

**Andover Township
Economic Planning Committee
Business Survey**

Company Information:

Business Name:

Business Address:

Business Phone:

Date:

Primary Contact:

Name & Title:

Emergency Contact Number:

Questions:

Product/Service:

1. What is the Product or Service of your Business?

2. How many Associates/Employees do you have currently?

Market:

3. Is your Business's primary market:

1. Local 2. Regional 3. National 4. International

4. Are your Business sales:

1. Increasing 2. Stable 3. Decreasing

5. Are the projected employment needs for your Business:

1. Increasing 2. Stable 3. Decreasing

Future Needs:

6. Does your Business plan to expand in the next three years?

1. Yes 2. No

If Yes;

A. Do you need help in finding a bigger location? _____

B. Can we help you find local Financial opportunities? _____

C. Do you need help with our Planning and or Zoning Boards? _____

7. Do you plan on staying in Andover Township?

1. Yes 2. NO

If No;

What are the barriers for you to grow in our community?

Services:

8. What service/utility needs would best help you to expand?

Water _____	Roads _____
Sewer _____	Easements _____
Gas _____	Waste/Recycling _____
Electric _____	

9. How would you rate our Township's Municipal Departments in relation to your experience with your business?

	A. Good	B. Fair	C. Poor	N/A. Not Applicable
Administrator	_____			
Building Department	_____			
Clerk's Office	_____			
Health Department	_____			
E.M.S	_____			
Fire Code Official	_____			
Fire Department	_____			
Police Department	_____			
Public Works Dept	_____			
Tax Department	_____			

Business to Business:

10. Are there other businesses or companies that would compliment your business that are not currently in our Township that you would like to have in our community?

11. Would you like to be contacted by the Economic Planning Committee? _____

*Submit this form via email to vthompson@andovertwp.org