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| **GRAPE PROCESSING INQUIRY** | | | | |
|  | | | OMB No. 0535-0039  Approval Expires: 8/31/2019  Project Code: 450 QID: 163911  SMetaKey: 3911 | |
|  |  |  | **SURVEY_LOGO_1:USDA_logo_bw.gif** | **United States**  **Department of**  **Agriculture** |
|  |  |  |  | **NATIONAL**  **AGRICULTURAL**  **STATISTICS**  **SERVICE** |

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|  |  |  |  |  |  | **USDA/NASS - New England**  Northeastern Region  4050 Crums Mill Road, #203Harrisburg, PA 17112-2875  Phone: 1-800-498-1518  Fax: 1-855-415-3687  e-mail: NASSRFONER@nass.usda.gov |
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| Please make corrections to name, address, and ZIP Code, if necessary. |

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| To provide information on the quantity and value of grapes processed by state, each processor and winery is being asked to report the tonnage processed from the 2019 grape crop.  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: https://www.nass.usda.gov/confidentiality. 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 0535-0039. The time required to complete this information collection is estimated to average 15 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. |

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| **Quantity** | | **Concords**  Tons | **Niagaras**  Tons | **Other Varieties**  Tons |
| 1. Total quantity of 2019 crop grapes crushed  at your plant or winery. . . . . . . . . . . . . . . . . . . . . . . | |  |  |  |
| 2. Of this quantity of grapes, how many were grown in | |  |  |  |
| Your state: (\_\_\_\_\_\_\_\_\_\_\_\_). . . . . . . . . . . . . . . . . . . . | |  |  |  |
| Other states or countries (specify): | |  |  |  |
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| (OVER) | | | | |

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| **Use** | **Quantity Used**  (Fresh weight) | **Average Prices Per Ton**  (Report equivalent price paid at processing plant door) |
| 3. Quantity of 2019 crop grapes used and  average prices paid (if crushing own grapes,  please estimate average value per ton): | **Tons** | **Dollars Per Ton** |
| a. Juice and Juice concentrate. . . . . . . . . . . . . . . . |  |  |
| b. Wine: |  |  |
| (i) Vinifera Varieties. . . . . . . . . . . . . . . . . . . . . |  |  |
| (ii) Hybrid Varieties. . . . . . . . . . . . . . . . . . . . . . |  |  |
| (iii) Other Varieties. . . . . . . . . . . . . . . . . . . . . . . |  |  |
| c. Preserve Stock. . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |
| d. Other Uses. . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |
| e. Culls dumped. . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |

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| 4. Did your operation process any fruit other than grapes?. . . . . . . . . . | | | 1 Yes |  | 3 No |  |
| If yes, what other fruit did your operation process?. . . . . . . . . . . . | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **COMMENT - Please comment on 2019 crop:** | | | | | | |
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| **Survey Results:** The report will be available at the following website: [www.nass.usda.gov/nh](http://www.nass.usda.gov/nh) | | | | | | |
| **Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |

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| **Respondent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | 9911 | | | | 9910 MM DD YY | | | | |
| **Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | **Date: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_** | | | | |
| **This completes the survey. Thank you for your help.** | | | | | | | | | | | | | | |
| **Response** | | **Respondent** | | **Mode** | | **Enum.** | | **Eval.** | **Change** | **Office Use for POID** | | | | |
| 1-Comp  2-R  3-Inac  4-Office Hold  5-R – Est  6-Inac – Est  7-Off Hold – Est | 9901 | 1-Op/Mgr  2-Sp  3-Acct/Bkpr  4-Partner  9-Oth | 9902 | 1-Mail  2-Tel  3-Face-to-Face  4-CATI  5-Web  6-e-mail  7-Fax  8-CAPI  19-Other | 9903 | 9998 | | 9900 | 9985 | 9989  \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ | | | | |
| **Optional Use** | | | | |
| 9907 | 9908 | | 9906 | 9916 |
| S/E Name | | | | | |  |  | | |  | |  | | |