



# Getting to know business in Yarra

## QUESTIONNAIRE

### PRIVACY STATEMENT – PLEASE READ BEFORE COMPLETING THE QUESTIONNAIRE

Yarra City Council respects your privacy. Council provides a Privacy Statement to allow you to make an informed decision about whether you wish to participate in the questionnaire. Some information collected in the questionnaire, as indicated by an asterisk (\*), will be made available to the general public through an online Business Directory to provide you with complimentary advertising and promotional opportunities. Information collected will be made available to Council, to enable departments to notify you of opportunities such as grants funding, upcoming events, training and development, networking, planning developments, consultation etc.

I consent to the information provided in the survey being used for the above purposes and/or directly related purposes. I understand that Council may disclose:-

- a. information to other organisations if required by legislation; and
- b. only that information which is otherwise publicly available to another organisation or applicant.

I also understand that I may apply to Council for access to and/or amendment of the information. Requests for access and or correction should be made to the Economic Development Unit.

**Please indicate your consent by ticking the box (Please note this must be completed).**

Council's Privacy Policy is available on the web at [www.yarracity.vic.gov.au/Info/Privacy.asp](http://www.yarracity.vic.gov.au/Info/Privacy.asp) or by phoning Governance on 9205 5555 and requesting a copy.

**Please answer the following questions about your current business. Please note if you have more than one business or a business with multiple outlets, please answer this questionnaire for ONE business only.**

### ONLY THE BUSINESS OWNER OR MANAGER SHOULD COMPLETE THE QUESTIONNAIRE

### PLEASE PRINT CLEARLY

#### SECTION 1: YOUR BUSINESS

#### 1. Please fill in business details \*

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Address*

\_\_\_\_\_ *Suburb*

\_\_\_\_\_ *State*                      \_\_\_\_\_ *Postcode*

Business Address: \_\_\_\_\_  
*(If different than above) Street Address*

\_\_\_\_\_ *Suburb*

\_\_\_\_\_ *State*                      \_\_\_\_\_ *Postcode*

Ph No: \_\_\_\_\_

Fax No: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

#### 2. Please fill in the Business Owner/Head Office contact details

\_\_\_\_\_ *Title*                      \_\_\_\_\_ *First Name*                      \_\_\_\_\_ *Last Name*

Ph No: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

#### 3. Please fill in the Business Manager contact details (if different from Owner)

\_\_\_\_\_ *Title*                      \_\_\_\_\_ *First Name*                      \_\_\_\_\_ *Last Name*

Ph No: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

#### 4. How long has your business been operating?

- < 1 year .....  01
- 1 – 5 years .....  02
- 6 – 10 years .....  03
- > 10 years .....  04

**5. The below categories are based on official ABS data and will be used for benchmarking Yarra's industries against official industry standards. Which of the following categories most closely relates to your business? TICK ONE ONLY**

- Accommodation & Food services (e.g. cafes, restaurants, bars, taverns, pubs, nightclubs, hospitality clubs) .....  01
- Administrative and Support Services (e.g. tour operators, travel agents, call centres, gardening services) .....  02
- Agriculture, Forestry & Fishing (e.g. nurseries, fruit growers) .....  03
- Arts & Recreation Services (e.g. artists, musicians, performing arts venues, personal gyms, instructors).....  04
- Construction .....  05
- Education and Training .....  06
- Electricity, Gas, Water and Waste services .....  07
- Financial & Insurance Services .....  08
- Health Care and Social Assistance (e.g. VET, childcare, private practitioners).....  09
- Information Media and Telecommunications (e.g. publishing, broadcasting, internet services) .....  10
- Manufacturing (e.g. food, dairy products, clothes, textile etc) .....  11
- Mining (or service to mining) .....  12
- Personal and Other Services (e.g. repair services, laundries, photographic studios, film processes).....  13
- Professional, Scientific and Technical Services (e.g. graphic design, legal services, photographic services) .....  14
- Public Administration and Safety.....  15
- Retail Trade (e.g. gardening supplies services, food, clothing).....  16
- Rental, Hiring and Real Estate Services .....  17
- Transport, Postal and Warehousing (e.g. tour buses, courier pick-up services, storage services) .....  18
- Wholesale Trade .....  19

