

City of Tempe P.O. Box 5002 31 East Fifth Street Tempe, AZ 85280 480-350-8225

Corey Woods Mayor

Randy Keating Vice-Mayor

Jennifer Adams Councilmember

Robin Arredondo-Savage Councilmember

Doreen Garlid Councilmember

Lauren Kuby Councilmember

Joel Navarro Councilmember Dear Fellow Business Leader,

Re: 2021 City of Tempe Survey

On behalf of the Tempe City Council, thank you for your ongoing involvement in our community. This letter is a request for your assistance in building an even better Tempe. Your input on the enclosed survey is extremely important. These results will help us determine our community's priorities and where funds are best allocated when we work on updating Tempe's Strategic Plan. To make sure that the City's priorities are aligned with the needs of our businesses and that we are doing the job that you expect, we need to know what you think.

We realize the survey takes time to complete, but every question is important and we value your input. The time you invest in the survey will influence many of the decisions City leaders make about Tempe's projects, programs and services that could impact your business. Your responses will also allow City leadership and staff to identify and address many of the opportunities and challenges facing our community. Please return your completed survey sometime during the week if possible, and return it in the enclosed postage-paid envelope. Your responses will remain confidential.

If you prefer, you may complete the survey on-line at www.tempe.gov/businesssurvey.

Please call the Strategic Management Analyst, Wydale Holmes, at (480) 350-5312 with any questions. City staff will be pleased to answer them. Thank you again for taking the time to help make Tempe an even more amazing city.

Sincerely,

Corey Woods

Mayor

2021 City of Tempe Business Survey

Please take a few minutes to complete this survey in the next 10 days. Your input is an important part of the City's effort to involve the business community in City decision-making. You may return this survey in the enclosed postage paid envelope. You may also complete the survey on-line at www.tempe.gov/BusinessSurvey.



(5) Very safe (4) Safe	(3) Somewhat (2) Unsafe	safe	(1 (9) Very uns) Don't kno				
How safe do you thin NIGHT?(5) Very safe(4) Safe	k your emplo (3) Somewhat (2) Unsafe		(1	ners fee) Very uns) Don't kno	afe	hey visit	your loc	ation
Please rate your satisf "Very Satisfied" and 1 ability to operate.								
How satisfied are you with		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know	N/A
Police services		5	4	3	2	1	9	0
Fire services		5	4	3	2	1	9	0
Emergency medical services		5	4	3	2	1	9	0
Water and sewer services		5	4	3	2	1	9	0
Parks		5	4	3	2	1	9	0
Recreation services		5	4	3	2	1	9	0
Street maintenance, including side and curbs	ewalks, medians,	5	4	3	2	1	9	0
Street lighting		5	4	3	2	1	9	0
Street sweeping		5	4	3	2	1	9	0
Stormwater drainage/flood manag	ement	5	4	3	2	1	9	0
Public transportation services		5	4	3	2	1	9	0
Planning		5	4	3	2	1	9	0
Enforcement of codes and ordinal	nces	5	4	3	2	1	9	0
Construction codes		5	4	3	2	1	9	0
Business Resource and Innovation	n Center (BRiC)	5	4	3	2	1	9	0
Public landscaping		5	4	3	2	1	9	0
Traffic on City streets		5	4	3	2	1	9	0

6. Using a scale from 1 to 5, where 5 is "Extremely Important" and 1 is "Not Important," please rate how important each of the following reasons were in your decision to locate your business in Tempe.

		Extremely Important	Very Important	Important	Less Important	Not Important	N/A
1.	Overall image of the City	5	4	3	2	1	0
2.	Quality of local schools	5	4	3	2	1	0
3.	Low crime rate	5	4	3	2	1	0
4.	Availability of trained employees	5	4	3	2	1	0
5.	Level of taxation	5	4	3	2	1	0
6.	Access to highways	5	4	3	2	1	0
7.	Access to Sky Harbor Airport	5	4	3	2	1	0
8.	Availability of quality housing	5	4	3	2	1	0
9.	Availability of housing for all income levels	5	4	3	2	1	0
10.	Proximity to other businesses that are important to your business	5	4	3	2	1	0
11.	Availability of public transportation	5	4	3	2	1	0
12.	Availability of libraries, arts, sports, and cultural amenities (quality of life)	5	4	3	2	1	0
13.	Attitude of local government toward business	5	4	3	2	1	0
14.	Availability of telecommunications, utilities, and other infrastructure	5	4	3	2	1	0
15.	Proximity to Arizona State University	5	4	3	2	1	0
16.	Quality/attractiveness of Downtown Tempe	5	4	3	2	1	0
17.	Availability of parks and open space	5	4	3	2	1	0
18.	Appearance of private property	5	4	3	2	1	0
19.	Up to date construction codes	5	4	3	2	1	0
20.	Ease of obtaining construction permits and starting your business	5	4	3	2	1	0
21.	Other:	5	4	3	2	1	0

