

PECAN INQUIRY - October 2023

OMB No. 0535-0039
 Approval Expires: XX/XX/20XX
 Project Code: 142
 SurveyID: 2407
 Version 1: AZ, GA, NM



USDA/NASS
 National Operations Division
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Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response 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 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 5 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.

REPORT FOR THE ACRES YOU OPERATE OR MANAGE (EXCLUDE abandoned acres.)

1. Did this operation have any pecan acreage in 2023?

900

Yes - Continue No - Go to Item 6

		Total Crop
2. How many total acres of pecan trees were maintained in 2023?	Acres	341 _____
3. How many bearing age acres of pecan trees were maintained in 2023?	Acres	340 _____
		Total Crop
4. How many total pounds of the 2023 pecan crop were or will be harvested?	Pounds	101 _____

Continue on back

5. Comments related to the information you reported:

6. Contact Information:

Operator Email:

Operator Phone:

9929	Check to receive results by email <input type="checkbox"/>	9918 (____) _____	check if cell phone <input type="checkbox"/>
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Operation Email: (if different from above)

Operation Phone: (if different from above)

9937	Check to receive results by email <input type="checkbox"/>	9936 (____) _____	check if cell phone <input type="checkbox"/>
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Respondent Name:

Respondent Phone: (if different from above)

9912	9911 (____) _____	check if cell phone <input type="checkbox"/>	9910 MM DD YY Date: ____ - ____ - ____
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This completes the survey. The results will be available on the release date at nass.usda.gov/results.
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-PASI (Mail)	9903	9998	9900	9921	9985	9989 ____ - ____ - ____			
2-R		2-Spouse		2-PATI (Tel)						Optional Use			
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)									
4-Office Hold		4-Partner		6-Email						9907	9908	9906	9916
5-R – Est		9-Other		7-Fax									
6-Inac – Est				19-Other									
7-Off Hold – Est													
S/E Name													