



Survey for Prospective Tenants

Processing Facility /Commercial Kitchen Incubator Needs For MCBI Regional Incubator

Interest in a shared-use kitchen has surfaced. A shared-use commercial kitchen offers specialty food producers, farmers, and caterers a relatively inexpensive place to license food processing activities. These kitchens can also support job creation and local economies. Successful kitchens have clear goals, committed leadership, and solid plans for long-term profitability but they all begin the same way, a community survey. Through a 9 county survey, we can begin to determine if a shared-use commercial kitchen would benefit the region that is covered by MCBI. The counties to be served are Belmont, Coshocton, Guernsey, Harrison, Jefferson, Monroe, Morgan, Muskingum and Noble.

We invite you to be a part of this process by taking a few minutes and completing the following survey. Through this collected information, we can begin to imagine just what a facility could do for our farmers, food producers, and other entrepreneurs from our region. Thank you in advance for your cooperation.

Survey for Prospective Tenants

Value Adding Agricultural Processing Facility / Commercial Kitchen Incubator Needs

Carol Humphreys, *MCBI Regional Incubator* Executive Director
56 North 5th St, Zanesville, OH 43701 email: chumphreya@mcbi.info

Please complete the following questionnaire about the proposed facility and return it to:

1. What is your zip code? _____
2. What type of company or group do you have now or want to be?

<input type="checkbox"/> Value added farm producer	<input type="checkbox"/> Caterer
<input type="checkbox"/> Cart/Street Vendor	<input type="checkbox"/> Church/School /Civic Group
<input type="checkbox"/> Specialty/Gourmet Food Producer (i.e. mustard, barbecue sauce, salsa, jams, cheesecakes, etc.)	
<input type="checkbox"/> Bakery	<input type="checkbox"/> Other _____

3. What food item(s) are you now or would you be interested in preparing?

	<u>Preparing Now</u>	<u>Interested in Preparing</u>	<u>How Interested Are You?</u>		
			Low	Medium	High
a. Bakery Items	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
b. Catered Meals	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
c. Sauces / Salsa	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
d. Condiments	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
e. Value Added Produce	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
f. Pasta	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
g. Dry Mixes	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
h. Beverages	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
i. Fruits/Berries	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
j. Dairy	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
k. Meats	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
l. Other _____			_____	_____	_____
m. Other _____			_____	_____	_____

Comments:

4. What facilities or services are you currently using to meet your food service needs? (church kitchen, rental kitchen, home kitchen, etc.)?
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5. What type of equipment would you need to prepare your food product?

	<u>How Important?</u>		
	Low	Medium	High
<input type="checkbox"/> Standard range/oven	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Steam jacketed kettle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Commercial mixer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Filling and Packaging equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Walk-in cooler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Food processor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Walk-in freezer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dish washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Stainless steel table	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dehydrator / drying equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Convection oven	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Deep fryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Flat top grill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Bread slicer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Vegetable washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Vegetable sorter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Please indicate which of the following facilities you would utilize if it were available?

	<u>How Important?</u>		
	Low	Medium	High
<input type="checkbox"/> Shared-use production kitchen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Vegetable wash station	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Warehouse space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dry storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Frozen storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Cool storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Thermal processing room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Co-pack facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Retail space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Office space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. How often would you be interested in using this facility?

- | | |
|----------------------------------|---------------------------------------|
| <input type="checkbox"/> Daily | <input type="checkbox"/> Holidays |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Occasionally |
| <input type="checkbox"/> Monthly | <input type="checkbox"/> Weekends |

8. Overall, how interested are you in utilizing the facility?

<u>How Interested?</u>		
Low	Medium	High
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Respondent Information

Name (Mr./Mrs./Ms):

Title:

Address:

City:

State:

Zip:

Phone: ()

Fax: ()

Would you be interested in attending a meeting to discuss future plans for the shared-use value added food center? _____ Yes _____ No

Thank you for your time and interest. Please return your completed questionnaire to:

Carol Humphreys, Executive Director

Muskingum County Business Incubator

56 North 5th Street

Zanesville, OH 43701

Phone: 740-453-3649 – Fax: 740-453-2761

This questionnaire was designed for farm families, entrepreneurs, companies and organizations, which might be prospective tenants of the proposed facility. If you have other suggestions regarding the need for such a facility in our region, please use the space below for comments.