7.	Which THREE of the reasons listed in Question 6 will have the MOST IMPACT on your decision to stay in the City of Tempe for the next 10 years? [Write-in your answers below using the numbers from the list in Question 6.]
	1st: 2nd: 3rd:
	Maintaining Financial Stability and Vitality
8.	Are you aware of the City's "Equal Pay for Equal Work" initiative?(1) Yes(2) No
9.	Do you think that the City of Tempe is "Business Friendly"?
	(1) Yes(2) No(9) Don't know
	9a. If "No," why not?
10.	Do you think the tax structure for businesses in the City of Tempe is fair compared to other Arizona cities?
	(1) Yes(2) No(9) Don't know
	10a. If "No," why not?



Sustainable Growth and Development

11. Please rate the workforce in the City of Tempe in the following areas.

		Excellent	Good	Average	Below Average	Poor	Don't Know	N/A
1.	The availability of workers	5	4	3	2	1	9	0
2.	The quality of workers	5	4	3	2	1	9	0
3.	The stability of the workforce	5	4	3	2	1	9	0
4.	The education/technical skills of workers	5	4	3	2	1	9	0

12. Using a scale of 1 to 5, where 5 means "Very Satisfied" and 1 means "Very Dissatisfied," please rate your satisfaction with the following City codes and regulations.

	How satisfied is your business with	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know	N/A
1.	Land use codes	5	4	3	2	1	9	0
2.	Landscaping codes	5	4	3	2	1	9	0
3.	Requirement for proper business appearance/maintenance	5	4	3	2	1	9	0
4.	Business signage regulations	5	4	3	2	1	9	0
5.	Business parking regulations	5	4	3	2	1	9	0
6.	Trash disposal regulations	5	4	3	2	1	9	0
7.	Alternatives to landfilling waste	5	4	3	2	1	9	0
8.	Construction codes	5	4	3	2	1	9	0
9.	Commercial trash/Recycling collection	5	4	3	2	1	9	0

13.	In the next 12 months, is your business cons	idering any of the following? [Check all that apply.]
	 (1) Expanding your business in Tempe (2) Renovating your business in Tempe (3) Relocating to another location in Tempe (4) Relocating to another location outside of Tempe 	(5) Downsizing(6) Closing(7) None of these(9) Don't know
16 min	Strong Community Connections	
14.	Overall, how would you rate the job the Cit owners and managers?	y of Tempe does in communicating with business
	(3) Average (4) Good(2) Below average	(1) Poor (9) Don't know
	14a. If "Below Average" or "Poor" to Question	
15.	Which of the following do you use to get inform	mation about the City of Tempe? [Check all that apply.]
	(1) Tempe 11 (Cable TV)(2) Recreation Opportunities Brochure(3) City Websites(4) Water bill newsletter (Tempe Today)(5) City Social Media (Twitter, Facebook, Instagram,	(7) TV News(8) City meetings(9) City e-mail subscriptions(10) Tempe 311 (by Phone, Website, Mobile App)(11) Radio news
	Nextdoor)	(12) Newspapers

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_(6) City videos (on YouTube, City Website, Social

Media)

- 15a. Which single communication tool do you use most often to get City information?
- 16. Please indicate whether your business has interacted with Staff from the City of Tempe during the past year related to the following services. If "Yes," please rate the City's performance in that area.

		_	ou had		If "Yes," please rate the City's performance						
	Type of Staff/Department	contact v staff i depart	n this	Excellent	Good	Average	Below Average	Poor	Don't Know	N/A	
1.	Code compliance	Yes	No	5	4	3	2	1	9	0	
2.	Construction/permitting/inspections	Yes	No	5	4	3	2	1	9	0	
3.	Planning and Development Services	Yes	No	5	4	3	2	1	9	0	
4.	Special events	Yes	No	5	4	3	2	1	9	0	
5.	Police	Yes	No	5	4	3	2	1	9	0	
6.	Fire	Yes	No	5	4	3	2	1	9	0	
7.	Emergency medical services	Yes	No	5	4	3	2	1	9	0	
8.	Streets and Traffic	Yes	No	5	4	3	2	1	9	0	
9.	Stormwater/flood management	Yes	No	5	4	3	2	1	9	0	
10.	Utility billing services	Yes	No	5	4	3	2	1	9	0	
11.	Small Business Development	Yes	No	5	4	3	2	1	9	0	
12.	Economic Development	Yes	No	5	4	3	2	1	9	0	
13.	Trash and recycling services	Yes	No	5	4	3	2	1	9	0	

17. Using a scale of 1 to 5, where 5 means "Very Satisfied" and 1 means "Very Dissatisfied," please rate your satisfaction with the following.