**6. Please indicate which of the following most closely represents your legal business structure. TICK ONE ONLY**

- Sole Trader .....  01
- Partnership.....  02
- Limited Partnership .....  03
- Private Company/Corporation .....  04
- Public Company/Corporation .....  05
- Incorporated Association.....  06
- Non-Incorporated Association .....  07
- Co-operative.....  08
- Trust.....  09

**7. Does your business: TICK ALL THAT APPLY**

- Operate as a Business-to-Consumer  01
- Operate as a Business-to-Business  02
- Export goods .....  03
- Import goods .....  04
- Operate under a franchise .....  05
- Operate from home .....  06
- Operate as an online business.....  07
- Operate from a worksite (eg. office, factory, workshop, etc) .....  08
- Operate from a shop .....  09

**8. What are your three main products/services that you provide?**

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_

**9. Please indicate the approximate number of employees in your business:**

- Full Time \_\_\_\_\_
- Part Time \_\_\_\_\_
- Casual \_\_\_\_\_

**10. What is the approximate turnover for your business per annum?**

- < \$500,000 .....  01
- \$500,000 - \$1 million .....  02
- \$1 - \$5 million .....  03
- > \$5 million .....  04

**11. How long has your business been in its current location?**

- < 1 year .....  01
- 1 – 5 years.....  02
- 6 – 10 years.....  03
- > 10 years.....  04

**SECTION 2: DOING BUSINESS IN YARRA**

**12. Have you ever relocated within the boundaries of the City of Yarra?**

- Yes.....  01 → Continue  
 No.....  02 → Go to Q.13

IF YES: *What was your main reason for relocating?*

- Cost of rent.....  01  
 Transport/accessibility.....  02  
 Proximity to home/family.....  03  
 Image of area.....  04  
 Other (*Please specify below*).....  98

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**13. Please indicate what you see as the main advantages/disadvantages of your business being located in Yarra?**

	Advantage	Disadvantage
Cost of land .....	<input type="checkbox"/> 01	<input type="checkbox"/> 01
Cost of rent.....	<input type="checkbox"/> 02	<input type="checkbox"/> 02
Availability of suitable skilled staff....	<input type="checkbox"/> 03	<input type="checkbox"/> 03
Employee stability/retention.....	<input type="checkbox"/> 04	<input type="checkbox"/> 04
Transport/accessibility .....	<input type="checkbox"/> 05	<input type="checkbox"/> 05
Proximity to key industries.....	<input type="checkbox"/> 06	<input type="checkbox"/> 06
Available customer base.....	<input type="checkbox"/> 07	<input type="checkbox"/> 07
Local customer loyalty .....	<input type="checkbox"/> 08	<input type="checkbox"/> 08
Size of local market .....	<input type="checkbox"/> 09	<input type="checkbox"/> 09
Image of area .....	<input type="checkbox"/> 10	<input type="checkbox"/> 10
Proximity to home/family.....	<input type="checkbox"/> 11	<input type="checkbox"/> 11
You are a local.....	<input type="checkbox"/> 12	<input type="checkbox"/> 12
Government regulations .....	<input type="checkbox"/> 13	<input type="checkbox"/> 13
Council support/assistance.....	<input type="checkbox"/> 14	<input type="checkbox"/> 14
Availability of suitable land.....	<input type="checkbox"/> 15	<input type="checkbox"/> 15
Service from local businesses .....	<input type="checkbox"/> 16	<input type="checkbox"/> 16
Tourism potential .....	<input type="checkbox"/> 17	<input type="checkbox"/> 17
Other ( <i>Please specify below</i> ).....	<input type="checkbox"/> 98	<input type="checkbox"/> 98

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**14. Yarra City Council provides a range of services to support business development. Please indicate which of the following you are unaware of, currently use or have used in the past. TICK ALL THAT APPLY**

