

BALLITO BR&E SURVEY Business Information Cover Sheet

RESPONDENT ID	
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BUSINESS NAME:

PHYSICAL ADDRESS:

POSTAL ADDRESS:

POST CODE

TELEPHONE

FAX

CELLPHONE

EMAIL

PERSON INTERVIEWED

POSITION

INTERVIEWER 1

INTERVIEWER 2

Confidentiality: All your answers to this survey will be kept confidential. The volunteer interviews have signed an undertaking to this effect. The information you provide will be combined with that from other businesses and presented as percentages or averages and you will not be quoted directly. The task team will respond to your requests for information or specific assistance but will not give your name to a third party without your permission.

“Skip it” Rule: If you do not wish to answer a particular question, please just say so. No explanation is required.

Ballito BR&E Survey Questionnaire

Respondent ID	Area	Interview Date	Input Date
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SECTION A: Business structure and history

A1 Is all information on the cover sheet complete and correct?

Yes No *(If no please correct the cover sheet.)*

A2 Describe the main products or services of your business?

A3 Which **one** of the following categories best describes your business activities?
(Please tick single most appropriate box.)

- | | | | |
|---|--------------------------|------------------------------------|--------------------------|
| Agriculture, forestry, fishing | <input type="checkbox"/> | Mining, quarrying | <input type="checkbox"/> |
| Manufacturing | <input type="checkbox"/> | Electricity, water | <input type="checkbox"/> |
| Construction, building | <input type="checkbox"/> | Wholesale, retail, motor trade | <input type="checkbox"/> |
| Catering, accommodation | <input type="checkbox"/> | Transport, storage, communications | <input type="checkbox"/> |
| Community or personal services | <input type="checkbox"/> | Government services | <input type="checkbox"/> |
| Finance, insurance, property or business services | <input type="checkbox"/> | | <input type="checkbox"/> |

A4 Is your business locally owned?

- | | | | |
|-------------------------------|--------------------------|----------------------------------|--------------------------|
| Yes, locally owned | <input type="checkbox"/> | No, KZN company branch | <input type="checkbox"/> |
| No, national company branch | <input type="checkbox"/> | No, international company branch | <input type="checkbox"/> |
| Other <i>(please explain)</i> | <input type="checkbox"/> | | |

A5 How long has your business been operating here in Ballito:

- | | | | |
|------------------|--------------------------|----------------------|--------------------------|
| Less than 1 year | <input type="checkbox"/> | 6 to 10 years | <input type="checkbox"/> |
| 1-5 years | <input type="checkbox"/> | Longer than 10 years | <input type="checkbox"/> |

A6 Where are most of your customers (by sales)? *(Tick one box only.)*

- | | | | |
|-----------------------------|--------------------------|-------------------------------|--------------------------|
| Local (in or near Ballito) | <input type="checkbox"/> | Various parts of South Africa | <input type="checkbox"/> |
| Mainly within KwaZulu-Natal | <input type="checkbox"/> | Outside SA | <input type="checkbox"/> |

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A7 Where are most of your suppliers (by value)? (*Tick one box only.*)

- Local (in or near Ballito) Various parts of South Africa
 Mainly within KwaZulu-Natal Outside SA

A8 Do you use any of the following methods to promote your business and if so what impact do they have on your sales? (*Tick ONE box on each row.*)

	Big impact	Some impact	Little impact	Don't know	Do not use
Local newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
National newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trade publications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social media, e.g., Facebook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local advertising directory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flyers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Posters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Networking/socialising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Word of mouth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (<i>please specify</i>)					

SECTION B: Employment

B1 How many people does the business employ (including yourself, directors and partners)?

	Male	Female	Total
Full time			
Part time			
Casual / contractor			
TOTAL			

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B2 Over the **last two years**, was there any change in the number of people you employed? (Tick one box.)

Increase No change Decrease

Please give details:

B3 Over the **next two years**, do you expect any change in the number of people you employ? (Tick one box.)

Increase No change Decrease

Please give details:

B4 If you were to take on any new staff in the future, what **skills** would you look for? (Tick whichever apply.)

- | | | | |
|--------------------------------------|--------------------------|------------------------------|--------------------------|
| Business management skills | <input type="checkbox"/> | Marketing skills | <input type="checkbox"/> |
| Financial management skills | <input type="checkbox"/> | Production management skills | <input type="checkbox"/> |
| Engineering skills | <input type="checkbox"/> | Research skills | <input type="checkbox"/> |
| Public relations skills | <input type="checkbox"/> | Interpersonal skills | <input type="checkbox"/> |
| Sales skills | <input type="checkbox"/> | Secretarial skills | <input type="checkbox"/> |
| Clerical skills | <input type="checkbox"/> | Functional literacy/numeracy | <input type="checkbox"/> |
| Industry specialist (specify) | | | |
| Technical skills (specify) | | | |
| Trade - skilled (specify) | | | |
| Plant/machinery operator (specify) | | | |
| Apprenticeship/learnership (specify) | | | |
| Other (specify) | | | |

B5 Are there any specific skills that are difficult to recruit locally?

