Revised May 26, 2021

Survey of Fishing-Related Businesses Impacts of and Recovery from [name of catastrophic event]

OMB Control No. 0648-0767 Expiration Date: XX/XX/20XX

Office of Science & Technology NOAA Fisheries Silver Spring, MD

ASSESSMENT OF THE SOCIAL AND ECONOMIC IMPACTS OF [name of catastrophic event (NCE)] ON FISHING-RELATED BUSINESSES IN [name of states(s) or territories]

We want to learn how [name of catastrophic event (NCE) affected your fishing related business in the period {immediately, one quarter, six months, or one year] following that catastrophic event. Fishing related businesses include all businesses that provide goods and services to fishing vessels or purchase the fish and seafood they harvest. Your participation in this survey is voluntary and your responses are CONFIDENTIAL. Because you and other owners or managers of fishing related businesses are the only ones that can provide this information, we encourage you to participate in this survey.

Questions about the survey? Phone: XXX-XXX-XXXX/Fax XXX-XXXX /Email XXX.XXXX@noaa.gov.

INTRODUCTION: FISHING-RELATED BUSINESSES SURVEY

Hello, my name is <interviewer_name>. I am calling to collect information that will help NOAA Fisheries understand the impacts of [name of the catastrophic event (NCE)] on fishing related businesses in [name of state(s) and/or territories].

In particular, I am calling about the business: <Business Name>

- 1. Are you the owner of this business or an employee who is familiar with its status and operation and can answer on behalf of the owner?
 - 1. Yes, I am the owner
 - 2. Yes, I am an employee who can answer on behalf of the owner
 - 3. No
 - 4. Don't know
 - 5. Prefer not to answer

2.	If not, do you know the name and number of person to contact instead?		
	2. 3.	Yes (Please specify) No Don't Know Prefer not to answer	
3.	Is []	phone number] the best number to use to contact this business?	
	2. 3.	Yes No Don't Know Prefer not to answer	
4.	Wh	at is a good email address for this business?	
	2.3.	(Specify) We don't have one Don't Know Prefer not to answer	
5.	Is tl	nere a fishing-related business at this location?	
	2 3	Yes (Please specify): No Don't Know Prefer not to answer	
-			

I would like to ask you a few questions regarding the impacts of [NCE] on your fishing related business, where a fishing related businesses include all businesses that provide goods and services to fishing vessels or purchase the fish and seafood they harvest. We are talking to the owners and managers of business it affected, as well as those it did not affect. If your fishing related business was affected, this survey should only take about [20 or 30] minutes. It will take less time if your fishing related business was not affected.

One of the following statements will be included here and the highlighted header will be removed.

Statement for an immediate evaluation of a regional disaster

Your participation in this study is voluntary but very important. NOAA Fisheries will use the data collected with this survey to assess damages from [NCE] to fishing related businesses, determine insurance coverage for those who sustained damages and better understand the changes in revenue, operating costs and employment due to [NCE]. NOAA Fisheries will use that information to draft reports in support of the Secretary of Commerce's fisheries disaster

declarations for areas impacted by [NCE]. The Department of Commerce and NOAA will use those reports in their deliberations regarding the disbursement of the fishery disaster relief assistance proved by Congress. If you agree to participate now, it is okay to change your mind later. You don't have to answer any question you don't want to and all of your answers will remain confidential. (This call may be monitored for quality control purposes.)

Statement for a follow-up evaluation of a regional disaster

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- 6. Are you willing to help us understand the impacts of [NCE]?
 - 1 Yes
 - 2 No

7. Would you prefer to complete the survey during this call, during a later call at a more convenient time for you, by mail, online, or in-person?
 During this call During a later call (get their preferred telephone number, date and time for the call)
 Online (provide information needed to submit information online) By mail (check to see we have the best mailing address) In-person (agree to a date, time and place)
If you have questions or technical issues about the survey itself, you may contact [name] at xxxx@xxx.xxx or 555-555-5555 ext. 555.
If you have any questions about the study as a whole, please email the appropriate NOAA representative in your region: [Name of Region 1]–[Name] at [xxxx.xxxx@noaa.gov] [Name of Region 2]–[Name] at [xxxx.xxxx@noaa.gov] [Name of Region 3]–[Name] at [xxxx.xxxx@noaa.gov] [Name of Region 4]–[Name] at [xxxx.xxxx@noaa.gov] [Name of Region 5]–[Name] at [xxxx.xxxx@noaa.gov] [Name of Region 6]–[Name] at [xxxx.xxxx@noaa.gov]
BACKGROUND INFORMATION:
8. What is your position in the business?
8. What is your position in the business?1. (Specify)
8. What is your position in the business? 1. (Specify) 2. Prefer not to answer
8. What is your position in the business? 1. (Specify) 2. Prefer not to answer 9. How many years have you been involved in this business? 1 years
 8. What is your position in the business? 1. (Specify) 2. Prefer not to answer 9. How many years have you been involved in this business? 1 years 2. Prefer not to answer
 What is your position in the business? (Specify) Prefer not to answer How many years have you been involved in this business? years Prefer not to answer How many years of experience do you have with this type of business?

