

THANK YOU FOR PARTICIPATING IN THE CITY OF BELLEVILLE'S BUSINESS RETENTION AND EXPANSION SURVEY FOR THE MANUFACTURING SECTOR.

MY NAME IS
AND I WILL BE YOUR INTERVIEWER TODAY.
MY NAME IS
AND I WILL BE RECORDING YOUR ANSWERS.
TODAY WE WILL BE ASKING YOU A SERIES OF QUESTIONS RELATED TO YOUR BUSINESS AND YOUR EXPERIENCE OF DOING BUSINESS WITHIN THE CITY OF BELLEVILLE.
THIS PROCESS IS A KEY STEP IN UNDERSTANDING THE NEEDS O THE CITY'S MANUFACTURERS AND HOW WE CAN SUPPORT YOU! SUCCESS.
INTERVIEW DATE:
INTERVIEW TIME:

There are two rules we have for this survey:

- 1. The "Skip It" Rule If there is a question that you can't or don't want to answer, we can skip it. There is no need to explain your reasons; just let us know.
- Confidentiality All information you provide is confidential. Subject to freedom of information legislation, all information you provide will be kept confidential. All volunteer interviewers and individuals involved in the project are committed to this principle. All the responses from businesses will be summarized as percentages or averages in the community report, guaranteeing anonymity.

The Leadership Team team will respond to urgent issues, and provide information or assistance as requested through the survey. Based on the analysis of the survey results, actions will be developed and implemented to support the growth of existing businesses and the economy.

3. After the survey results are compiled, we will develop strategic action plans to respond to business needs, concerns, and opportunities. Copies of the report will be provided to all businesses participating in the survey.

Please do not hesitate to ask any questions during the survey process.

CONFIDENTIALITY AGREEMENT BETWEEN VOLUNTEER INTERVIEWERS AND RESPONDENT:

WE, the Volunteer Interviewers, agree that all information will be kept strictly confidential and used only in the Business Retention and Expansion (BR+E) project. The person being interviewed is a witness to this commitment.

VOLUNTEER INTERVIEWERS	(1)		
	. ,	Signature	Print Name
	(2)		
		Signature	Print Name
PERSON INTERVIEWED:	(1)		
		Signature	Print Name

COMPANY PROFILE

Company Name:	
Address:	
Town:	
Postal Code:	
Telephone #:	
CONTACT INFORM	IATION
First Name:	
Last Name:	
Title:	
Email Address:	
Telephone #:	

BUSINESS BACKGROUND

The first set of questions we are going to ask relates to some basic information about your business.

1.	Which	of the following be	est describes you	r business?	
	O	Locally owned an	d operated, with	one location.	
	0	Locally owned an		more than one loo	cation
		(Specify number)):		
	O	Franchise, please (City):		neadquarters is lo	cated.
	0	Branch or division Please indicate w (City + Country):	here the corpora	te headquarters is	
2.	How r	nany years has yo	ur business been	in operation in th	is community?
	•	Less than 1 year			
	O	1 to 3 years			
	O	4 to 10 years			
	O	11 to 25 years			
	O	26 to 35 years			
	O	Over 35 years			
3.	How r	nany years has the	e current owner/o	wners been opera	ating this business?
	0	Less than 1 year			
	O	1 to 3 years			
	O	4 to 10 years			
	O	11 to 25 years			
	O	26 to 35 years			
	0	Over 35 years			
4.	Includ	ling the owner/own	ers, how many e	mployees work at	this location?
	0	1 – 4	O 5-9	O 10 – 19	O 20 – 29
	_	30 – 49	O 50 – 99	O 100 - 299	O 300-499
	\mathbf{O}	500+			

_	What paraentage of those ampleyees are: (Should total 100)	0/ \
Э.	What percentage of these employees are: (Should total 100°	/o <i>)</i>
	Permanent Full-time	
	Permanent Part-time	
	Temporary	
	Seasonal	
6.	What is the primary market of your business:	
	O Local	
	O Regional	
	O National	
	O International	
	• International	
7.	What primary activity does this business conduct?	
	O Food processing	
	O Plastic injection molding	
	O Packaging	
	O Electronics	
	Machinery, equipment, electronics	
	• Metal fabrication	
	O Furniture	
	O Wood, paper	
	O Chemical manufacturing	
	Automotive component production	
	O Pharmaceutical manufacturing	
	O Textile manufacturing	
	O Consumer Goods	
	O Transportation	
	O Warehousing and storage O Wholesale	
	Ondustrial Service provider	

