

**Comments or questions?**

**Please contact us:**

USDA Forest Service  
National Landowner Survey  
160 Holdsworth Way  
Amherst, MA 01003

Toll-Free Telephone: (855) 233-3372

Email: [nwos@fs.fed.us](mailto:nwos@fs.fed.us)

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Version: Baltimore 6.0

# *National Landowner Survey*



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OMB No. 0596-0078

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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 control number for this information collection is 0596-0078. The time required to complete this information collection is estimated to average 25 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.

**Thank you for participating in this survey!**

Please return the survey in the postage-paid envelope provided.

If you would like a copy of the results of this survey, print your name and address on the back of the return envelope.



If there are any additional comments or concerns that you would like to share, please write them below.

## Instructions

- ✓ Please provide answers for the property you own listed on the outside of the envelope.
- ✓ The owner who makes most of the decisions about this property should answer this survey.
- ✓ If this survey is received by a company or other organization, please have a person knowledgeable about the organization's property and landscape management answer this questionnaire.
- ✓ Please only answer for the property specified on the envelope.
- ✓ If you do not own the property listed, please return this questionnaire in the postage-paid envelope provided and write on the cover "Not My Property"

## Ownership & Land Information

1. Which category best describes this property?

*Check only one.*

- Residential → *If this is a residential property, go to question 2*
- Industrial or commercial
- Vacant lot
- Municipal or public
- Other (please specify): \_\_\_\_\_

*If this property is industrial, commercial, a vacant lot, locally/publicly owned, or other non-residential uses, no additional responses are needed. Please return this survey in the postage paid envelope provided.*

2. What size is this property?

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- Acres
- Square feet
- Other (please specify): \_\_\_\_\_



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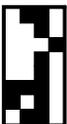
## General Questions About Your Property

3. What type of structure is on this residential property?
- Single family home, detached
  - Duplex/townhouse/row home
  - Apartment building
  - Other (please specify): \_\_\_\_\_
4. Which category below best describes who owns this property?  
*Check only one.*
- Individual
  - Joint, with spouse or domestic partner
  - Joint, such as with other family members
  - Family partnership or family LLC or LLP
  - Family trust or estate
  - Corporation or business
  - Other (please specify): \_\_\_\_\_
5. Do you currently own more than one property?
- Yes    No → *If no, please skip to question 7.*  
↳ *If yes, please go to question 6.*
6. How many properties do you own?
- properties
7. Do you rent this property to others?
- Yes    No
8. Not including street trees owned by the city, about how many, if any, trees are on this property?
- 0
  - 1-5
  - 6-10
  - More than 10

## General Questions About You

This section asks questions about you to help us understand private landowners more broadly. As with the rest of the survey, your responses are anonymous and will not be used to identify you. If you are responding on behalf of a company or other organization, please skip this section.

35. What is your age?  Years
36. What is your gender?
- Male    Female
37. What is the highest degree or level of school you have completed?
- Less than 12th grade
  - High school/GED
  - Some college
  - Associate degree
  - Bachelor's degree
  - Advanced degree
38. Are you of Hispanic or Latino origin?
- Yes    No
39. What is your race?  
*Select one or more.*
- American Indian or Alaska Native
  - Asian
  - Black or African-American
  - Native Hawaiian or Other Pacific Islander
  - White



33. Please indicate your level of agreement or disagreement with the following statements about your property.

*Check one box for each item.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Good landscaping increases the value of my property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Animals are a problem for my trees, lawn, and/or garden	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I enjoy seeing wildlife on my property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I care about what my neighbors think of the appearance of my yard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

34. Please indicate your level of agreement or disagreement with the following statements about the trees in your community.

*Check one box for each item.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
My community should invest more in tree plantings and tree care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having trees in a neighborhood makes it a better place to live	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having diverse trees in my neighborhood is important to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The health and condition of trees in my neighborhood should be considered when new buildings are constructed or street improvements are made	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Which, if any, features does this property have?

