# Urban Survey Telephone Guide

OMB # 0596-0078

Expiration date: to be updated

INTERVIEWER INTRODUCTION

Interviewer text:

Hello, this is <NAME> calling on behalf of the <STATE> Field Office of USDA's National Agricultural Statistics Service. We are conducting the National Property Owner Tree Survey for the U.S. Forest Service and you were selected to participate. Several weeks ago you were mailed a copy of this survey. We have not received it and were hoping to collect the data by telephone today. Your cooperation is extremely important to the accuracy of the survey and your individual report will be kept confidential (under Title 7 of the U.S. Code and CIPSEA (Public Law 107-347)). Response is voluntary.

Paperwork Reduction Act Notice

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 0596-0078. Without this approval, we could not conduct this survey. Public reporting for this information collection is estimated to be approximately 10 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 U.S.D.A. Forest Service email address SM.FS.InfoCollect@usda.gov and include the OMB Control Number in the subject line.

**The rest of the interview time is allotted to going through the survey and recording property owner’s answers. These interview questions will a subset of the National Property Owner Tree Survey (below), with the interviewer reading the questions and the property owner responding. Interviews will not go beyond the allotted time (25 minutes).**

1. 1. Is your property residential?

* Yes
* No

*If this is a residential property, go to question 2.*

*If this property is industrial, commercial, a vacant lot, municipally or publicly owned, or other non-residential uses, no additional responses are needed. Please return this survey in the postage paid envelope provided.*

General Questions About Your Property

2. What type of residential structure is on your property?

* Single family home, detached
* Duplex/townhouse/row home
* Apartment building
* Other (please specify):\_\_\_\_\_\_\_\_\_\_\_
1. Which category best describes who owns your property?

Which category below best describes your ownership?

Select only one.

* + Individual
	+ Joint, with husband or wife
	+ Joint, such as with other family members or friends
	+ Family partnership or family LLC or LLP
	+ Family trust or estate
	+ Corporation or business (for-profit)
	+ Corporation or business (non-profit)
	+ Other (please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. Do you or your company rent your property to others?
* Yes
* No
1. How many total properties do you or your company own, including this one? \_\_\_\_\_\_properties
2. Do you reside on your property?
* Yes
* No
1. In what year did you or your company acquire your property?

\_\_\_\_\_\_year

Property Features

1. How many, if any, trees are on your property?
* 0
* 1-5
* 6-10
* More than 10
* I don’t know
1. Which, if any, natural features does your property have?

*Select yes, no or don’t know for each item*

 Yes No/Don’t know

£ £ Backyard

£ £ Front yard

£ £ Side yard(s)

£ £ Trees and/or shrubs that were planted

£ £ Trees and/or shrubs that grew naturally

£ £ Vegetable/fruit garden

£ £ Flower garden

£ £ Stream, pond or other natural water feature on or abutting property

1. Which, if any, built features, does your property have?

*Select yes or no for each item*

 Yes No

£ £ Recreational feature, such as tennis or basketball court

£ £ Water feature, such as a pool or pond

£ £ Driveway

£ £ Patio, porch, or deck

£ £ Shed or other storage building

Activities

1. Which, if any, of the following have occurred on your property in the **past 5 years**?

*Select yes, no/don’t know for each item*

 Yes No/Don’t know

£ £ Eliminated or removed invasive plants

£ £ Installed a rain barrel or rain garden

£ £ Installed a new lawn

£ £ Planted shrubs, flowers, or ornamental grasses

£ £ Planted one or more trees

£ £ Pruned trees or did other tree care

£ £ Removed one or more trees

£ £ Worked with neighbors to minimize tree risks from their property

£ £ Contracted the city/town about trees near the street

£ £ Contacted the utility companies about trees near the wires

£ £ Treated trees for pests/diseases

1. Which of the following, if any, have occurred on your property in the **past year**?

*Select yes, no/don’t know for each item*

 Yes No/Don’t know

£ £ Composting yard and/or food waste

£ £ Gardening

£ £ Mowing the lawn

£ £ Applied fertilizers to lawn

£ £ Applied fertilizers to trees

£ £ Used chemicals to control weeds or insects

£ £ Watering lawn, trees, or other plants

1. Which, if any, of the following social/recreational activities have occurred on your property in the **past year**?

*Select yes, no/don’t know for each item*

 Yes No/Don’t know

£ £ Recreational activities, such as games, sports, or children playing

£ £ Social activities, such as cookouts or parties

£ £ Birding

£ £ Other (please specify):\_\_\_\_\_\_\_\_\_\_\_\_

Programs and Organizations

1. In some communities, there are groups of residents who volunteer their time to help maintain public green spaces (even tho this might not be the main reason for having the group). The volunteer work may involve activities like tree planting, litter removal, habitat restoration, trail construction, stream restoration, or working in a community garden.

a. How familiar are you with groups like these in your property’s city/town?