8.	What are the m	ain products or services provided at this location?
9.	Are you plannir	ng on any capital investment in the next 3 years?
	O Yes O No (If n	o, go to question 12)
10	. If yes, what is t	he estimated value of that investment?
11	. Are you seekin	g funding for this investment?
	O Yes O No	
12	. Does your busi	ness export?
	O Yes O No (If I	no, go to question 14)
13	.a) Where do yo	ou currently export to? (Select all that apply)
	O Centra	
PΙ	ease choose:	Asia: India, Korea, Philippines, Vietnam, Middle East, China, Other?
		Central/South America: Argentina, Brazil, Ecuador, Other?

b) W	/hat percentage	e of your busine	ess sales	is related	to exports?
	0-9%	□ 10-24%		25-49%	☐ Great than 50%
c) Aı	re you currently	looking at any	new exp	ort market	s?
	O Yes (If yes, O No	where):			
14. ls yc	our workplace u Yes No Other	inionized?			
		years do you e ase, or remain			of employees in this business
	Increase	full	I-time □	part-time	
	Decrease	full	I-time □	part-time	
	Remain the s	ame 🗆			
	Unsure				
16. Wha	at is your curre	nt operating lev	∕el as a p	ercentage	of your maximum capacity?
	0 - 24% 25 - 49% 50 - 74% 75 - 99% 100+				
	ou produce a s	similar product	or compe	te with sis	er plants within your corporate
	O Yes				
	_	o to question 19)			

18. If yes, where are they located? (Check all that apply)
O In Ontario In Canada
Outside Canada
19. Within the next 3 Years do you plan on: (Read list) (Note to Interviewer: What is the CURRENT situation for the business right now)
 Remaining the same Expanding (Go to Question 27) Downsizing (Go to Question 20) Relocating (Go to Question 23) Selling (Go to Question 26) Closing (Go to Question 31)
b) What are the main reasons for remaining the same?
(Go to Question 33)
Downsizing
20. What are the main reasons for the potential downsizing of your business?
21. Will your downsizing lead to a decrease in? (Read list. Select all that apply)
☐ Workforce (How many?)
☐ Floor space
Product line(s)Services for customers
Other (Specify):

22. Is there any assistance that could be provided to prevent/limit the downsizing of your business?
O Yes (If yes, please specify) O No
(Co to Question 22)
(Go to Question 33)
Relocating 23. Where do you plan to relocate this business?
 Within the community Outside the community (Specify location): Exploring options
24. Why are you planning to relocate the business?
25. Is there any assistance that could be provided to prevent or assist with the relocation of your business within the community?
Yes (If yes, please specify) No
(Go to question 33)

Selling		
26. Why are	e you selling your business? (Read list. Select all that app	y.)
_	Retirement Lack of profit	
_	Workload	
_	Competition	
_	Lack of workforce	
O	Lack of business	
O	Attractive Offer	
O	Cost of doing business	
O	OTHER:	
(Go to quest	ion 33)	
Expanding		
, ,	re the main reasons for the potential expansion of your	husiness?
27 . What a	o the main readene for the potential expansion of your	bacilloco.
28 Will voi	ur expansion require or lead to: (Read list. Select all that a	nnly)
_0 , 0	an expansion regains or read tor (read non estectan mare	
O	An increase in workforce (If yes, how many?)	_
O	A decrease in workforce (If yes, how many?)	_
O	An increased need for employee training	
O	An increase in floor space (If yes, how much?)	_sq. ft.
0	Additional product line(s)	-
O	Additional services for customers	
_	Process improvements	
_	Additional Investment in Equipment and technology	
_	An increase in export of goods or services.	
_	Other (Specify)	

29. Is your business currently experiencing difficulties with your expansion plans?
Yes (If yes, please specify) No
30. Could the community provide assistance to support your expansion plans?
O Yes (If yes, please specify) O No
(Go to question 33)
Closing 31. Within the next three years, do you plan to close this business at this location without re-opening in another location?
O Yes (If yes, please specify why) O No