	How satisfied is your business with	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know	N/A
1	How ethical City employees are in the way they conduct City business	5	4	3	2	1	9	0
2	Availability of information about City programs, events, services, and issues	5	4	3	2	1	9	0
3	Usefulness of the City's website	5	4	3	2	1	9	0
4	Tempe's online services (registration, payment, etc.)	5	4	3	2	1	9	0
5	How well the City treats residents regardless of age, disability, gender, or other characteristics	5	4	3	2	1	9	0
6	Overall quality of customer service provided by City employees	5	4	3	2	1	9	0

Quality of Life

	<u> </u>			
18.			ow likely would you be to recommend Tempe as, colleagues, and other businesses?	as a
		(3) Somewhat likely (2) Not likely	(1) Not likely at all (9) Don't know	
19.	Do you see Tempe as a w	elcoming destination	for visitors/tourists?	
	(1) Yes(2) No	(9) Don't Know		
	19a. If "No", why not?			

20.	Do you value t		(9) Don't kr	•	o ponen	.o touris	Siniy		.po :	
	20a. <i>If "No",</i> w	hy not?								
21.	City Priorities.			wing d	o you thi	ink shoı	uld be the	e City's	TOP PRIC	 PRITIES
	(1) Economic, (2) Water/sew (3) Quality an (4) Maintenar	/business developer d safety of consince of City buildingtion programs, and service ce of the City ince of streets iman services	ppment truction/permitting	•	ns	- - - - -	(15) Par (16) Pol (17) Coo (18) Tra (19) Mu (20) Saf	using ghborhood ks ice service de enforce ffic delays Itimodal (S ety (Visior	ds es ment treet Car, Bi	•
22.	Which of the compared to to(4) Better		o?		overall I		s atmos _(9) Don't l	-	•	today,
23.	(3) No change Items that may item on a scale	/ influence y	(1) Wor our perceptio	se n of the	City of	Tempe a	are listed	below.	Please ra	
Нс	ow satisfied are you w	ith		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know	N/A
1. 0\	verall quality of life in t	he City		5	4	3	2	1	9	0
	verall image of the City			5	4	3	2	1	9	0
	ow well the City is han			5	4	3	2	1	9	0
	verall quality of service		ne City of Tempe	5	4	3	2	1	9	0
	uality of new developm			5 5	4	3	2 2	1	9	0
7 O	uality of public educativerall feeling of safety	in Tempe		5	4	3	2	1	9	0
8. O\	verall value your busin Illars and fees	ess receives for	your City tax	5	4	3	2	1	9	0
	uality of housing option			5	4	3	2	1	9	0
24.	(3) We have s (2) We don't h	rplement efformation? everything we not some but could unave anything are	ective recycling the sed use more and need more information in the second secon	ng/wast	e divers	ion and	water co	onserva	tion programment interested	rams at
25.	,	nave anything ar	nd need more info				('/			

Dem	ographics
26.	Is your business a member of the Tempe Chamber of Commerce?
	(1) Yes(2) No(9) Don't know
27.	Is your business a member of Local First Arizona?(1) Yes(2) No(9) Don't know
28.	What is the nearest major intersection where your business is located in Tempe?
	Street 1: and Street 2:
29.	Does your business promote carpooling, transit, and walking to work with your employees?
	(1) Yes(2) No, but we are interested in promoting alternative transportation options(3) No, we are not interested in promoting alternative transportation options
30.	Does your business own or rent/lease the facility where your business is located?
	(1) Own(2) Rent/Lease(9) Don't know
31.	How many people does your business currently employ?
	Total # Full Time: Total # Part Time:
32.	How many years has your business been in Tempe? years
33.	Approximately how many years ago did you personally come to Tempe? years
34.	Approximately what percentage of your customer base is represented by the following groups? [Total should add to 100%.]
	100% total
35.	Which ONE of the following BEST describes your business? [Check the most appropriate category; if you don't see a description that matches, write a description in "Other."]
36.	Are you a Veteran Owned Business?(1) Yes(2) No
37.	Are you aware of the City of Tempe Anti-Discrimination ordinance? (1) Yes (2) No
38.	Is your business currently classified by the government as an MBE (Minority Business Enterprise), WBE (Women Business Enterprise), Disabled Owned Business, or SBE (Small Business Enterprise)?
	(1) Yes, MBE(4) Yes, Disabled Owned(9) Don't know/Unsure(2) Yes, WBE(5) Combination(3) Yes, SBE(6) None of these

