

# HAWAII ANNUAL SEED CROP SURVEY - 2022

OMB No. 0535-0002  
 Approval Expires: xx/xx/20xx  
 Project Code: 401 QID: 153685  
 SMetaKey: 3685



**USDA/NASS - Hawaii**  
 Prince Kuhio Federal Building  
 300 Ala Moana Blvd, Ste 7-118, Unit  
 50026  
 Honolulu, HI 96850-9988  
 Phone: 1-800-804-9514  
 FAX: 1-844-332-7146  
 Email:

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

We are asking for your cooperation in providing information about your seed operation. Your response will enable our agency to publish a statewide summary of seed crop statistics. 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 and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. 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 number is 0535-0002. 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.

**INSTRUCTIONS:** If seed crops are being grown on more than one island, please complete a separate questionnaire for each island. If you have any questions about this questionnaire or survey, please call our office at 1-808-522-8080 or toll free at 1-800-804-9514.

**Please complete and return this questionnaire by Friday, March 30<sup>th</sup>.**

Please select the location of your field:

- Hawaii     
  Maui     
  Molokai     
  Oahu     
  Kauai

**SECTION 1 ACREAGE**

Please supply acreage information for all seed crops that your operation grew during the 2020 - 2021 season and the current 2021 - 2022 season. Write in the names of crops other than seed corn. If exact figures are not available, please provide your best estimate.

	2020 – 2021 Season			2021 – 2022 Season		
	Seed Corn	Other seed crops:		Seed Corn	Other seed crops:	
		specify	specify		specify	specify
1. Acres harvested						
a. Nursery. . . . .	.	.	.	.	.	.
b. Seed Increase. . . . .	.	.	.	.	.	.
2. Acres used for grow-out or observation. . . . .	.	.	.	.	.	.

(OVER)

**SECTION 2 SEED SHIPMENTS**

Please make your best estimate if you are unsure of the exact amount. **Please report in pounds.**

	2020 – 2021 Season	2021 – 2022 Season
3. Out-shipments of seed:	(pounds)	(pounds)
a. Seed corn. . . . .		
b. Other seed crops:		
specify _____		
specify _____		
4. Total out-shipments. . . . .		

**SECTION 3 TOTAL VALUE**

Please provide value estimates for each type of seed crop grown. If there were no sales of products or services, please supply us with an estimate of the gross budget for your Hawaii operation (question 2). **Please report in dollars.**

	2020 – 2021 Season			2021 – 2022 Season		
	Seed corn	Other seed crops: _____		Seed corn	Other seed crops: _____	
		specify	specify		specify	specify
5. Total value by type of seed growing purpose:	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)
a. Nursery. . . . .						
b. Seed increase. . . . .						
c. Grow-out or observation. . . . .						
		(\$)			(\$)	
6. Total gross budget for your operation. . . . .						

**SECTION 4 COMMENTS**

Please provide any comments concerning weather conditions, pest problems, market trends, etc. that affected your operation during the past year.

Respondent Name: _____	9911 Phone: _____	9910    MM    DD    YY Date:    ___    ___    ___
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**This completes the survey. Thank you for your help.**

Office Use Only													
Response	Respondent	Mode	Enum.	Eval.	R. Unit	Change	Office Use for POID						
1-Comp	9901	1-Op/Mgr	9902	1-Mail	9903	9998	9900	9921	9985	9989			
2-R		2-Sp		2-Tel						- - - - -			
3-Inac		3-Acct/Bkpr		3-Face-to-Face						- - - - -			
4-Office Hold		4-Partner		4-CATI						- - - - -			
5-R – Est		9-Oth		5-Web						- - - - -			
6-Inac – Est				6-e-mail						- - - - -			
7-Off Hold – Est				7-Fax						- - - - -			
				8-CAPI						9907	9908	9906	9916
				19-Other									
S/E Name _____													