12.	Is this business the primary source of your individual income?	
	1Yes	
	2No	
	3Prefer not to answer	
13.	What other occupations do you have to earn income? (Specify)	
	1	
	2	
	3	
	4. Prefer not to answer	
14.	What is your age?	
	1 years	
	2. Prefer not to answer	
15.	In which city/town do you live/reside in or closest to?	
	1. (Specify)	
	2. Prefer not to answer	
16.	What is its ZIP code?	
	1. (Specify)	
	2. Prefer not to answer	
17.	How long have you lived there?	
	1 years	
	2. Prefer not to answer	
18.	What is your gender?	
	1. Male	
	2. Female	
	3. Other	
	4. Prefer not to answer	
19.	Are you of Hispanic, Latino, or of Spanish Origin? (CHECK ALL THAT A	APPLY)
	1. No	
	2. Yes, Mexican, Mexican American, Chicano	
	3. Yes, Cuban	
	4. Yes, Puerto Rican	

	6.	Prefer not to answer
20.	Which	n racial category describes you? (CHECK ALL THAT
	1.	White
	2.	Black or African American
	3.	American Indian or Alaska Native
	4.	Asian
	5.	Native Hawaiian or Other Pacific Islander
	6.	[Region specific racial category 1]
	7.	[Region specific racial category 2]
	8.	[Region specific racial category 3]
	9.	[Region specific racial category 4]
	10.	Some other race (please specify):
		- · · · · · · · · · · · · · · · · · · ·

5. Yes, another Hispanic, Latino, or Spanish Origin, please

APPLY)

- 21. What is the highest level of education you have completed?
 - 1. Less than 9th grade

11. Prefer not to answer

specify:____

- 2. Some high school (no diploma))
- 3. High school graduate (including GED)
- 4. Some college (no degree)
- 5. Associates degree or technical school
- 6. College graduate (bachelor degree)
- 7. Advanced or professional degree
- 8. Prefer not to answer

- 22. What was your total household income, before taxes, in 202[X], including fishing income?

 1. Less than \$10,000
 2. \$10,000 to \$24,999
 3. \$25,000 to \$49,999
 4. \$50,000 to \$99,999
 5. \$100,000 to \$249,999
 - 6. \$250,000 or more
 - 7. Don't know
 - 8. Prefer not to answer

BUSINESS OPERATING CHARACTERISTICS AND IMPACTS

- 23. What is the <u>primary</u> service this business provides? (SELECT ONLY ONE)
 - 1. Fish/Seafood Processor
 - 1. Fish/Seafood Dealer/First Receiver/Wholesaler
 - 2. Both processor and dealer
 - 3. Seafood retailer/restaurant
 - 4. Bait and Tackle Sales
 - 5. Boat Repair/Marine Supply/Other Associated Businesses
 - 6. Aquaculture Facility
 - 7. Marina
 - 8. Other: (Specify)
 - 9. Don't know
 - 10. Prefer not to answer
- 24. I am going to read a list of fishing-related business services to you. If your business provides this service, please say "yes." If not, please reply "no."
 - 1. Fish/Seafood Processor Y/N
 - 2. Fish/Seafood Dealer Y/N
 - 3. Bait and Tackle Sales Y/N
 - 4. Marina Y/N
 - 5. Marine Supplies Y/N
 - 6. Boat Repair Y/N
 - 7. Boat Fuel Y/N
 - 8. Ice Y/N
 - 9. Aquaculture facility Y/N
 - 10. Are there any other services you provide that I have not mentioned? Y/N (If yes, specify)
 - 11. Don't Know

