marine Sanctuary? \_\_\_\_ (number of years)

10. Do you currently have a naturalist on board during whale watching trips?  
YES \_\_\_\_ NO \_\_\_\_

10a. If NO, would you be interested in having one on board if you had more information about the role they play with whale watching operators? YES \_\_\_\_ NO \_\_\_\_

11. Do you use Spotter Pro to record your whale watching expeditions and whale sightings?  
YES \_\_\_\_ NO \_\_\_\_

12. Are customers targeting particular whale species when they go on a whale watching trip?  
YES \_\_\_\_ NO \_\_\_\_

12a. If YES, please list: \_\_\_\_\_

13. Are you aware that whales in the region are at risk of being struck by vessels and that encounters with vessels 65 feet or greater in length can lead to the serious injury or death of the animal?  
YES \_\_\_\_ NO \_\_\_\_

13a. If YES, on a scale of 1 to 5, with 1 being not concerned and 5 being extremely concerned, how concerned are you that whale strikes are currently having a negative impact on your business?

- 1 – not at all concerned
- 2 – Slightly concerned
- 3 – Somewhat concerned
- 4 – Moderately concerned
- 5 – Extremely concerned
- No opinion

14. In your opinion, on a scale of 1 to 5, how has the quality of whale watching changed in the last 10 years?

- 1- much worse
- 2- somewhat worse
- 3-no change
- 4-somewhat better
- 5-much better
- No opinion

14a. If you believe that the quality of whale watching has changed, could you tell me why you think this is true (e.g. change in the abundance of whales, overcrowding from other operators, new regulations, etc.).

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### ECONOMIC INFORMATION

15. What approximate percentage of the TOTAL business income is derived from whale watching operations? \_\_\_\_%

16. What approximate percentage of your TOTAL household income is derived from whale watching operations? \_\_\_\_%

17. How would you describe the whale watching operation? (Mark one or more)

- Full-time whale watching operation
- Part-time whale watching operation
- Seasonal whale watching operation. If seasonal, which months?  
\_\_\_\_\_
- Full-time Combination whale watching, recreational cruises, kayaking, diving/snorkeling, and wildlife observation operation
- Part-time Combination whale watching, recreational cruises, kayaking, diving/snorkeling, and wildlife observation
- Seasonal Combination whale watching, recreational cruises, kayaking, diving/snorkeling, and wildlife observation.

17a. If seasonal, which months? \_\_\_\_\_

18. Number of boats/vessels at the operation: \_\_\_\_ (number of vessels)

19. Number of whale watching participants per vessel in operation (capacity):

Vessel 1: \_\_\_ watchers    Vessel 2: \_\_\_ watchers

Vessel 3: \_\_\_ watchers    Vessel 4: \_\_\_ watchers

20. Number of participants per vessel in recreational cruise operation (capacity):

Vessel 1: \_\_\_ participants    Vessel 2: \_\_\_ participants

Vessel 3: \_\_\_ participants    Vessel 4: \_\_\_ participants

21. Number of kayakers per vessel in operation (capacity):

Vessel 1: \_\_\_ kayakers    Vessel 2: \_\_\_ kayakers

Vessel 3: \_\_\_ kayakers    Vessel 4: \_\_\_ kayakers

22. Number of divers/snorkelers per vessel in operation (capacity):

Vessel 1: \_\_\_ divers/snorkelers    Vessel 2: \_\_\_ divers/snorkelers

Vessel 3: \_\_\_ divers/snorkelers    Vessel 4: \_\_\_ divers/snorkelers

23. Number of wildlife observers per vessel in operation (capacity):

Vessel 1: \_\_\_ wildlife observers    Vessel 2: \_\_\_ wildlife observers

Vessel 3: \_\_\_ wildlife observers    Vessel 4: \_\_\_ wildlife observers

24. Number of employees at the operation:

a. Full time \_\_\_ b. Part time \_\_\_ c. Seasonal \_\_\_\_\_

25. Number of vessel trips per day:

Whale watching \_\_\_\_\_

Recreational cruise \_\_\_\_\_

Fishing \_\_\_\_\_

Kayaking \_\_\_\_\_

Diving/snorkeling \_\_\_\_\_

Wildlife cruises \_\_\_\_\_

26. Please provide your best estimate for annual operating expenses (i.e. docking fees, permits/licenses, maintenance and repair, and office expenses) last year.

\$ \_\_\_\_\_

27. Please provide your best estimate for trip related expenses (i.e. food/supplies, bait, captain and crew wages, equipment costs) last year.