*Check all that apply.*

- Backyard
- Front yard
- Side yard(s)
- Trees and/or shrubs that were planted
- Trees and/or shrubs that grew naturally
- Vegetable/fruit garden
- Flower garden
- Recreational feature, such as a tennis or basketball court
- Water feature, such as a pool or pond
- Driveway
- Patio, porch, or deck
- Shed or other storage building
- Other (please specify): \_\_\_\_\_
- None of the above

10. a. Do you reside on this property?

- Yes  No → *If no, please skip to question 11.*

↳ *If yes, please answer b, c, and d.*

b. Including you, how many people are a part of your household?

\_\_\_\_\_ People

c. Is anyone in your household under the age of 18?

- Yes  No

d. Including you, is anyone in your household over the age of 65?

- Yes  No

11. In what year did you, personally, acquire this property?

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Year

12. a. Have one or more trees been removed from this property in the **past 5 years**?

- Yes  No → *If no, skip to question 13.*

↳ *If yes, please answer part b.*

b. When the trees were removed from this property, did you replace any of them with another tree?

- Yes  No

## Activities

13. Which of the following, if any, have occurred on this property in **the past 5 years?**

*Check all that apply.*

- Eliminated or removed invasive plants
- Installed a rain barrel or rain garden
- Installed a new lawn
- Planted shrubs, flowers, or ornamental grasses
- Planted trees
- Pruned trees
- Removed whole trees
- Other (please specify): \_\_\_\_\_
- None of the above

14. Which of the following, if any, have occurred on this property in **the past year?**

*Check all that apply.*

- Composting yard and/or food waste
- Gardening
- Mowing the lawn
- Recreational activities, such as games, sports, or children playing
- Applied fertilizers to lawn
- Applied fertilizers to trees
- Used chemicals to control weeds or insects
- Social activities, such as cookouts or parties
- Watching birds or other wildlife
- Watering lawn, trees, or other plants
- Other (please specify): \_\_\_\_\_
- None of the above

## Attitudes about Trees

32. Please indicate your level of agreement or disagreement with the following statements about the trees on this property.

*Check one box for each item.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
The trees on my property are <b>healthy and attractive</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees interfere with the <b>enjoyment of my property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees on or near my property <b>create more work for me</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have the knowledge to <b>properly care for the trees and shrubs on my property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have the financial resources <b>to properly plant and care for trees on my property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fallen branches, leaves, and <b>seeds from trees make my property look messy</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have the physical ability to <b>properly plant and care for trees on my property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees provide <b>privacy</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees provide <b>energy savings for my home</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees improve the look of <b>my property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees provide <b>shade and cooling</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees reduce <b>noise from the road</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees reduce my <b>stress level</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know who to ask for help about <b>how to properly plant and care for trees on my property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees leave a <b>legacy for future generations</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



29. How interested, or not interested, are you in purchasing urban wood products made from trees removed from your city/town?

Check one box for each item.

	Very Interested	Interested	Moderately Interested	Slightly Interested	Not at all Interested
Wood chips or mulch	<input type="checkbox"/>				
Compost	<input type="checkbox"/>				
Firewood	<input type="checkbox"/>				
Whole logs	<input type="checkbox"/>				
Lumber	<input type="checkbox"/>				
Furniture	<input type="checkbox"/>				
Flooring	<input type="checkbox"/>				
Interior or exterior home products (e.g., doors, cabinets, trim)	<input type="checkbox"/>				
Art or jewelry	<input type="checkbox"/>				
Small items (e.g. kitchen goods)	<input type="checkbox"/>				
Other	<input type="checkbox"/>				
↳ (Please specify):	<input type="text"/>				

30. How important, or not important, is it to you that trees removed in **your city/town** are used as urban wood products?

Very Important	Important	Moderately Important	Of little Importance	Not Important
<input type="checkbox"/>				

31. How important, or not important, is it to you that trees removed from **this property** are used as urban wood products?