12. Prefer not to answer

25. Where do you market your product? (CHECK ALL THAT APPLY)
 Within one state/territory (Specify) Nationally Internationally Prefer not to answer
26. Was your business or facility <business_name> affected and/or damaged by [NCE]?</business_name>
 Yes, affected Yes, damaged Both No (IF NO, SKIP TO QUESTION 69) Prefer not to answer
I will be asking you about four types of damages to your business: Pier or Dock Damage, Buildings and Other Infrastructure Damage, Seafood and Bait Product Losses, and Equipment and Other Merchandise Losses.
27. Which category best describes your Pier and/or Dock Damages due to [NCE]?
 I don't have a Pier and/or Dock (IF YOU DON'T HAVE ANY, SKIP TO QUESTION 31) None (IF NONE, SKIP TO QUESTION 30) Minor Major Total loss Prefer not to answer
28. Please provide an estimate of the Pier and/or Dock Damages . You can base this estimate on an appraisal or your best estimate of the cost to repair the damage.
 \$ Don't Know Prefer not to answer
29. What part of the Pier and/or Dock damage was covered by insurance (i.e., the amount paid or expected to be paid by insurance)?
 \$ and% of damage Don't know Prefer not to answer
30. Please provide a rough estimate of the market value of the Pier and/or Dock before [NCE]:
1. \$

- 2. Don't Know
- 3. Prefer not to answer

31. Which [NCE]?	n category best describes your Buildings and Other Infrastructure Damages due to
	I don't have Buildings and/or Other Infrastructure (IF YOU DON'T HAVE ANY, SKIP TO QUESTION 35) None (IF NONE, SKIP TO QUESTION 34)
3.	Minor
	Major Total loss
	Prefer not to answer
	e provide an estimate of the Buildings and Other Infrastructure damages. You can stimate on an appraisal or your best estimate of the cost to repair the damage.
	\$)
	Don't Know Prefer not to answer
٥.	Prefer not to duswer
	part of the Buildings and Other Infrastructure damage was covered by insurance mount paid or expected to be paid by insurance)?
	\$ and% of damage
	Don't Know
3.	Prefer not to answer
	e provide a rough estimate of the market value of the Buildings and Other cture before [NCE]:
1.	\$
	Don't Know
3.	Prefer not to answer
35. Which	a category best describes your Seafood and Bait Products Damages due to [NCE]?
1.	I don't have Seafood and Bait Products (IF YOU DON'T HAVE ANY, SKIP TO QUESTION 39)
	None (IF NONE, SKIP TO QUESTION 38)
	Minor
	Major Total loss
	Prefer not to answer
estimate o	e provide an estimate of the Seafood and Bait Products damages. You can base this in an appraisal or your best estimate of the cost to repair the damage.
1.	\$

- 2. Don't Know
- 3. Prefer not to answer

37. What part of the Seafood and Bait Products damage was covered by insurance (i.e., the amount paid or expected to be paid by insurance)?
 \$ and% of damage Don't Know Prefer not to answer
38. Please provide a rough estimate of the market value of the Seafood and Bait Products before [NCE]:
 \$ Don't Know Prefer not to answer
39. Which category best describes your Equipment and Other Merchandise Damages due to [NCE]?
 I don't have Equipment and Other Merchandise (IF YOU DON'T HAVE ANY, SKIP TO QUESTION 43) None (IF NONE, SKIP TO QUESTION 42) Minor Major Total loss Prefer not to answer
40. Please provide an estimate of the Equipment and Other Merchandise damages. You can base this estimate on an appraisal or your best estimate of the cost to repair the damage.
 \$ Don't Know Prefer not to answer
41. What part of the Equipment and Other Merchandise damage was covered by insurance (i.e., the amount paid or expected to be paid by insurance)?
 \$ and% of damage Don't Know Prefer not to answer
42. Please provide a rough estimate of the market value of the Equipment and Other Merchandise before [NCE]:
 \$ Don't Know Prefer not to answer

43. Please specify the type(s) of damages due to [NCE] that were not addressed above and indicate the amount of the damages and the amount of damages covered by insurance
 None Damages \$ and damages covered by insurance \$ Damages \$ and damages covered by insurance \$ Don't Know Prefer not to answer
44. What percent of the physical damages to this business has been repaired since [NCE]?
 No damages % (ENTER 0 IF NONE OF THE PHYSICAL DAMAGE HAS BEEN REPAIRED) Don't Know Prefer not to answer
45. If you are a seafood dealer or processor, how were your normal business operations affected compared to this same time period last year [Month -Month 202X], even if only temporarily by [NCE]? (CHECK ALL THAT APPLY)
 Reduced imports Reduced opportunity to export Reduced sales to restaurants/retail/grocery stores Lack of local product Reduced operations/business hours Other (please describe):
7. Prefer not to answer
46. How long was this business closed due to [NCE] (SELECT ONE OPTION)?
 It wasn't closed Answered in days Answered in weeks Answered in months Still closed Don't Know Prefer not to answer
47. If this business was closed due to [NCE], how long did it take to return to a normal level of operations?
 It has not returned to a normal level of operations Answered in days