\$ \_\_\_\_\_

28. Please provide your best estimate of total business revenues last year:

\$ \_\_\_\_\_

29. Please provide your best estimate of total revenues and/or percent of total revenues last year by each geographic area: (See map for definitions of each area)

Channel Islands National Marine Sanctuary \$ \_\_\_\_\_ % \_\_\_\_\_

Outside Channel Islands National Marine Sanctuary \$ \_\_\_\_\_ % \_\_\_\_\_

30. What is the minimum number of whales that need to be seen in order to make the trip worthwhile financially? \_\_\_\_\_

31. If you do not see any whales on the trip, do you reimburse customers? \_\_\_YES \_\_\_NO

31a. If YES, how do you reimburse customers? \_\_\_\_\_

### 32. Use by activity and month

Intensity of Use: For each Activity, please answer the following questions

1. In what part of the year (months) did you participate or operate trips for this activity?
2. For each month how many trips did you go on?
3. On average, how many days long are each trip for each activity? Did this vary from month to month?
4. On average, how many passenger do you carry per trip for each activity? Did this vary from month to month?
5. From the above information, calculate person-days for each month and activity.
6. In what time-period do you operate, if it was less than all month (e.g. 1st two weeks)?

	Months	Trips	Days Per Trip	Passengers Per Trip	Person- Days	Time Period
Activity 1	JAN	_____	_____	_____	_____	_____
	FEB	_____	_____	_____	_____	_____
	MAR	_____	_____	_____	_____	_____
	APR	_____	_____	_____	_____	_____
	MAY	_____	_____	_____	_____	_____
	JUN	_____	_____	_____	_____	_____
	JUL	_____	_____	_____	_____	_____
	AUG	_____	_____	_____	_____	_____
	SEP	_____	_____	_____	_____	_____
	OCT	_____	_____	_____	_____	_____
	NOV	_____	_____	_____	_____	_____
	DEC	_____	_____	_____	_____	_____
Activity 2	JAN	_____	_____	_____	_____	_____
	FEB	_____	_____	_____	_____	_____
	MAR	_____	_____	_____	_____	_____
	APR	_____	_____	_____	_____	_____
	MAY	_____	_____	_____	_____	_____
	JUN	_____	_____	_____	_____	_____
	JUL	_____	_____	_____	_____	_____
	AUG	_____	_____	_____	_____	_____
	SEP	_____	_____	_____	_____	_____
	OCT	_____	_____	_____	_____	_____
	NOV	_____	_____	_____	_____	_____
	DEC	_____	_____	_____	_____	_____
Activity 3	JAN	_____	_____	_____	_____	_____
	FEB	_____	_____	_____	_____	_____
	MAR	_____	_____	_____	_____	_____
	APR	_____	_____	_____	_____	_____
	MAY	_____	_____	_____	_____	_____
	JUN	_____	_____	_____	_____	_____
	JUL	_____	_____	_____	_____	_____
	AUG	_____	_____	_____	_____	_____
	SEP	_____	_____	_____	_____	_____
	OCT	_____	_____	_____	_____	_____
	NOV	_____	_____	_____	_____	_____
	DEC	_____	_____	_____	_____	_____
Activity 4	JAN	_____	_____	_____	_____	_____
	FEB	_____	_____	_____	_____	_____
	MAR	_____	_____	_____	_____	_____
	APR	_____	_____	_____	_____	_____
	MAY	_____	_____	_____	_____	_____
	JUN	_____	_____	_____	_____	_____
	JUL	_____	_____	_____	_____	_____
	AUG	_____	_____	_____	_____	_____
	SEP	_____	_____	_____	_____	_____
	OCT	_____	_____	_____	_____	_____
	NOV	_____	_____	_____	_____	_____
	DEC	_____	_____	_____	_____	_____

### 33. Mapping Exercise: Map the Distribution of Each Activity

Respondents should be advised to provide information on their anticipated spatial use of the region. This anticipated spatial use may be the same as their current use or it may be different. Give respondents 100 penny budget meaning one penny equals one percent of passenger activity. Have respondent allocate their budget across all map cells. Record codes on the coding sheet. Map cells should be referenced by column and row: For example, C1R1 1% means 1% of activity is in cell Column 1 Row 1. Percent of each activity must add up to 100.

34. Does this map reflect where you presently operate? Y/N  
If no is selected, please explain why future operations may be different than where you have historically operated.