Very Important	Important	Moderately Important	Of little Importance	Not Important
<input type="checkbox"/>				

15. Who, if anyone, performs the tree work on this property?

Check all that apply.

- Me
- My husband or wife
- My children
- My parents
- Another family member
- A neighbor
- Landscaping professional(s)
- Tree care professional(s)
- Home Owner's Association or Co-op
- Other (please specify): \_\_\_\_\_
- No one

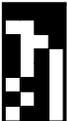
### Your Neighborhood and Community

For the following questions, "neighborhood" includes both the block or street you live on and several blocks or streets in each direction.

16. Which, if any, of the following neighborhood or community activities do you **regularly** do?

Check all that apply.

- Attend a neighborhood or community meeting
- Attend a social event in my neighborhood, such as a cookout or block party
- Go to a nearby park
- Bird watch
- Collect or forage wild plants or mushrooms
- Attend a religious service
- Maintain a plot in a community garden
- Talk/visit with a neighbor
- Walk or jog in my neighborhood
- Bike around my neighborhood
- Other (please specify): \_\_\_\_\_
- None of the above



17. In what, if any, types of groups do you participate in your community?  
*Check all that apply.*
- Garden club
  - Master gardener or master naturalist
  - Parent-Teacher Organization/Parent-Teacher Association
  - Environmental group
  - Religious group
  - Neighborhood association
  - Other (please specify): \_\_\_\_\_
  - None of the above

18. Please rate the following characteristics of the neighborhood and community around this property.  
*Check one box for each item.*

	Very good	Good	Fair	Poor	Very poor
Cleanliness of streets and sidewalks in my neighborhood	<input type="checkbox"/>				
Number of parks and open spaces in my neighborhood	<input type="checkbox"/>				
Quality of parks and open spaces in my neighborhood	<input type="checkbox"/>				
Number of trees in my neighborhood	<input type="checkbox"/>				
Quality of the trees in my neighborhood	<input type="checkbox"/>				
Safety and security in my neighborhood	<input type="checkbox"/>				

27. Have you or someone on your behalf done any of the following to specifically address these risks or concerns in the **past 5 years**?  
*Check all that apply.*
- Pruned trees
  - Removed trees
  - Worked with my neighbors to minimize tree risks from their property
  - Contacted my city/town about trees near the street
  - Contacted utility companies about trees near the wires
  - Treated trees for pests/diseases
  - Other (please specify): \_\_\_\_\_
  - None of the above
  - Not applicable, no trees on my property

**Urban Wood Use**

28. "Urban wood" is wood that comes from a city or town's public or private trees that were removed due to death, disease, or circumstances (NOT due to economic value).

- a. Have you ever purchased or acquired urban wood products (e.g. wood chips, firewood, flooring, small items) from your city/town?
- Yes     No     Don't know
- ↓
- If no or don't know, skip to question 29.*
- ↘ *If yes, please answer b.*

- b. Which, if any, of the following urban wood products did you purchase or acquire?  
*Check all that apply.*
- Wood chips or mulch
  - Compost
  - Firewood
  - Whole logs
  - Lumber
  - Furniture
  - Flooring
  - Interior or exterior home products (e.g. doors, cabinets, trim)
  - Art or jewelry
  - Small items (e.g. kitchen goods)
  - Other (please specify): \_\_\_\_\_
  - None of these

25. How would you **prefer** to get information or advice about the care of your trees/grass/shrubs?

*Check all that apply.*

- Talk to someone in person
- Talk to someone on the phone
- Written materials, such as brochures or other publications
- Read product labels
- From the Internet or social media
- From a lawn and garden center
- Attending a workshop
- Going to a local library
- Other (please specify): \_\_\_\_\_
- I don't want/need information or advice