4. Answered in months
5. Don't know
6. Prefer not to answer
48. If the business has not returned to a normal level of operations since [NCE], on a scale of 0% to 100%, at what level is this business operating now in comparison to [months x-y] of last year [202X]?
 Enter percent (ENTER 0 IF IT IS STILL CLOSED) Don't know Prefer not to answer
49. If you have not reopened your business since [NCE], how long do you think it will be until you will be able to reopen your business?
1weeks OR months
2. Never
3. Don't know
4. Prefer not to answer
50. How did your revenue in the [X] month(s) following [NCE] compare to the same period in the previous year?
1. Decreased by% and \$
2. Increased by% and \$
3. No difference
4. Don't Know
5. Prefer not to answer
51. Please tell me which of the following describe the reasons why your revenue was affected. (CHECK ALL THAT APPLY)
1. Business was or is down
2. Loss of major sources of demand (e.g. foreign export market, restaurants, institutiona
buyers)
3. Closed earlier for the season
4. No fish or seafood
5. Physical damages
6. Change in number of customers
7. Change in ability to get/retain employees
8. Anything others? (Specify)
9. Don't know
10. Prefer not to answer

3. Answered in weeks_____

52. How did your operating costs in the X month(s) following [NCE] compare to the same months in the previous year?
 Decreased by% and \$ Increased by% and \$ No difference Don't know Prefer not to answer

53. Please tell me which of the following describe the reasons why your operating costs were affected. (CHECK ALL THAT APPLY)"
 Labor costs increased Labor costs decreased Costs of other inputs increased Costs of other inputs decreased Other (please specify) Other (please specify) Don't know Prefer not to answer
54. Choose the <u>three</u> [NCE] factors that have had the largest impact on your fishing related business. (SELECT ONLY THRTEE)
 Physical damages No markets, weak markets or reduced demand Restrictions by state and local governments Implementing health safety measures Low prices for seafood Change in ability to get/retain employee Other (please describe) Don't Know Prefer not to answer
55. How would you describe the current availability of cash on hand for this business, including any money in the bank and financial assistance or loans? Currently, cash on hand will cover: (SELECT ONLY ONE)
 1-7 days of business operations 1-2 weeks of business operations 3-4 weeks of business operations 1-2 months of business operations 3 or more months of business operations No cash available for business operations Don't know Prefer not to answer
56. Since [name month], 202[X], has this business missed any scheduled payments due to [NCE]? (Examples of scheduled payments include loans, rent, utilities, and payroll. Scheduled payments that have been forgiven or postponed should not be considered to be missed.)
1. Yes

2. No

3. Don't know

4. Prefer not to answer

57. After [NCE], were there any other catastrophic events or economic factors that affected your business activities, revenues and costs in either a positive or a negative way?
1 Yes
2 No3 Prefer not to answer
5 Prefer flot to allswer
58. If yes, please describe the specific other events or economic factors and their effects on your fishing related business activities, revenues and costs
1
2.
3.
59. How many employees does your business currently have on site? (Include full-time and part-time employees but not yourself)
1. Number of employees
2. Don't know
3. Prefer not to answer
60. How has the number of full-time/part-time on-site employees changed because of [NCE]?
1. Decreased by
2. Increased by
3. No change
4. Don't know
5. Prefer not to answer
61. What is the primary reason that the number of employees changed due to [NCE]?
62. Which of the following have you done due to [NCE], even if only temporarily? (CHECK ALL THAT APPLY)
 Found new markets/buyers/clients. Yes, temporarily for weeks. Yes, permanently, No
2. Found new sources of goods and services. Yes, temporarily for weeks. Yes,
permanently, No 3. Reduced number of hours open per week. Yes, temporarily for weeks. Yes,
permanently, No
 Had difficulty obtaining supplies. Yes, temporarily for weeks. Yes, permanently, No
5. Relocated my business. Yes, temporarily for weeks. Yes, permanently, No
6. Other (please describe) Yes, temporarily for weeks. Yes,
permanently

7. Prefer not to answer

	nere any other ways you have changed or adapted your business practices since 202X due to [NCE] that we haven't covered?				
1.	Yes (Please describe)				
	No Prefer not to answer				
64. Woul	d you say that [<i>NCE</i>] had any positive impacts on your business?				
2. 3.	Yes No Don't know Prefer not to answer				
65. If yes	, what positive impacts?				
_					
INDIVIDUAL RECOVERY, LESSONS LEARNED AND PERSONAL WELL-BEING					
	INDIVIDUAL RECOVERY, LESSONS LEARNED AND PERSONAL WELL-BEING				
66. What	INDIVIDUAL RECOVERY, LESSONS LEARNED AND PERSONAL WELL-BEING resources did you use to recover after [NCE]? (CHECK ALL THAT APPLY)				
1. 2. 3. 4. 5. 6. 7. 8. 9.					