* Extremely familiar
* Moderately familiar
* Somewhat familiar
* Slightly familiar
* Not at all familiar

b. Have you or your company participated in a group like this in the **past 5 years**?

* Yes
* No
* Don’t know
1. In some areas, there are programs that help property owners cover the expense of planting new trees or caring for existing trees on their property.
	1. How familiar are you with programs like these?
* Extremely familiar
* Moderately familiar
* Somewhat familiar
* Slightly familiar
* Not at all familiar
	1. In the past 5 years, have you or your company used a program like this to help plant new trees or maintain existing trees on your property?
* Yes
* No
* Don’t know

Sources of Information and Assistance

1. How familiar are you or your company with the services provided by the following professionals?

*Select one box for each item.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Extremely familiar | Moderately familiar | Somewhat familiar | Slightly familiar | Not at all familiar |
| Government tree care professionals |  |  |  |  |  |
| Private tree care professionals |  |  |  |  |  |
| Landscape designers or contractors |  |  |  |  |  |
| Extension agents/educators |  |  |  |  |  |
| Master gardeners |  |  |  |  |  |

1. Who, if anyone, do you trust for providing you or your company with information about caring for or planting trees on your property?

*Select yes or no for each item*

 Yes No

£ £ Tenant(s)

£ £ Neighbor(s)

£ £ Family member(s) or friend(s)

£ £ Extension agent or educator

£ £ Other state employee

£ £ Local government employee

£ £ A non-profit organization

£ £ Employee at lawn and garden center

£ £ Landscaping or tree care professional(s)

£ £ Other (please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_

£ £ No one

1. a. In the past 5 years, have you or your company talked with anyone or received information/advice about how to maintain your property’s landscape?
* Yes
* No

*If yes, please answer b, c, and d*

*If no, skip to question 19*

b. What was it about?

*Select yes or no for each item*

 Yes No

£ £ Trees

£ £ Vegetable/fruit gardening

£ £ Lawn care

£ £ Storm water/runoff management

£ £ Ornamental flowers and shrubs

£ £ Weed, pest, or disease control

£ £ Other (please specify):\_\_\_\_\_\_\_\_\_

c. How did it happen? *Select yes or no for each item*

 Yes No

£ £ Talked to someone in person

£ £ Talked to someone on the phone

£ £ Received a brochure or other written material

£ £ Attended a workshop in person

£ £ Attended a workshop - virtually

£ £ Went to a library

£ £ Read product labels

£ £ Went to a lawn and garden center

£ £ From the Internet or social media

£ £ Other (please specify):\_\_\_\_\_\_\_\_\_\_\_\_

d. Who was involved? *Select yes or no for each item*

 Yes No

£ £ Tenant(s)

£ £ A neighbor

£ £ A family member or friend

£ £ Extension agent or educator

£ £ Other state government employee

£ £ Local government employee

£ £ A non-profit organization

£ £ Employee at a lawn and garden center

£ £ Landscaping or tree care professional(s)

£ £ No one. I found the information myself

£ £ Other (please specify):\_\_\_\_\_\_\_\_\_\_\_

1. How would you or your company prefer to get information or advice about the care of the trees/shrubs/grass on your property? *Select yes or no for each item*

