2018 ARIZONA GREEN INDUSTRY SURVEY

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National Agricultural Statistics Service U.S Department of Agriculture Mountain Regional Field Office PO Box 150969 Lakewood, CO 80215-0969 Phone: 1-720-787-3150 Fax: 1-866-314-4029 E-mail: nassfomtr@nass.usda.gov

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

The Arizona Nursery Association and Arizona Landscape Contractors Association need your help in updating our widely used "Green Industry" publication. The contribution of our industry to the Arizona economy was last measured in 2007 and needs to be brought up to date. Please take a few minutes to complete and return the enclosed questionnaire. The information you provide will be used to promote the industry and to represent you in matters before the state legislature. The survey information will be collected and summarized by USDA-NASS to assure that your report will be kept strictly confidential. If you have questions regarding the survey, please contact NASS at 602-280-8850.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107–347, and other applicable Federal laws. For more information on how we protect your information please visit: <u>https://www.nass.usda.gov/confidentiality</u>. Response to this survey 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 control number is 0535-0093. The time required to complete this information collection is estimated to average 20 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.

This survey will measure the economic impact of Arizona's nursery, greenhouse and landscape industry.

1During 2018, did your business do any of the following:

- sell nursery or greenhouse crops (include plants, trees, shrubs, either in-ground or container grown, and sod. Include sales either wholesale or retail)
- sell landscape installation services (also include hardscape installations)
- sell landscape maintenance services
- sell design or consultation services

If yes , continue	If no , go to <u>Section VI</u> on the last page

<u>SECTION I</u> - **Organization**: This section deals with how your business is organized and factors limiting your ability to expand.

1. In what year was your company established?	xxxx year
2. In what year did your company begin doing business in Arizona?	xxxx year
3. In what city and state is your headquarters located? xxxx City	

xxxx State

<u>SECTION I</u> - Organization (continued)

4. Please check the box below that most closely describes your business organization.

sole proprietorship	xxxx	
partnership	xxxx	
corporation	xxxx	
LLC	xxxx	
Other, specify	_ <i>xxxx</i>	

5. Please indicate the number of locations (offices, shops, nurseries, or yards) of your business. (If you have several types of facilities at one address, please count it as one location).

xxxx Total number of locations
otal acres in production including field/containers space and greenhouse space (retail only = 0)
Based on the total gross receipts for your business conducted in Arizona and other states in 2018, please indicate the approximate percent of receipts earned from business conducted in Arizona. (If all of your gross receipts are from Arizona operations, enter 100%).
Please rank the following factors from 1- 3, with 1 having the least effect and 3 having the most effect, based on their capacity to limit your ability to expand in Arizona. (Place a " ✓ " in appropriate boxes)

		LEAS	Т		1	MOS1			
				1		2		3	N/A
water supply	XXXX		xxxx		xxxx		xxxx		
hourly labor availability	xxxx		xxxx		xxxx		xxxx		
ability to hire managers	XXXX		xxxx		xxxx		xxxx		
land availability	XXXX		xxxx		xxxx		xxxx		
competition	xxxx		xxxx		xxxx		xxxx		
government regulations	xxxx		xxxx		xxxx		xxxx		
market demand	XXXX		xxxx		xxxx		xxxx		
availability of capital	xxxx		xxxx		xxxx		xxxx		
other (please list)	<i>xxxx</i>		xxxx		xxxx		xxxx		

<u>SECTION II</u> - **Sales and Labor:** In this section, please report the gross receipts for your business in 2018. Use information for the 2018 calendar year or your 2018 fiscal year.

9. What were your total gross receipts from your Arizona facilities in 2018? (Include revenues from production, wholesale, retail, landscape design, landscape installation, interior and exterior landscape maintenance, salvage\reveg operations, water feature and irrigation installations, and arborist operations).

xxxx \$_____

SECTION II - Sales and Labor: (Continued)

10. What percent of your 2018 gross receipts for the plants and planting material you **used or sold** in Arizona came from the following categories: (note: producers, wholesalers, retailers, and landscape service providers should complete this section if they had receipts for plant sales)

Your own fields, nurseries,

greenhouses	xxxx		_%			
	Arizona suppliers					
xxxx	%					
	California suppliers					
	xxxx	%				
	Texas suppliers					
	xxxx	%				
	Florida suppliers					
	xxxx	%				
	Other suppliers				xxxx	_%
					100 %	

11. Please indicate the number of hired workers you had in your Arizona operations as of December 31, 2018.

<u>Type of employee</u>	<u>Number</u>
150+ Days	xxxx
<150 Days	xxxx

12. On any one day during 2018, what was the largest number of employees you had on your payroll for your Arizona operations?

xxxx Number _____

12a. How many unfilled positions do your Arizona operations currently have?