online survey. Your information will remain confidential and will not be shared. Your Name: Phone: Phone: Your Email Address: eive future communication from the City, please provide your contact information below.	(1)	
(3) Receiving assistance from the City of Tempe regarding expanding, relocation, and/or downsizing your business (4) Participating in future surveys or focus groups sponsored by the City (5) Participating in your utilities energy efficiency programs in order to find cost savings and reduce your greenhouse gemissions (6) Participating in the City of Tempe's recycling program (7) Receiving more information on the City of Tempe's water conservation programs, such as rebates (8) Becoming a Career Ready Tempe host site (Youth Workforce Development) www.tempe.gov/youthworkforce (9) Participating in the Arizona Green Business Certification https://ax.greenbiztracker.org/site/about/ (10) Business Resiliency and Recovery Workshop If you have any suggestions for improving the way the City of Tempe serves businesses in the community, please write them in the space provided below. Would you be interested in participating in an additional online survey about how your business been impacted by COVID-19? (1) Yes [Answer Q41a.] (2) No If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name: Your Email Address: Phone: Your Email Address: Provide your contact information below.		
(5) Participating in your utilities energy efficiency programs in order to find cost savings and reduce your greenhouse gemissions (6) Participating in the City of Tempe's recycling program (7) Receiving more information on the City of Tempe's water conservation programs, such as rebates (8) Becoming a Career Ready Tempe host site (Youth Workforce Development) www.lempe.gov/youthworkforce (9) Participating in the Arizona Green Business Certification https://az.greenbiztracker.org/site/about (10) Business Resiliency and Recovery Workshop If you have any suggestions for improving the way the City of Tempe serves businesses in the community, please write them in the space provided below. Would you be interested in participating in an additional online survey about how your business been impacted by COVID-19? (1) Yes [Answer Q41a.] (2) No If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name: Phone: Your Email Address:	(3)	Receiving assistance from the City of Tempe regarding expanding, relocation, and/or downsizing your business
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Would you be interested in participating in an additional online survey about how your busines has been impacted by COVID-19? (1) Yes [Answer Q41a.](2) No 41a.		
Would you be interested in participating in an additional online survey about how your busines has been impacted by COVID-19? (1) Yes [Answer Q41a.](2) No 41a.	lf you	have any suggestions for improving the way the City of Tempe serves businesses in the
has been impacted by COVID-19? (1) Yes [Answer Q41a.]	comm	unity, please write them in the space provided below.
has been impacted by COVID-19? (1) Yes [Answer Q41a.]		
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41a. If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name: Phone: Phone: Phone: Your Email Address: Phone to the communication from the City, please provide your contact information below.		
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Your Email Address:eive future communication from the City, please provide your contact information below.	has be	een impacted by COVID-19?
eive future communication from the City, please provide your contact information below.	has be	een impacted by COVID-19? (1) Yes [Answer Q41a.](2) No If "Yes": Please provide your contact information below. We will email you a link to the
	has be	een impacted by COVID-19? (1) Yes [Answer Q41a.](2) No If "Yes": Please provide your contact information below. We will email you a link to the
	has be	(1) Yes [Answer Q41a.](2) No If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name:Phone:
	has be	(1) Yes [Answer Q41a.](2) No If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name:Phone:
	has be	(1) Yes [Answer Q41a.](2) No If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name:Phone:
Phone:	41a.	(1) Yes [Answer Q41a.](2) No If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name: Phone: Phone:
	41a.	The seen impacted by COVID-19? If "Yes": Please provide your contact information below. We will email you a link to the online survey. Your information will remain confidential and will not be shared. Your Name: Phone:
Phone:		I van be interested in porticipation in an additional culing common about become built
S Name: Fmail:	41a.	ture communication from the City, please provide your contact information below. Phone: Phone: Phone: Phone: Phone: Phone: Phone: Phone: Phone:

This concludes the survey. Thank you for your time!

Please return your completed survey in the enclosed return-reply envelope addressed to: ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061

Your responses will remain completely confidential. The address information printed to the right will ONLY be used to help identify areas with specific needs. Thank you.

Optional Items