- 4. Industry associations

- 5. Government assistance
 6. Personal savings
 7. Other (please describe)
 8. Prefer not to answer

68. Which has been the most helpful in coping with the effects of [NCE]? (SELECT ONLY ONE)
 Family, friends Church, community groups, etc. Your employees Industry associations Government assistance Personal savings Other (please describe) Prefer not to answer
69. What, if any, different measures will you take in the future to prepare for disasters such as [NCE]?
1. None 2. (Specify) 3. Don't know 4. Prefer not to answer
70. Is there anything that NOAA Fisheries could do to help you to prepare for and recover from future natural disasters such as [NCE]? (
 Yes (Specify) No Don't know Prefer not to answer

71. Now I'm going to read a list of statements. For each statement, I'd like you to tell me whether you strongly disagree, disagree, are neutral, agree, or strongly agree with it.

		our opinion – (CHECK ONE BOX FOR EATEMENT)			АСН
Statements	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I have other options available if I decide to no longer be in my current occupation.	1	2	3	4	5
2. I am confident that I could get work elsewhere if I needed to.	1	2	3	4	5
3. I would be nervous trying something outside of my current occupation.	1	2	3	4	5
4. I have planned for my financial security.	1	2	3	4	5
5. Every time there is a change, I plan a way to make it work for myself.	1	2	3	4	5
6. I am more likely to adapt to change compared to others in this business.	1	2	3	4	5
7. I do not think I am competitive enough to continue in this business much longer.	1	2	3	4	5
8. I am confident things will turn out well for me.	1	2	3	4	5
9. If there are any more natural disasters on the scale of [<i>NCE</i>], I will not be able to continue in this business much longer.	1	2	3	4	5
10. I can cope with impacts to my business due to natural disasters such as [<i>NCE</i>].	1	2	3	4	5
11. I am interested in learning new skills outside my current occupation.	1	2	3	4	5

STATE AND TERRITORY SPECIFIC IMPACTS AND ADDITIONAL COMMENTS

72. In your opinion, what impact has [NCE] had on the following in [name state or territory]?

	Total impacts					
	Extremel y negative	Negative	None	Positive	Extremel y positive	I don't know
Fisheries production/ capture						
Fisheries marketing/ sales						
Ability to find employment outside of fisheries						
Overall economy Tourism						
Food for coastal communities						
Recreational opportunities						
Local culture						

73. Do you have any additional comments you would like to share?				

We appreciate the confidential nature of the data being collected by this survey. NOAA Fisheries will handle individual survey data as confidential business information and a form of protected personal information and will maintain the confidentiality of the information consistent with legal authorities available to it, including but not limited to the Privacy Act (5 U.S.C. Section 552a) and the Trade Secrets Act (18 U.S.C. Section 1905). NOAA Fisheries will protect individual survey data from public disclosure to the extent permitted by law and it has instituted procedures to provide that protection.

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Paperwork Reduction Act Statement for an immediate evaluation of a regional disaster

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A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0767 and its expiration data is August 31, 2024. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NOAA Fisheries at: [mailing address], Attn: [name] or [email address].

Paperwork Reduction Act Statement for a follow-up evaluation of a regional disaster

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Paperwork Reduction Act Statement. NOAA's National Marine Fisheries Service (NOAA Fisheries) is collecting this information to assess the impacts of [NCE] on fishing related businesses (e.g., seafood dealers, processors and bait and tackle shops), better understand the changes in revenue, operating costs and employment due to [NCE], assess recovery rates and barriers to recovery by type of business and geographic area, determine resilience factors that facilitated or impeded recovery, and inform agency leadership, state agencies, Congress, and constituents about the long-term effects of disasters. In addition, NOAA Fisheries will use the

information to improve its ability to conduct the analyses required by the Magnuson-Stevens Fishery Conservation and Management Act (MSA) and other applicable law. This will allow for a better-informed, science-based fishery management decisions making process

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0767 and its expiration data is XX/XX/20XX. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 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 information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NOAA Fisheries at: [mailing address], Attn: [name] or [email address].