13. Please indicate the percent of full time equivalent employees you had in your Arizona operations that worked in the following areas. If an employee worked in more than one area, estimate the amount of time spent in each category. (A full time equivalent is one person working 40 hours. For example, two people working 20 hours each is one full time equivalent).

	Percent
	(full time equivalent)
Nursery/field production	
Supervisor/Foreman	XXXX
Laborers	XXXX
Landscape design/consultation	
Licensed Architect	xxxx
Designers/Draftsmen, graphic artists, & computer specialists	xxxx
Landscape installation	
Supervisor/Foreman	xxxx
Laborers	XXXX
Landscape maintenance	
Supervisor/Foreman	xxxx
Laborers	xxxx
Tree Workers/Arborists	xxxx
Other	
Managerial	xxxx

Administrative/Office Support	xxxx	
Sales, cashiers, distributors	xxxx	
Other	<i>xxxx</i>	
		100%

SECTION III –**Nursery related Sales and Production:** This section deals with gross receipts and the area in production for only your **nursery-related** business. If your business deals only with landscape services, please skip to <u>Section IV</u>, page 5. Use information for the 2018 calendar year or your 2018 fiscal year.

14. What percent of your total gross receipts from your Arizona facilities were from the following categories: (Include receipts either wholesale or retail).

Container plant production	xxxx	%
In ground production of horticultural products	xxxx	%
Greenhouse bedding plant production	xxxx	%
Sod production	xxxx	%
Salvage/Revegetation operations	xxxx	%
Re-wholesale trade of greenhouse/nursery products	xxxx	%
Retail seller of greenhouse/nursery products	xxxx	%
Other, specify	xxxx%	
15. What percent of your total gross receipts from Arizona facilities	100 were from:	9%
Arizona buyers	xxxx	%
Nevada buyers	xxxx	%
California buyers	xxxx	%
Texas and New Mexico buyers	xxxx	%
Rest of U.S.	xxxx	%
Mexico buyers	xxxx	%
	100	%
16. What percent of your total gross receipts from your Arizona fac	cilities were to:	
Wholesale distributors	xxxx	%
Retail distributors	xxxx	%
Landscape service firms	xxxx	%
Final user/general public	xxxx	%
		%

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- **SECTION IV** Landscape-related Sales: This section deals with gross receipts for only your landscape-related business. If your business deals only with nursery production, wholesaling, or retailing then please skip to <u>Section V</u>, page 6. Use information for the 2018 calendar year or your 2018 fiscal year.
 - 17. What percent of your total gross revenues from your Arizona facilities were to:

Residential customers	xxxx	_%
Commercial customers	xxxx	_%
HOA/Common Area customers	xxxx	_%
Municipalities	xxxx	_%
	100	

 What percent of your total 2018 gross receipts from your Arizona facilities were from the following categories: (include landscape design, landscape installation, interior and exterior landscape maintenance, salvage\reveg operations, water feature and irrigation installations, and arborist operations)

Landscape design\consultation	xxxx	_%
Landscape installation	xxxx	_%
Landscape maintenance	xxxx	_%

100 %

18a. Please, indicate below the percent of your total gross receipts by activity and type of customer.

<u>Activity</u>	<u>Residential</u>	<u>Commercial</u>	HOA/Common Area	Municipalities	
Landscape design\consulting	xxxx%	xxxx%	xxxx%	xxxx%	
Landscape installation	xxxx%	xxxx%	xxxx%	xxxx%	
Landscape maintenance	xxxx%	xxxx%	xxxx%	xxxx%	

- **SECTION V Salaries and Expenditures:** Both nursery-related and landscape-related businesses should complete this section. Please report expenses from your Arizona facilities for the 2018 calendar year or your 2018 fiscal year.
 - 19. Please estimate the amount of income, property and sales taxes paid by your firm in 2018.

