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