	Unaware	Currently Use	Have Used
Training .....	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03
Business events .....	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03
Marketing opportunities .....	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03
Networking opportunities....	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03
Business advice .....	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03

**15. What additional services would you like to see Council offer?**

1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_  
 5. \_\_\_\_\_

**16. Council is considering developing a panel of business representatives to assist with consulting with the business community. Would you like more information about this?**

- Yes.....  01  
 No.....  02

**17. Do you own or manage any other business within the City of Yarra? \***

- Yes.....  01 → *Please provide the following information*  
 No.....  02 → *Please continue to Section 3*

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Address*

\_\_\_\_\_ *Suburb*

\_\_\_\_\_ *State*                      \_\_\_\_\_ *Postcode*

Business Address: \_\_\_\_\_  
*(If different than above) Street Address*

\_\_\_\_\_ *Suburb*

\_\_\_\_\_ *State*                      \_\_\_\_\_ *Postcode*

Ph No: \_\_\_\_\_

Fax No: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

**SECTION 3: CUSTOMER SERVICE**

**18. What are the main customer groups that you currently serve? TICK ALL THAT APPLY**

- Males.....  01
- Females.....  02
- Families.....  03
- Children (0-11) .....  04
- Youth (12-17) .....  05
- Young Adults (18-25).....  06
- Adults (25-64).....  07
- Seniors (65+).....  08
- Other Businesses .....  09

**19. How can your products/services be purchased by customers? TICK ALL THAT APPLY.**

- Franchise.....  01
- Outlet.....  02
- On-site.....  03
- Internet .....  04
- Telephone .....  05
- Through third parties .....  06

**20. Do you offer your products/services in languages other than English?**

- Yes .....  01
- No.....  02

**21. a. Has the number of your customers increased, decreased or stayed the same since 2004?**

- Increased .....  01
- Decreased .....  02
- Stayed the Same ....  03
- Don't Know .....  04

**b. If there was a decrease, what do you believe to be the main reason(s) for this?**

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**22. Do you track the geographic origin of your customers?**

- Yes .....  01 → Continue
- No.....  02 → Please go to Q.234

**23. Please indicate where the majority of your customers originate from. TICK ALL THAT APPLY.**

- City of Yarra (Local residents) .....  01
- Greater Melbourne Area .....  02
- Outside Melbourne/Within Victoria.....  03
- Outside Victoria/Within Australia.....  04
- Overseas .....  05

**24. Do you track customer satisfaction?**

- Yes.....  01
- No .....  02

**25. Does your business provide services or facilities for customers with special needs?**

- Yes .....  01
- No.....  02

**26. Do you provide customer service training for your employees?**

- Yes.....  01
- No .....  02

**SECTION 4: MARKETING AND PROMOTION**

**27. Do you undertake marketing/advertising for your business?**

- Yes .....  01 → Continue
- No .....  02 → Please go to Section 5

**28. What forms of advertising do you use? TICK ALL THAT APPLY**

- Brochures.....  01
- Flyers/Rack Cards.....  02
- Billboards .....  03
- Print Advertisements .....  04
- Value-Added Coupons .....  05
- Direct Mail .....  06
- Internet Advertising .....  07
- Website .....  08
- Promotional Video/DVD .....  09
- Television Advertising .....  10
- Radio Advertising .....  11
- Trade Shows .....  12
- Consumer Shows.....  13
- Email/e-newsletter .....  14
- SMS .....  15
- Signs or displays.....  16
- Publicist/Media Relations .....  17
- Other (please specify) .....  98

**SECTION 4: MARKETING AND PROMOTION (cont'd)**

**29. Do you partner with other types of businesses to offer cross-promotion or package deals?**

- Yes .....  01  
 No.....  02

IF YES: Please provide specific details (i.e. types of businesses & packages)

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IF NO: Would you be interested in forming partnerships with other businesses?