32. Could the community potentially provide any assistance to prevent the closure of your business?
Yes (If yes, please specify) No
SECTION 2: BUSINESS CLIMATE
We are now going to ask you questions about the current business climate you industry operates in.
33. What is the outlook for your Business Industry?
Growing Declining Stable Not Sure
b) What do you feel are the main reasons for this?
34. Please give an approximate annual sales or production range for your business:
O \$0-249 000
3 \$250,000 – \$999,999
O \$1,000,000 - \$9,999,999
O \$10, 000 000- 19 000 000
2 0, 000 000-49 000 000
O 50 000 000 +
O Prefer not to answer

 ☑ Increase ☑ Decrease ☑ Remain the same ☑ Not sure b) What do you feel is the main reason for this? 36. In the past 3 years has your attitude about doing business in this community changed? ☑ Yes, more positive ☑ Yes, more negative ☑ No Change a) Please explain your positive change in attitude. b) Please explain your negative change in attitude. 	35.	Are	yo.	ur projected sales in the next year expected to:
 Remain the same Not sure b) What do you feel is the main reason for this? 36. In the past 3 years has your attitude about doing business in this community changed? Yes, more positive Yes, more negative No Change a) Please explain your positive change in attitude.			O	Increase
O Not sure b) What do you feel is the main reason for this? 36. In the past 3 years has your attitude about doing business in this community changed? O Yes, more positive O Yes, more negative O No Change a) Please explain your positive change in attitude.			O	Decrease
b) What do you feel is the main reason for this? 36. In the past 3 years has your attitude about doing business in this community changed? O Yes, more positive O Yes, more negative O No Change a) Please explain your positive change in attitude.			O	Remain the same
36. In the past 3 years has your attitude about doing business in this community changed? O Yes, more positive O Yes, more negative O No Change a) Please explain your positive change in attitude.			O	Not sure
O Yes, more positive O Yes, more negative O No Change a) Please explain your positive change in attitude.		k	o) W	hat do you feel is the main reason for this?
O Yes, more positive O Yes, more negative O No Change a) Please explain your positive change in attitude.				
O Yes, more positive O Yes, more negative O No Change a) Please explain your positive change in attitude.	36.	In t	he r	past 3 years has your attitude about doing business in this
 Yes, more negative No Change a) Please explain your positive change in attitude. 				
No Change a) Please explain your positive change in attitude.			O	Yes, more positive
a) Please explain your positive change in attitude.			0	Yes, more negative
			O	No Change
b) Please explain your negative change in attitude.		a)	Ple	ase explain your positive change in attitude.
b) Please explain your negative change in attitude.				
b) Please explain your negative change in attitude.				
		b)	Ple	ase explain your negative change in attitude.

37. How would you rate the following factors of doing business in this City? (Readlist. Select one answer for each.) Use the following rating system:

NA = Not Applicable	1 = Poor 2 = Fair	3 =	Good		4 = Exc	cellent
LOCAL GOV'T SERVICES						
LOCAL GOV I SERVICES		NA	1	2	3	4
Workforce						
Availability of serviced land						
Land costs						
Availability of space for rent	or lease			Ī	П	
Development/building permit						
Development charges						
Municipal property taxes						
Local roads and streets					П	
Regional/Provincial roads ar	nd highways			Ī	П	
Proximity to rail and airports	- 3 - 7 -		П		П	
Availability health and medic	eal services					
Support for Diversity, Equity						
Availability of adequate house						
Cell phone service	····9					
Internet service					П	
Water/wastewater capacity						
Water/wastewater fees					П	
Availability of adequate elect	tricity				П	
Cost of electricity						
Availability of natural gas						
Cost of natural gas						
Health department / health u	nit approvals		П			
Police services	THE approvato				П	
Fire services						
Library services						
Recreation facilities						
Cultural facilities						
Parks and open spaces						
Snow removal						
Garbage/recycling						
Economic development serv	ices					
Public transit						
Mental Health Supports						
Quality of life Municipal Committees						
Other?						
- 11 TOT 1			\Box			

COMMUNITY SERVICES / ORGANIZATIONS

		_	= Goo	u	T - L	kcellent
		NA	1	2	3	4
Childcare services						
Schools (elementary and see	condary)					
Loyalist College						
Centre for Workforce Develo	pment (CFWD)					
Belleville Chamber of Comm	ierce					
Belleville Downtown Improve	ement Area (BDIA)					
Trenval						
Small Business Centre (SBC	<u>(</u>)					
Quinte United Immigrant Se	rvices (QUIS)					
LGBTQ2+ Organizations (Eg	g. Pride)					
Quinte Manufacturing Assoc	iation & QEDC					
Cultural Amenities						
Support from municipality						
Support from other business	es					
Support from other business						

