

TROUT PRODUCTION SURVEY - January 2013

OMB No. 0535-0150
 Approval Expires: 3/31/2014
 Project Code: 170 QID: 110101
 SMetakey: 3163



**NATIONAL
 AGRICULTURAL
 STATISTICS
 SERVICE**

Idaho Field Office
 P.O. Box 1699
 Boise, ID 83701
 Phone: 1-800-691-9987
 Fax: 208-334-1114
 Email: nass-id@nass.usda.gov

Please make corrections to name, address and zip code, if necessary

Information requested in this survey is used to prepare estimates of selected agricultural commodities. Under Title 7 of the U.S. Code and CIPSEA (Public Law 107-347), facts about your operation are kept **confidential** and used only for statistical purposes in combination with similar reports from other producers. Response is **voluntary**.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0150. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

SECTION 1: IDENTIFICATION

1. On land operated by the farm, ranch or individual(s) listed on the label:

a. Was any water area on this operation used to raise trout or trout eggs during 2012?

1 Yes – Go to Section 2

2373

3 No – Continue.

b. Was there any hatchery inventory or trout production on this operation during 2012?

1 Yes – Go to Section 2

2374

3 No – Continue.

c. Were any trout sold from this operation during 2012?

1 Yes – Go to Section 2

376

3 No – Continue.

d. Did this operation distribute trout or trout eggs for restoration, conservation, or recreational purposes during 2012? Exclude captured trout.

1 Yes – Go to Section 4

2375

3 No – Continue.

e. Will any trout be produced on this operation in the future?

1 Yes – Go to Section 5

2378

2 Don't Know – Go to Section 5

3 No – Go to Section 5.

SECTION 3: TROUT LOSSES

1. What were the total **number** and **live weight pounds** of trout lost (all lengths and sizes) during 2012 due to:

Cause of Loss	Intended for Sale	
	Total Number Lost	Total Pounds Lost
a. Disease.	045	046
b. Theft or vandalism.	047	048
c. Chemical contamination.	049	050
d. Drought.	051	052
e. Flood.	053	054
f. Predator (animals, birds, etc.).	081	082
g. Other, (Specify_ _____).	055	056

Office Use
1 – Incomplete Has trout sales 2 – Sales Unknown 3 – Valid zero
707

SECTION 4: TROUT DISTRIBUTED BY GOVERNMENT OR TRIBAL AGENCIES

1. What were the total amounts of fish and eggs produced by this operation for restoration, conservation or recreational purposes during 2012? Report fish **sold** in **Section 2**.

Fish Size	Number Distributed	Total Pounds Live Weight Distributed	Estimated Total Value of Product Distributed
a. 12 inches or longer.	201	202	203 \$.00
b. 6 inches to less than 12 inches long.	204	205	206 \$.00
c. 1 inch to less than 6 inches long.	207	208	209 \$.00
d. Trout eggs.	210		

Office Use
1 – Incomplete Distributed Trout 2 – Distribution Unknown 3 – Valid zero
200

SECTION 5: CHANGE IN OPERATOR

1. Has this operation (name on label) been sold, or turned over to someone else?

- Yes - Identify the new operator(s) below
- No - Go to Section 6

Operation Name: _____

Operator Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

SECTION 6: CONCLUSION

1. Do you make day-to-day decisions for another trout operation?

- Yes - Identify the new operator(s) below
- No - Continue

2377

Operation Name: _____

Operator Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Survey Results: To receive the complete results of this survey on the release date, go to www.nass.usda.gov/results/

Would you rather have a brief summary sent to you at a later date? Yes No

99

THANK YOU FOR YOUR COOPERATION.

Name: _____				9911 Phone: (_____) _____				9910 MM DD YYYY Date: _____				
Response	Respondent	Mode		Enum.	Eval.	Change	Office Use for POID					
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est 8-Known Zero	9901 1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-Mail 2-Tel 3-Face-to-Face 4-CATI 5-Web 6-e-mail 7-Fax 8-CAPI 19-Other	9903	098	100	785	921	789			
									Optional Use			
									407	408	9906	9916
S/E Name												