

Grow Minnesota! Conversation Guide



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INTRODUCTION

My name is _____ and I am the owner/manager of _____
(**business name**) and member of the _____ (**chamber/organization name**).

We are here today on behalf of our local chamber's Grow Minnesota! business retention and assistance program. The local program is part of an ongoing statewide effort that involves over 70 local chambers and their economic development organizations.

Grow Minnesota! visits with businesses to accomplish three things;

- Thank you for your business investment in the community,
- Listen and learn more about your business,
- Assist you when requested so that your business can continue to grow here.

We assure you that;

- Visits are confidential, so no private information is shared without your consent.
- Only aggregate information from visits is shared and used to improve our local and statewide business climates.

We want this visit to be conversational, but will work off a form to cover a comprehensive list of business topics including;

- Products and services,
- Facilities,
- Workforce, and
- Expansion plans.

Feel free to skip any topics or questions you are not comfortable answering. The visit information is then entered into our confidential Grow Minnesota! database

We will be respectful of your time and the visit will last no more than an hour. If appropriate, a tour of your facility is always welcomed.

Company/Contact Information																						
Company Name		Contact & Title																				
Address	City	State/Zip																				
Phone		Email																				
Overview Information																						
Visit Date:		Interviewer Name:																				
Parent Company Name/Location		Year Company Established in Community: _ _ _ _																				
Business Details																						
<p>What is the primary business sector at this location?</p> <table border="0"> <tr> <td><input type="checkbox"/> Administration/Support/Waste Management/Remediation Services</td> <td><input type="checkbox"/> Management of Companies & Enterprises</td> </tr> <tr> <td><input type="checkbox"/> Agriculture/Forestry/Fishing or Hunting</td> <td><input type="checkbox"/> Manufacturing</td> </tr> <tr> <td><input type="checkbox"/> Accommodation/Food Services</td> <td><input type="checkbox"/> Mining</td> </tr> <tr> <td><input type="checkbox"/> Arts/Entertainment/Recreation</td> <td><input type="checkbox"/> Professional/Scientific/Technical Services</td> </tr> <tr> <td><input type="checkbox"/> Construction</td> <td><input type="checkbox"/> Real Estate/Rental and Leasing</td> </tr> <tr> <td><input type="checkbox"/> Educational Services</td> <td><input type="checkbox"/> Retail Trade</td> </tr> <tr> <td><input type="checkbox"/> Finance/Insurance</td> <td><input type="checkbox"/> Transportation Warehousing</td> </tr> <tr> <td><input type="checkbox"/> Health Care Services/Social Assistance</td> <td><input type="checkbox"/> Utilities</td> </tr> <tr> <td><input type="checkbox"/> Information</td> <td><input type="checkbox"/> Wholesale Trade</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other: _____</td> </tr> </table>			<input type="checkbox"/> Administration/Support/Waste Management/Remediation Services	<input type="checkbox"/> Management of Companies & Enterprises	<input type="checkbox"/> Agriculture/Forestry/Fishing or Hunting	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Accommodation/Food Services	<input type="checkbox"/> Mining	<input type="checkbox"/> Arts/Entertainment/Recreation	<input type="checkbox"/> Professional/Scientific/Technical Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Real Estate/Rental and Leasing	<input type="checkbox"/> Educational Services	<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Finance/Insurance	<input type="checkbox"/> Transportation Warehousing	<input type="checkbox"/> Health Care Services/Social Assistance	<input type="checkbox"/> Utilities	<input type="checkbox"/> Information	<input type="checkbox"/> Wholesale Trade		<input type="checkbox"/> Other: _____
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	<input type="checkbox"/> Other: _____																					
<p>Type of corporate structure:</p> <table border="0"> <tr> <td><input type="checkbox"/> Cooperative</td> <td><input type="checkbox"/> C-Corporation (privately held)</td> <td><input type="checkbox"/> C-Corporation (publicly held)</td> </tr> <tr> <td><input type="checkbox"/> Limited Liability</td> <td><input type="checkbox"/> Non-profit</td> <td><input type="checkbox"/> Partnership</td> </tr> <tr> <td><input type="checkbox"/> Professional Association</td> <td><input type="checkbox"/> S-Corporation</td> <td><input type="checkbox"/> Sole Proprietorship</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td></td> <td></td> </tr> </table>			<input type="checkbox"/> Cooperative	<input type="checkbox"/> C-Corporation (privately held)	<input type="checkbox"/> C-Corporation (publicly held)	<input type="checkbox"/> Limited Liability	<input type="checkbox"/> Non-profit	<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Association	<input type="checkbox"/> S-Corporation	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Other										
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<input type="checkbox"/> Other																						
<p>Is this a locally owned business? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																						
<p>Does this company have a succession plan (ownership/management)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>																						
<p>Has the company's ownership or top management changed in the last year? Or Is change imminent? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>																						
<p>Business Details Notes:</p> <hr/> <hr/>																						

Facilities

Type of facility (Check all that apply):

- Branch
- Distribution
- Headquarters
- Home-based business
- Manufacturing
- Office-operation (non HQ)
- R & D
- Sales Office
- Other: _____

Square Feet : _____

3.3 Number of Buildings: _____

Age of building(s): (Select the one that best describes the facility.)