 Yes No

£ £ Talk to someone in person

£ £ Talk to someone on the phone

£ £ Written materials, such as brochures or other publications

£ £ Read product labels

£ £ From the Internet or social media

£ £ From a lawn and garden center

£ £ Attend a workshop – in person

£ £ Attend a workshop – virtual

£ £ Go to a library

£ £ Other (please specify):\_\_\_\_\_\_\_\_

£ £ I don’t want/need information or advice

Concerns

1. How concerned are you or your company about each of the following on your property? Select one box for each item.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Great concern | Concern | Moderate concern | Of little concern | No concern | Not Applicable |
| Tree roots interfering with building foundations, pipes, or septic systems |  |  |  |  |  |  |
| Live trees or branches breaking and causing damage or injury  |  |  |  |  |  |  |
| Dead trees or branches breaking and causing damage or injury |  |  |  |  |  |  |
| Trees or branches breaking and causing a power outage |  |  |  |  |  |  |
| Trees blocking solar panels installed on the property |  |  |  |  |  |  |
| Damage from storms |  |  |  |  |  |  |
| Climate change |  |  |  |  |  |  |
| Trees blocking scenic views |  |  |  |  |  |  |
| Trees attracting pests (e.g. animals, insects) |  |  |  |  |  |  |
| Trees creating a fire hazard |  |  |  |  |  |  |
| Trees irritating allergies |  |  |  |  |  |  |
| Trees requiring a lot of water |  |  |  |  |  |  |
| The expense of tree care |  |  |  |  |  |  |

Trees

20. Who performs the tree work on your property, if any tree work is being done?

*Select yes or no for each item*

 Yes No

£ £ Me

£ £ My husband or wife

£ £ My children

£ £ My parents

£ £ Tenant(s)

£ £ Another family member

£ £ A neighbor

£ £ Landscaping professional(s)

£ £ Tree care professional(s)

£ £ Home Owner’s Association or Co-op

£ £ Other (please specify):\_\_\_\_\_\_\_\_\_\_\_

1. Is the wood from your property used?
* Yes
* No
* Don’t know
1. How important, or not important, is it to you or your company that trees removed from **your propert**y are used as urban wood products at some point?
* Very important
* Important
* Moderately important
* Of little importance
* Not important
* Not applicable
1. Please indicate your or your company’s level of agreement or disagreement with the following statements about the trees on your property. *Select one box for each item.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly agree | Agree | Neither agree nor disagree | Disagree | Strongly disagree | Not applicable |
| The trees on the property are healthy and attractive |  |  |  |  |  |  |
| Trees interfere with the enjoyment of the property |  |  |  |  |  |  |
| Trees create more work for me |  |  |  |  |  |  |
| I/we have the knowledge to properly care for the trees and shrubs on the property |  |  |  |  |  |  |
| Felled branches, leaves, and seeds from trees make the property look messy |  |  |  |  |  |  |
| I/we have the physical ability to property plant and care for the trees on the property |  |  |  |  |  |  |
| Trees provide privacy |  |  |  |  |  |  |
| Trees provide energy savings for the home |  |  |  |  |  |  |
| Trees improve the look of your property |  |  |  |  |  |  |
| Trees provide shade and cooling |  |  |  |  |  |  |
| Trees reduce the noise from the road |  |  |  |  |  |  |
| I/we know who to ask for help on how to properly plant and care for trees on the property |  |  |  |  |  |  |
| Trees reduce my stress level |  |  |  |  |  |  |
| Trees leave a legacy for future generations |  |  |  |  |  |  |

1. Please indicate your or your company’s level of agreement or disagreement with the following statements about your property. *Select one box for each item.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly agree | Agree | Neither agree nor disagree | Disagree | Strongly disagree |
| Good landscaping increases property value |  |  |  |  |  |
| Animals are a problem for the trees, lawn, and/or garden |  |  |  |  |  |
| I/we enjoy seeing wildlife  |  |  |  |  |  |
| I/we care about what neighbors think of the appearance of the yard |  |  |  |  |  |

1. Please indicate your or your company’s level of agreement or disagreement with the following statements about the trees in your community. Select one box for each item.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly agree | Agree | Neither agree nor disagree | Disagree | Strongly disagree |
| The community should invest more in tree plantings and tree care |  |  |  |  |  |
| Having trees in a neighborhood makes it a better place to live |  |  |  |  |  |
| Having diverse trees in the neighborhood is important |  |  |  |  |  |
| The health and condition of trees in the neighborhood should be considered when new buildings are constructed or street improvements are made |  |  |  |  |  |

General Questions About You

1. What is your age?

 \_\_\_\_\_\_\_Years

1. What is your gender?
* Male
* Female
1. What is the highest degree or level of school you have completed?
* Less than 12th grade
* High school/GED
* Some college
* Associate degree
* Bachelor's degree
* Advanced degree
1. Are you of Hispanic or Latino origin?
* Yes
* No
1. What is your race?

*Select one or more.*

* American Indian or Alaska Native
* Asian
* Black or African-American
* Native Hawaiian or Other Pacific Islander
* White
1. . What is your household’s annual income?
* Less than $25,000
* $25,000 - $49,999
* $50,000 - $99,999
* $100,000 - $199,999
* $200,000 or more