Yes No If yes, please indicate which:

B6 Do any of your employees need to improve skills in areas such as the following? (Tick whichever apply.)

- | | | | |
|--------------------------|--------------------------|--------------------------------|--------------------------|
| Basic literacy (isiZulu) | <input type="checkbox"/> | Basic Communication in English | <input type="checkbox"/> |
| Basic numeracy | <input type="checkbox"/> | Computer literacy | <input type="checkbox"/> |
| Sales skills | <input type="checkbox"/> | Customer service | <input type="checkbox"/> |
| Telephone skills | <input type="checkbox"/> | Basic business skills | <input type="checkbox"/> |
| Health and safety | <input type="checkbox"/> | Supervisory skills | <input type="checkbox"/> |
| Life skills | <input type="checkbox"/> | Other (specify) | <input type="checkbox"/> |

SECTION C: Business Environment

C1 What are the main **advantages** of running a business in this community?
(Tick no more than **FIVE** advantages.)

- | | | | |
|-----------------------------------|--------------------------|---|--------------------------|
| Strength of local market | <input type="checkbox"/> | Access to customers | <input type="checkbox"/> |
| Access to suppliers | <input type="checkbox"/> | Availability of business services | <input type="checkbox"/> |
| Local maintenance/repair services | <input type="checkbox"/> | Quality of internet access/services | <input type="checkbox"/> |
| Cost/reliability of transport | <input type="checkbox"/> | Road networks | <input type="checkbox"/> |
| Relative cost of rates & services | <input type="checkbox"/> | Reliability of electricity/water supply | <input type="checkbox"/> |
| Availability of housing | <input type="checkbox"/> | Availability of public transport | <input type="checkbox"/> |
| Quality of life locally | <input type="checkbox"/> | Crime rate | <input type="checkbox"/> |
| Image of the area | <input type="checkbox"/> | Support by municipality | <input type="checkbox"/> |
| Availability of skills locally | <input type="checkbox"/> | Relative cost of land/property | <input type="checkbox"/> |
| Other (specify): | <input type="checkbox"/> | | |

C2 What are the main **disadvantages** of operating a business in our community? (Tick no more than **FIVE** disadvantages.)

- | | | | |
|-----------------------------------|--------------------------|---|--------------------------|
| Strength of local market | <input type="checkbox"/> | Access to customers | <input type="checkbox"/> |
| Access to suppliers | <input type="checkbox"/> | Availability of business services | <input type="checkbox"/> |
| Local maintenance/repair services | <input type="checkbox"/> | Quality of internet access/services | <input type="checkbox"/> |
| Cost/reliability of transport | <input type="checkbox"/> | Road networks | <input type="checkbox"/> |
| Relative cost of rates & services | <input type="checkbox"/> | Reliability of electricity/water supply | <input type="checkbox"/> |
| Availability of housing | <input type="checkbox"/> | Availability of public transport | <input type="checkbox"/> |
| Quality of life locally | <input type="checkbox"/> | Crime rate | <input type="checkbox"/> |
| Image of the area | <input type="checkbox"/> | Support by municipality | <input type="checkbox"/> |
| Availability of skills locally | <input type="checkbox"/> | Relative cost of land/property | <input type="checkbox"/> |
| Other (specify): | <input type="checkbox"/> | | |

C3 What was the single most important reason that influenced the decision to start your business here in Ballito?

C4 Over the **past two years** did your sales:

Increase Stay the same Decrease

Please explain your choice:

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C5 Over the **next two years** do you expect your sales will:
 Increase Stay the same Decrease
 Please explain your choice:

SECTION D: Business Opportunities

D1 What products or services would you like to buy locally, but currently purchase from outside the community?

Service or product	Reason?				Comment
	Availability	Price	Quality	Service	

D2 Are there any new businesses that you think could be located successfully in this area?

SECTION E: Future Plans

E1 Over the PAST TWO YEARS did you ever consider: *(Tick whichever apply.)*
 Moving your business out of the community?
 Selling your business?
 Closing your business?
 None of the above?
 If yes to any of the above, are you willing to share reasons?

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- E2 Do you have plans to expand or change your business?
Expand Change Neither
Are you willing to provide details of plans to expand or change?

