

GRAPE INVENTORY SURVEY 2020 CROP

OMB No. 0535-0039
Approval Expires:
Project Code: 491 QID:
SMetaKey:



United States
Department of
Agriculture



NATIONAL
AGRICULTURAL
STATISTICS
SERVICE

(MASTER)



USDA/NASS – Michigan
Great Lakes Region
P.O. Box 30239
Lansing, MI 48909-9983
Telephone: (517) 324-5300
Facsimile: (855) 270-2709
E-mail: NASSRFOGLR@nass.usda.gov

Please make corrections to name, address and ZIP Code, if necessary

This office is now preparing estimates of 2020 grape acreage, number of vines, and age of the vines. Your answers to the questions below will help make these figures more accurate and reliable.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. 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 0535-0039. The time required to complete this information collection is estimated to average 20 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.

REPORT FOR THE VINEYARDS YOU OPERATED OR MANAGED IN 2020

Include vineyards rented or leased from others, but exclude those rented or leased to someone else.

1. Were any grape vines grown on this operation in **2020**?

- Yes [Enter Code 1 and Continue with Item 2.]
 No [Enter Code 3 and go to Item 10]

CODE

2. Acreage of grapes grown for all purposes in **2020**

Wine Grapes

 acres

Juice Grapes

 acres

Table Grapes

 acres

3. If you completed a previous report, a listing of the vineyard information reported previously is included. Feel free to mark any corrections or deletions on that form.

4. Please report any new plantings or acquisitions in the table on the next two pages.

5. Did you carry crop insurance for the grape vines grown on this operation in **2020**?

- Yes [Enter Code 1]
- No [Enter Code 3]

CODE

6. Did you use pre-emergent herbicide for the grape vines grown on this operation in **2020**?

- Yes [Enter Code 1 and go to Item 7]
- No [Enter Code 3]

CODE

a. Did you make fall herbicide pre-emergent applications for the grape vines grown on this operation in **2020**?

- Yes [Enter Code 1]
- No [Enter Code 3]

CODE

7. What was the main disease issue for the grape vines grown on this operation in **2020**?

8. What was the main weed issue for the grape vines grown on this operation in **2020**?

9. Did you regularly scout for pests on the grape vines grown on this operation in **2020**?

- Yes [Enter Code 1]
- No [Enter Code 3 and go to Item 9]

CODE

b. How often did you scout for pests on the grape vines grown on this operation in **2020**?

10. Did you trap insects to determine when to spray on the grape vines grown on this operation in **2020**?

- Yes [Enter Code 1]
- No [Enter Code 3]

CODE

11. Which type of sprayers did you use on the grape vines grown on this operation in **2020**?

12. What was the main insect issue for the grape vines grown on this operation in **2020**?

13. In the next five years, how many acres do you plan to plant or remove of each category of grapes?

	PLANTINGS (acres)	REMOVALS (acres)
Hybrids..... acres		
Vinifera..... acres		
Native..... acres		
	YES = 1	YES = 1
No acreage changes are planned.....		

14. Did you hire any seasonal farm workers for the grape vines grown on this operation in **2020**?

- Yes [Enter Code 1 and continue]
- No [Enter Code 3 and go to Item 16]

CODE

15. In which months did you hire seasonal farm works for the grape vines grown on this operation in 2020. Mark all that apply.....

	YES = 1		YES = 1		YES = 1
January		May		September	
February		June		October	
March		July		November	
April		August		December	

16. What was your biggest issue growing grapes (Please check only one)?

- Acquiring Labor [Enter Code 1]
 Suitable Site Locations [Enter Code 2]
 Pest Management [Enter Code 3]
 Variety Selection [Enter Code 4]
 Weather [Enter Code 5]
 Input Costs [Enter Code 6]
 Other [Enter Code 7 and specify _____]

CODE

17. What are your most important site features (Please all that apply)?

- Acquiring Labor
 Suitable Site Locations
 Pest Management
 Variety Selection
 Weather
 Input Costs
 Other

9. Please record any **COMMENTS** on crop quality, growing season, difficulties, etc.,.

Go to Conclusion

REPORT IF NOT GROWING GRAPES IN 2020

10. Indicate the reason no grape vines grown on this operation in **2020**

- Farm Sold [Enter Code 1 and go to Item 11]
 Retired from farming [Enter Code 2 and go to Item 11]
 Entire farm rented to others [Enter Code 3 and go to Item 11]
 Farming, but not growing grapes [Enter Code 4 and go to Item 11]
 Never farmed [Enter Code 5 and go to Conclusion]

CODE

11. Will a new operation grow grapes in the land you operated in **2019**?

- Yes [Enter Code 1]
 No [Enter Code 3 and go to Conclusion]

CODE

12. To avoid duplication, please provide the new grape producer's name, farm name, and partners.

CONCLUSION

Survey Results: The report will be available at the following website: www.nass.usda.gov/mi.

Email: _____

Fax: _____

Respondent Name: _____	9911 Phone: _____	9910	MM	DD	YY
		Date:	__	__	__

This completes the survey. Thank you for your help.

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-Mail	9903	9998	9900	9985	9989			
2-R		2-Sp		2-Tel					_____			
3-Inac		3-Acct/Bkpr		3-Face-to-Face					_____			
4-Office Hold		4-Partner		4-CATI					Optional Use			
5-R – Est		9-Oth		5-Web					9907	9908	9906	9916
6-Inac – Est				6-e-mail								
7-Off Hold – Est				7-Fax								
		8-CAPI										
		19-Other										

S/E Name _____