### Concerns

26. How concerned are you about each of the following on this property?

*Check one box for each item.*

Great concern  
Concern  
Moderate concern  
Of little concern  
No concern  
Not applicable

Tree roots interfering with building foundations, pipes, or septic systems	<input type="checkbox"/>					
Trees or branches breaking and damaging my property	<input type="checkbox"/>					
Trees or branches breaking and causing a power outage	<input type="checkbox"/>					
Trees blocking solar panels installed on my property	<input type="checkbox"/>					
Trees blocking scenic views	<input type="checkbox"/>					
Trees attracting pests (e.g. animals, insects)	<input type="checkbox"/>					
Trees creating a fire hazard	<input type="checkbox"/>					
Trees irritating allergies	<input type="checkbox"/>					
Trees requiring a lot of water	<input type="checkbox"/>					

19. Please indicate your level of agreement with the following statements.

*Check one box for each item.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
Local government services are adequate in the neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in the neighborhood are willing to help one another	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in the neighborhood can be trusted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are many opportunities to meet neighbors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is an active neighborhood group or association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trespassing and/or vandalism are concerns for my property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vacant properties are a concern in my neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Programs and Organizations

20. In some communities, there are groups of residents who volunteer their time to help maintain public green spaces (even though this might not be the main reason for having the group). The volunteer work may involve activities like tree planting, litter removal, habitat restoration, trail construction, stream restoration, or working in a community garden.

a. How familiar are you with groups like these in your city/town?

Extremely familiar    Moderately familiar    Somewhat familiar    Slightly familiar    Not at all familiar

b. Have you participated in a group like this in the **past 5 years**?

Yes     No     Don't know



21. In some areas, there are programs that help property owners cover the expense of planting new trees or caring for existing trees on their property.

a. How familiar are you with programs like these?

Extremely familiar	Moderately familiar	Somewhat familiar	Slightly familiar	Not at all familiar
<input type="checkbox"/>				

b. In the **past 5 years**, have you used a program like this to help you plant new trees or maintain existing trees on this property?

Yes  No  Don't know

### Sources of Information and Assistance

22. How familiar are you with the services provided by the following professionals?

Check one box for each item.

	Extremely familiar	Moderately familiar	Somewhat familiar	Slightly familiar	Not at all familiar
Local government tree care professionals	<input type="checkbox"/>				
Private tree care professionals	<input type="checkbox"/>				
Landscape designers	<input type="checkbox"/>				
Landscape contractors	<input type="checkbox"/>				
Extension agents/educators	<input type="checkbox"/>				
Master gardeners	<input type="checkbox"/>				

23. Who do you trust for providing you with information about caring for or planting trees on your property?

Check all that apply

- A neighbor
- A family member or friend
- Extension agent or educator
- Other state government employee
- Local government employee
- A non-profit organization
- Employee at a lawn and garden center
- Landscaping or tree care professional(s)
- Other (please specify): \_\_\_\_\_
- No one

24. a. In the **past 5 years**, have you talked with anyone or received information/advice about how to maintain this property's landscape?

Yes  No → If no, skip to question 25.

↳ If yes, please answer b, c, and d.

b. What was it about?

Check all that apply.

- Trees
- Gardening
- Lawn care
- Storm water/runoff management
- Ornamental flowers and shrubs
- Weed, pest, or disease control
- Other (please specify): \_\_\_\_\_

c. How did it happen?

Check all that apply.

- Talked to someone in person
- Talked to someone on the phone
- Received a brochure or other written material
- Attended a workshop
- Went to a local library
- Read product labels
- Went to a lawn and garden center
- From the Internet or social media
- Other (please specify): \_\_\_\_\_

d. Who was involved?

Check all that apply.

- A neighbor
- A family member or friend
- Extension agent or educator
- Other state government employee
- Local government employee
- A non-profit organization
- Employee at a lawn and garden center
- Landscaping or tree care professional(s)
- No one. I found the information myself
- Other (please specify): \_\_\_\_\_