- E3 What are the major constraints to expanding your business?
(Please tick up to 4)
- | | | | |
|---|--------------------------|---|--------------------------|
| Availability of finance | <input type="checkbox"/> | Franchise restrictions | <input type="checkbox"/> |
| Small size of local market | <input type="checkbox"/> | Cannot find suitably skilled employees | <input type="checkbox"/> |
| Too much competition | <input type="checkbox"/> | Labour laws and regulations | <input type="checkbox"/> |
| Limited product range | <input type="checkbox"/> | Infrastructure/services <i>(give details)</i> | <input type="checkbox"/> |
| Lack of space | <input type="checkbox"/> | Municipality <i>(give details)</i> | <input type="checkbox"/> |
| Commodity prices | <input type="checkbox"/> | Red tape <i>(give details)</i> | <input type="checkbox"/> |
| Achieving quality standards | <input type="checkbox"/> | Government policy <i>(give details)</i> | <input type="checkbox"/> |
| Other constraints <i>(give details)</i> | <input type="checkbox"/> | | |

SECTION F: Supporting Environment

- F1 What do you think would help to improve the performance of your business over the next 12 months? *(Tick whichever apply.)*
- | | | | |
|-------------------------------------|--------------------------|-----------------------------|--------------------------|
| Improved management skills | <input type="checkbox"/> | Improved staff skills | <input type="checkbox"/> |
| More staff | <input type="checkbox"/> | Reduced staff | <input type="checkbox"/> |
| Improved labour relations | <input type="checkbox"/> | Better industry information | <input type="checkbox"/> |
| New products | <input type="checkbox"/> | New machinery/equipment | <input type="checkbox"/> |
| Local and regional information | <input type="checkbox"/> | Trade/export opportunities | <input type="checkbox"/> |
| Other <i>(please specify below)</i> | <input type="checkbox"/> | | |

- F2 Would you like to receive information on any of the following subjects?
(Tick whichever apply.)
- | | | | |
|-------------------------------|--------------------------|--------------------------------|--------------------------|
| Business management | <input type="checkbox"/> | Marketing | <input type="checkbox"/> |
| How to write a business plan | <input type="checkbox"/> | Merchandising | <input type="checkbox"/> |
| Access to finance | <input type="checkbox"/> | Legislation affecting business | <input type="checkbox"/> |
| Municipal bylaws | <input type="checkbox"/> | Labour relations | <input type="checkbox"/> |
| Exporting | <input type="checkbox"/> | BEE certification | <input type="checkbox"/> |
| Incentives | <input type="checkbox"/> | Skills Development Levy | <input type="checkbox"/> |
| Tender opportunities | <input type="checkbox"/> | E-commerce | <input type="checkbox"/> |
| How to tender | <input type="checkbox"/> | How to go Green | <input type="checkbox"/> |
| Other <i>(please specify)</i> | <input type="checkbox"/> | | |

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F3 Is your business experiencing any particular problems with any section or department of local, provincial or national government?

Yes No If yes please give details.

SECTION H: Local Business Organisations

H1 Are you a member of a business organisation, e.g., any of the following?
(Tick whichever apply.)

- iLembe Chamber of Commerce, Industry & Tourism
- Durban Chamber of Commerce & Industry
- Afrikaanse Handelsinstituut (*specify sakekamer*)
- National African Chamber of Commerce & Industry
- Businesswomen's Association of SA
- National Small Business Chamber
- Other (*please specify*)

H2 Would you like more information about the newly formed iLembe Chamber of Commerce, Industry & Tourism (ICCI)?

Yes No If yes, please give details:

H3 What services would you like the iLembe Chamber to offer its members? (*Tick whichever apply.*)

- Networking events
- Business mentorship programme
- News of proposed developments
- Business directory
- Local statistics and information
- Information on legislation
- Training courses
- Access to business opportunities
- Small Business advice
- Engage government on issues impacting business (lobby)
- Other (*please specify*)

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H4 Do you think iLembe Chamber should promote Ballito as a tourism and investment destination?

Yes No Please explain your choice.

H5 If the iLembe Chamber could do one thing really well and your decision to join was based on that one thing, what would it be?

SECTION I: Overall

I1 What, in your opinion, is the single most important thing that would make this a better place to do business?

I2 Finally, have you found this questionnaire helpful in expressing your views about operating a business in our community?

Yes Not sure No

I3 Is there anything else you would like to add?

Thank you for participating in this survey. The Ballito BR&E Task Team welcomes your input and looks forward to sharing the results with you at the Feedback Event.

Follow Up Suggestions and Red Flags Sheet

RESPONDENT ID	
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To be completed immediately after the interview

1. Is the business facing any serious difficulty at present?

Yes No If yes, please give details:

RED FLAG?	
YES	NO

2. Did the person interviewed highlight any especially important issues?

Yes No If yes, please give details:

RED FLAG?	
YES	NO

3. Did the person interviewed ask for any follow up from the task team?

Yes No If yes, please give details:

RED FLAG?	
YES	NO

4. Were there any requests for information? If yes, please give details:

INFORMATION?	
YES	NO

5. How did the interview go? Would you do anything different next time?

*Please put the completed form and questionnaire in the envelope provided and return it to
Trenley Tilbrook, iLembe Chamber of Commerce, Industry & Tourism.*