Arizona corporate income tax	xxxx \$
Property taxes paid in Arizona	xxxx \$
Sales taxes paid in Arizona (collected by you on your sales)	xxxx \$

20. What were the average **ANNUAL** salaries paid to each type of worker in 2018? (Report totals for only those categories that apply to your business).

<u>Type of Worker</u>	<u>Avg. Annual Salar</u>	y or <u>Avg. Hourly Wage</u>
Nursery Business only Laborer	xxxx \$	xxxx \$
Field supervisors	xxxx \$	xxxx \$
Landscape Business only Laborer	xxxx \$	\$
Foremen	xxxx \$	\$
Tree Worker/Arborist	xxxx \$	xxxx \$
Nursery & Landscape Businesses		
Sales Representatives(include salary & con	mmissions) xxxx \$	xxxx \$
Administrative/Office Support	xxxx \$	xxxx \$
Managerial	xxxx \$	\$
Other, specify	xxxx \$	\$

	Total Expenses Entire Operation	Percent Paid		
Vehicle and Equipment Expenses:				
a. Vehicle lease or purchase expenses	xxxx \$	xxxx	%	
b. All other equipment purchases or leases	xxxx \$	xxxx	%	
xxxx \$ xxxx	%			
%				
e. All other vehicle and equipment expenses not				
reported above	xxxx \$	xxxx	%	
Supply Expenses:				
f. Plant material expenses	xxxx \$	xxxx	%	
g. Rock and other hardscape expenses	xxxx \$	xxxx	%	
h. Container and stake expenses	xxxx \$	xxxx	%	
i. Fertilizer and chemical expenses	xxxx \$	xxxx	%	
xxxx \$%				
%				
l. Irrigation materials/systems and landscape lighting expense		xxxx	%	
xxxx \$	<i>xxxx</i> %			
%				
Utility Expenses:	¢			
o. Water/ sewer utilities (include irrigation)	xxxx \$			
p. Electricity and natural gas expenses	xxxx \$			
q. Telephone and other communication expenses	xxxx \$			
r. All other utility expenses not reported above	xxxx \$			
Labor Expenses:				
s. Hired labor expenses				
(include cash wages and salaries only.				
also include the cash outlays for contracted labor.	^			
exclude taxes paid)	xxxx \$			
t. Hired labor benefits expenses				
(include the cash outlays of benefits only,				
such as health insurance, paid time off,				
retirement contributions, etc. exclude	¢			
taxes paid)	xxxx \$			
u. Hired labor payroll taxes paid	xxxx \$			
Other Expenses:				
v. Mortgage/leasing/rent expenses	xxxx \$			
w. Facility maintenance or repair (excluding labor cost)	xxxx \$			
x. Facility construction/remodeling expenses	xxxx \$			
y. TOTAL EXPENSES IN 2018 (sum of items a - x)	xxxx \$			

xxxx

xxxx

xxxx

SECTION V - Salaries and Expenditures (continued)
Please list the approximate <u>annual expenses</u> for the following items: Please report expenses from your Arizona facilities for the 2018 calendar year or your 2018 fiscal year. If you do not have expenses broken down by item, please provide the total expenses for your operation under item Y at the bottom of the table.

SECTION VI - Comments:

22. Please enter any comments that you wish to make.

Please mail in the enclosed postage – paid envelope.

Reported by	Date:						
Phone Number: ()							
	910 001 USE						
5. Respondent Name:	⁹⁹¹¹ Phone: ()	9910 MM DD Date:					
Survey Results: To receive the complete results of this survey of go to www.nass.usda.gov/Surveys/Guide_to_NAS		Ca					
go to www.nass.usda.gov/Surveys/Guide_to_NASS_Surveys/ Would you rather have a brief summary mailed to you at a later date?							

THANK YOU FOR YOUR COOPERATION

Response		Responde	ent	Mode		Enum.	Eval.	R. Unit	Change	Office Use for POID)	
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est 8-Known Zero	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face to- Face) 6-e-mail 7-Fax 19-Other	9903	9998	9900	9921	9985	9989 9907	 Option 9908	 nal Use 9906	9
S/E Name	•						•		•			•	