40. In terms of the overall impact on this City as a place to do business what is the most significant change you would like to see in the next five years?
41. What is your impression of this City as welcoming to equity seeking individuals, groups, and businesses?
(Definition of Equity seeking individuals/groups/businesses: Those that identify barriers to equal access, opportunities, and resources due to disadvantage and discrimination and actively seek social justice and reparation).
O Poor
O Fair
○ Good
O Excellent
O N/A
42. Have you had any dealings with the City's Economic Development office?
O Yes
O No
42. If you have those dealings been forequesting
43. If yes, have these dealings been favourable?
O Yes (If yes go to question 45)
O No

elopment Division
No
r

SECTION 3: OPPORTUNITIES AND BARRIERS

Next we are going to ask you about the opportunities and barriers that exist for you in your business.

51. What percentage of your products' components, services or skills are outsourced from other manufacturers or businesses?
 ○ 0 - 9% ○ 10 - 24% ○ 25-49% ○ 50% +
52. What products, services or skills do you outsource to manufacturers or other businesses outside of the area?
53. What products, services or skills would you like to purchase locally that are now being purchased outside of the area?
54. Are there any products, services, or skills that you are having difficulty procuring?
O Yes (If yes, describe)
○ No

•	nterested in working co-operatively with other businesses in the City to ny of the following? (Read list. Select all that apply)
0	Joint product purchasing
O	Joint marketing
O	Joint training
O	Networking/information sharing
O	Newcomer attraction and retention
O	Diversity, Equity, and Inclusion (DEI) focused training for employers and employees
O	Shared product testing space
O	Shared research space
O	Other (specify)
57. If yes, wh	
58. Do you k	now of a business that may have an interest in locating in this community?
, O 1 O	es (If no, go question 61)
	ould you be willing to contact this business directly on behalf mmunity?
O '	⁄es
) 1 C	

	iness?
	O Yes (If yes, please provide) O No
61. ls y	our facility or equipment:
	O At capacity (Go to question 62)
	O Underutilized (Go to question 61b)
	O In need of modernizing (Go to question 61c)
•	your plant and/or equipment is/are underutilized, are you interested in perating with another business to bring the plant or equipment to full capacity?
	O Yes
	O No
(Go to questions 62)
c)	Do you have any plans to modernize?
	O Yes (If yes, please explain)
	O No
-	
	you have any long-term sustainability or environmental goals that the City could port?
	O Yes (If yes, specify) O No

SECTION 4: WORKFORCE

We are now going to ask you questions about your business workforce.

63. How would you rate the following factors in this City?

NA = Not applicable	1 = Poor	2 = Fair	3 =	= Goo	d	4 = E	xcellent
			NA	1	2	3	4
Availability of qualified work	kers						
Stability of the workforce							
Ability to attract new emplo	yees						
Ability to retain employees							
64. How would you describe you	r company's ł	niring chall	enges	? (Sele	ect all	that ap	ply)
O Too few applicants							
O Lack of appropriate s	skills or trainin	na					
O Lack of relevant exp		.9					
O Lack of full-time avai							
O Disinterest in shift-w	ork						
O Other (please specify	y)						
65. Are the hiring challenges spe	ecifically relate	ed to the co	ommui	nity or	your i	industr	y?
O Community							
O Industry							
·							
66. Has your business made any			•			•	
changing demographics of y	our workforce	in the last	three	years	? (Ple	ase se	lect
all that apply)							
O Flexible work arrang	ements						
O Supporting diversity	and inclusion						
O More part-time oppo	rtunities						
O More work breaks.							
Other (please specify	y)						

67	.What types of public amenities in the City could benefit your workforce?
68	.How would providing those amenities impact your business operations?
69	Does your business currently participate in any Diversity, Equity, and Inclusion (DEI) training, co-ops,internships, short-term corporate training or apprenticeship programs? If yes, please specify. O Yes (please specify) No
70	. Is there any other information you wish to share?

-THE END-

THANK YOU FOR PARTICIPATING IN THE CITY OF BELLEVILLE'S BR+E FOR MANUFACTURERS, PROSPER BELLEVILLE.

THE INFORMATION AND DATA RECEIVED WILL BE ANALYZED AND COMPILED INTO A REPORT TO BE PRESENTED AT A PUBLIC COMMUNITY EVENT IN THE SPRING OF 2024.