- Yes.....  01  
 No.....  02

**30. Has your business received any awards of distinction in the last two years?**

- Yes .....  01  
 No.....  02

IF YES: Please specify the name of the award(s) and the year(s) received.

Award(s)	Year(s) Received

**SECTION 5: PROMOTING YARRA**

In December 2006, the 2006 -2008 Tourism Action Plan was endorsed by Council to provide a framework for promoting the municipality as a visitor destination. The following questions will assist Council with implementing the Tourism Action Plan.

**31. Do you consider your business to be part of the tourism industry?**

- Yes.....  01 → Continue  
 No .....  02 → Please go to Section 6

**32. Below is a list of categories used to classify tourism businesses. Please indicate which of the following most closely relates to the MAIN focus of your business. TICK ONE ONLY.**

- Attraction .....  01
- Meeting/Convention Services.....  02
- Park/Outdoor Recreation.....  03
- Artist's Studio .....  04
- Performance Venue .....  05
- Tours & Excursions .....  06
- Convention/Show Venue.....  07
- Performing Arts .....  08
- Transportation .....  09
- Festival.....  10
- Winery or Brewery.....  11
- Travel Agent.....  12
- Gallery.....  13
- Relaxation (eg. Spa).....  14
- Visitor Services.....  15
- Shopping .....  16
- Accommodation .....  17
- Food and Beverage .....  18

**33. Please list any additional services, unique qualities or offerings that draw visitors to your business (e.g. special events, cooking demonstrations, product tutorials, re-enactments etc)**

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**34. Are you able to accommodate groups?**

- Yes...  01 Please indicate the maximum number in group: \_\_\_\_\_  
 No ....  02

**35. Do you offer meeting, conference, convention, trade show, or banquet facilities?**

- Yes.....  01  
 No .....  02

IF YES: Please provide:

Total number of customers that can be accommodated:	
Number of rooms suitable for use for meetings:	

**SECTION 5: PROMOTING YARRA**

(cont'd)

**36. Do you partner with any of the following organisations to promote your tourism business? TICK ALL THAT APPLY**

- Destination Melbourne .....  01
- Tourism Victoria .....  02
- Tourism Australia .....  03

**37. Does your business hold formal accreditation obtained through the tourism industry?**

- Yes.....  01
- No .....  02

IF YES: Please name the accreditation and who this is obtained through.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**38. Does your business belong to any professional organisations/ associations?**

- Yes.....  01
- No .....  02

IF YES: Please specify (i.e. the Australian Retailers Association).

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**42. Please provide any additional information about your business that Council might be interested in.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION 6: ENVIRONMENTAL SUSTAINABILITY**

Council is in the process of consulting on the development of a new Environment Strategy. The following questions will assist Council in ensuring future environmental plans and projects are meaningful to the sustainability of the local business community. *Should you like further information on the development of Council's Environment Strategy, please contact Silvana Predebon on 9205 5753.*

**39. How do you rate your business in regards to environmental performance for the following areas? TICK THE ALL THAT APPLY.**

	High	Medium	Low
<b>Waste management</b> <i>eg. providing re-usable bags for customers, recycling and composting waste, using recycled goods</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<b>Water conservation</b> <i>eg: installing water-saving technology, keeping storm water free of litter, recycling water</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
<b>Energy management</b> <i>eg: using energy efficient lights and appliance's, heating /cooling systems, ensuring building is well insulated</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

**40. Do you have any plans to improve the environmental performance of your business?**

- Yes.....  01
- No.....  02

**41. How would you like to see council support your business to improve in environmental management?**

- Provide you with information on general environmental action ...  01
- Provide you with information on specific environmental action – Please nominate topic .....  02
- Provide you with contacts or links to programs for environmental management in business .....  03
- Provide you with a service to assist your environmental action – Please nominate service .....  04

**43. How would you like to be contacted by Council in the future?**

- Phone .....  01
- Fax.....  02
- Email .....  03
- Mail .....  04
- Please don't contact me in the future...  05

**THANK YOU FOR YOUR TIME AND SUPPORT!**