- Less than 5 years
- 5-10 years
- 10-20 years
- Over 20 years

Condition of building(s): (Select the one that best describes the facility.)

- Excellent
- Good
- Fair
- Poor

Is there room for additional expansion at this site? Yes No

Is this facility owned or leased?

- Owned
- Leased

When does your lease expire?

Does this company have other business facilities in the state? Yes No

If yes, how would you describe this company's other facilities?

- Branch
- Distribution
- Headquarters
- Manufacturing
- Office operation (non-HQ)
- R&D
- Sales office
- Other: _____

Where are other facilities located?

Facilities Notes:

Products/Services

What are this company's major products or services?

Has this company introduced new products or services during the last year? Yes No

If yes, could you briefly describe them _____

Is this company likely to have new products/services in the next year?

- Yes No Unsure N/A

If yes, could you please explain them:

Does this company have a research & development budget? Yes No

Over the past year, has total company sales:

- Increased Decreased Been relatively stable Fluctuated widely

Over the past year, has company profitability:

- Increased Decreased Been relatively stable Fluctuated widely

Explain change in sales/profitability

Products/Services Notes:

Local Employment and Workforce

What is the total number of FTE (full time equivalent) employees at this facility? _____

How have the number of jobs at this facility changed in the last year?

- Greater than Less than Approximately equal to N/A

Please explain change: _____

Does this company hire any contract or temporary/seasonal employees? Yes No

If yes, how has the number changed in the last year?

- Increase Decrease Stable

In the next year, do you expect the number of jobs at this facility to:

- Increase Decrease Be relatively stable Unsure

Is there union representation at this company? Yes No

Has this company recruited new employees in the last year? Yes No

What type of jobs: _____

If so, did this company have trouble finding them? Yes No

What jobs were most difficult to recruit: _____

Does this company plan to recruit new employees in the next year? Yes No Maybe

If so, what type of jobs: _____

In general, what is it about the applicants that makes the openings hard to fill (check all that apply, explain):

- Poor work ethic Lack of basic education Lack of technical skills
 Lack of candidates Other: _____

What level of training does this company expect when hiring?

- High School/GED Technical/community college 4 year college
 Professional degree Other, explain: _____

Local Employment/Workforce Notes:

Public Policy Impact

What are your top public policy concerns? (local, state, or federal)

Market Information

Where is this company's primary geographic market: *(Select the one that best describes primary market)*

- International Local (w/in 50 miles) Midwest (including MN)
 Minnesota United States

Where is this company's fastest growing geographic market? *(Select the one that best describes the fastest growing market.)*

- International Local (w/in 50 miles) Midwest (including MN)
 Minnesota United States

Does this company export? Yes No

If so, where? (check all that apply).

- Africa & Middle East India, Pakistan, Central/South Asia
 Australia, New Zealand, Oceania Japan, Korea, Southeast Asia
 Canada Latin America & Caribbean
 Europe & Russia Mexico
 Greater China (China, Hong Kong, Macao, Taiwan)

Is the market share of this company's major products or services:

- Increasing Decreasing Stable Unsure

From where does this company purchase its inputs/supplies?

- Minnesota _____
 Outside of MN _____

Investment Plans

Does this company have plans for new investments? Yes No

If yes, check those that apply:

- Invest in new facilities Make major equipment purchases
- Renovate/Expand Current Facilities Other: _____

Please Explain: _____

What is the approximate date of this investment?

- Within one year Within two years Within three years Unsure

Will investment be:

- At this location In another state
- In this community (at another location) In another country
- In another community in MN Don't know

If in another community, state or country, please specify where: _____

If this company is considering investing at a new location, why? *Check all that apply.*

- Access to capital Lease expiration
- Access to labor No room at this location
- Access to markets Quality of workforce
- Environmental permit obstacles Transportation/Infrastructure
- High state or local taxes Other _____
- Labor costs

If known, what is the estimated dollar investment? _____

Investment Plans Notes:

Does this company require follow up? Yes No

If yes, describe the follow up needed: _____

Local Chamber Question:

