Las Vegas 2022

GoDaddy

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Languages: English

Section Screeners

IntroGD, S1, T2, S2, T1, S3

Page Intro

IntroGD

Thank you for taking the time to participate in this GoDaddy survey. Your opinions and feedback are very important to us. This survey is completely anonymous and your answers will only be used on an aggregate level.

As a thank you for participating, the first 250 participants who complete the survey will get a \$25 USD egift card and the next 50 participants will get a \$10 USD e-gift card.

To begin please click or tap the arrow at the bottom right of your screen.

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Page Screeners

S1

Just to confirm, are you a GoDaddy customer?

- O₁ Yes
- O₂ No

T2 Show if Not GD

Unfortunately this survey is for GoDaddy Customers only. Thank you for your interest.

Status Code: 510

S2

What is your role in respect to this website?

- O_1 I am the owner of the business, organization or idea the website supports
- O ₂ I am an employee or member of the business, organization or idea the website supports

O 3 O 4 O 5	I am an unpaid volunteer who builds and/or maintains the website			
for thi	Show if S2 employee contractor or unpaid volunteer sunately at this time, this survey is for business owners and managers, and the rest of our questions is survey are limited to individuals with those roles. Thank you for your interest.			
S3 In wha	at Zip Code is your business or organization based?			
	Section Main Survey			
Q1, Q2, Q3, Q4, Q5, Q6, Q6a, Q6b, Q6c, Q7, Q8, Q9, Q10, Q11, Q12, Q13, Q14, Q15, Q16, Q17, Q18, Q19, Q20, Q21, Q22, Q23, Q24, Q24a, Q25, Q26, Q27, Q28, Q29, Q30, Q31, Q32, Q33, Q34, Q35				
Page	Main Body			
Q1				
-	choose the following category that best fits the purpose of your website:			
O ₁	Commercial – the site was built to support a business or sell products or services			
O 2	Civic – the site focuses on issues, politics, campaigns, advocacy groups, etc. that affect a larger			
_	group of people			
O $_3$	Community – the site supports social activities such as hobbies, sports teams, entertainment,			
O 4	religious institutions, etc. (but not a for-profit business offering these activities) Personal – the site focuses on me, my family, my interests or my career			
O 5	Other (specify):			
○ 5				
00				
Q2	Show if Q1 NOT Personal			
	of the following best describes the main industry sector your organization operates in? Aerospace			
O ₁	Agriculture			
O ₃	Automotive			
O 4	Chemicals			
O 5	Construction and Trade			
O 6	Education			
O 7	Energy and Utilities			
8 C	Engineering			
O 9	Entertainment and Arts			
\bigcirc 10	Financial Services			

Food and Drink / Restaurant

O 11

O 12	Government and Public Sector		
O ₁₃ Healthcare			
O 14 Hospitality			
O 15	IT / Technology		
O 16	Manufacturing and Industrial		
O 17	Media and Advertising		
O 18	Nonprofit/charity		
O 19	Oil and Gas		
O_{20}	Personal care/personal services		
O_{21}	Paper, Print and Packaging		
O 22	Professional Services and Business Services		
O 23	Real Estate		
O 24	Retail and Consumer		
O_{25}	Telecommunications		
O 26	Transport and Logistics		
O 27	Other (specify):		
Q3			
In tota	l, how many employees are there working at your organization?		
O 1	1 (just myself)		
O_2	2-10		
O 3	11-25		
O 4	26-50		
O 5	51-100		
O ₆ 101-500			
O 7	More than 500		
O 8	Don't know (Exclusive)		
Q4			
Which	type of organization best describes your business?		
O 1	Independent worker (contractor, freelance, gig worker)		
O 2	Sole proprietor or business with no employees		
O ₃	Privately held business with employees		
O 4	Franchised business operation		
O 5	Not-for-profit organization		
O ₆	Publicly traded corporation		
O 7	Don't Know		
Q5			
-	ng about the business or organization your website supports, where do you conduct business or		
service			
O ₁	Only online		
O 2	Only in a physical location		
O 3	Both online and in a physical location		
-			

O 4	Not sure
is mos	inking about the business or organization your website supports, which of the following statements t true about the products and services you offer? Consider a <i>physical product</i> as any item that must de or manufactured. Consider a <i>service</i> as the act of doing work for a client.
Examp	ole: Selling kitchen sinks is a physical product. Installing a sink is a service.
O 1 O 2 O 3 O 4 O 5	We offer both services and physical products. We only offer physical products. We only offer services. We do not offer either products or services. Don't know
Q6a Did yo O 1 O 2 O 3 O 4	At the same time you launched your business Within 6 months of launching your business More than 6 months after launching your business Not sure
Select a 1 2 3 4 5 6 7 8 9 10 11	Prompted you to create a website for your business? all that apply I wanted my customers to be able to transact directly with my business * I wanted to generate leads for my business * I wanted the freedom to establish my brand * I believe a website is important to establish credibility with my customers * I believe a website saves me time and costs for customer support * I wanted a place to communicate updates and announcements about my business * I needed a website to keep up with the competition * Marketplaces like Amazon.com, Ebay.com and Etsy.com cost too much * Marketplaces like Amazon.com, Ebay.com and Etsy.com had too many restrictions * Other reason (specify) Not sure (Exclusive) marked with * are randomized
busine	to launching your website, which, if any, of the following platforms or online marketplaces did your ess sell through? All that apply Amazon

\square 2	Ebay		
□ 3	Etsy		
□ 4	Facebook		
□ 5	Google My Business		
\Box 6	Instagram		
 7	Pinterest		
□ 8	Shopify		
9	Twitter		
□ 10	Another online platform (specify)		
□ 11	None of the above (Exclusive)		
☐ ₁₂	Not sure (Exclusive)		
_ 12			
o=			
Q7			
	s your overall expectation for your business or organization over the next 3 months?		
O_1	More positive		
O_2	More negative		
O_3	No change		
O 4	Not sure		
Q8			
What is	s your overall expectation for Las Vegas' economy over the next 3 months?		
O 1	More positive		
O 2	More negative		
O 3	No change		
O 4	Not sure		
1			
Q9	Show if S2 Owner		
-	vities related to this website provide a source of income for you?		
	Yes, my main source of income		
O 1	Yes, a supplemental source of income		
O 2	No, I do not receive any income related to this website		
O 3	No, I do not receive any income related to this website		
040			
Q10	Show if Q9 Supplemental		
-	business is only for supplemental income, do you hope it turns into full-time employment or a major of income?		
O 1	Yes		
O 2	No		
O ₃	Not sure		
O 4	Prefer not to answer		
4			

lly	Snow ij Q9 Main and supp		
What	is the estimated average gross income (before taxes and withholdings) for employees, including		
yours	elf, in your business?		
O_1	Less than \$1,000 per month, on average		
O 2	\$1,000 to \$2,000 per month, on average		
O 3	\$2,001 to \$4,000 per month, on average		
O 4	\$4,001 to \$7,000 per month, on average		
O 5	More than \$7,000 per month, on average		
O 6	Prefer not to answer (Exclusive)		
Q12			
How r	nany hours per week, on average, do you currently spend on your business?		
O_1	0 hours		
O_2	1-10 hours		
O_3	11-20 hours		
O_4	21-30 hours		
O_5	31-40 hours		
O 6	41-50 hours		
O 7	51 hours or more		
8 C	Not sure		
Q13	Show if Q12 non zero hours		
_			
	u anticipate this amount increasing or decreasing in the next 3 months?		
O 1	Increasing		
O 2	Decreasing		
O 3	Not sure		
Q14			
Do yo	u consider your business as:		
O 1	Your main source of employment		
O 2	A second job or side employment		
O 3			
O 4	Other (specify):		
O 5	Not sure		
Q15			
Were	you employed before you started your business?		
O_1	Yes, I was already employed when I made the decision to leave and start my business		
O_2	Yes, I started my business on the side while still working elsewhere		
O 3	No, I wasn't working at the time because I was laid off or furloughed when I made the decision to start my business		
O 4	No, I wasn't working at the time because I was a student when I made the decision to start my business		

O 5	No, I wasn't working at the time for other reasons (retirement, parenting, disability, etc.) Not sure
Q16	
Which	of the following statements best describes your current employment situation?
O_1	I am fully employed by my business
O_2	I am employed full-time outside of my business
O_3	I am employed part-time outside of my business
O 4	I am employed in multiple part-time jobs/businesses
O 5	Outside of working on my business, I am a homemaker or stay at home parent
O 6	Outside of working on my business, I am retired
O 7	Outside of working on my business, I am a student
8 C	Outside of working on my business, I am unemployed
O 9	Outside of working on my business, I am unable to find work due to a disability
O 10	I did have employment outside of my business, but was laid-off
O 11	Other (specify):
O 12	Prefer not to answer
Q17	
Which	of the following statements best reflects your attitude about your business or organization in the
next y	ear?
O_1	I would like to grow the size of my business or organization in the next year.
O_2	I am content with the size of my business or organization in the next year.
O 3	I would like to reduce the size of my business or organization in the next year.
O 4	I intend to close my business or organization in the next year
O 5	Don't know
Q18	Show if Q17 Grow
What	are the three most important resources you would need to grow right now?
	rank them 1 to 3.
	Access to capital *
	Affordable space *
	Marketing my business *
	Affordable healthcare/benefits *
	Finding employees with necessary skills *
	Getting my business online effectively * Expertise on business planning and management *
	Expertise on website building or technology management *
	Networking with other business owners *
	Licensing/Permits *
	Taxes *
	Other
	None (Exclusive)
-8	Not sure
Levels	marked with * are randomized

You ranked "Other" as one of the 3 most important resource you need to grow, could you tell us a bit more		
	other resource is?	
	nter personally identifying information (e.g., name, email address, phone number, mailing address), as nter may be shared with the sponsor of this research.	
☐ -9 Don	t know	
Dogo Mice	sobucinoss start un	
rage Mici	obusiness start up	
Q20		
•	f your recollection, in what year was your business launched?	
	10, Maximum: 2021	
(e.g. 2018) _		
(8) =		
□ -9 Do n	ot recall	
Q21		
_	you say were the three biggest challenges you faced when you first started the business?	
Please rank th		
	ss to capital *	
Affo	rdable space *	
	keting my business *	
Affo	rdable healthcare/benefits *	
Find	ing employees with necessary skills *	
Gett	ing my business online effectively *	
	ertise on business planning and management *	
	ertise on website building or technology management *	
	vorking with other business owners * nsing/Permits *	
Taxe	<i>Οi</i>	
Othe		
Non		

Q19 Show if Q18 Other

-8

Not sure

Levels marked with * are randomized

Q22 Show if Q21 Other

You ranked "Other" as one of the top 3 biggest challenges you faced, could you tell us a bit more on what this other challenge was?

	do not enter personally identifying information (e.g., name, email address, phone number, mailing address), a. ng you enter may be shared with the sponsor of this research.		
			
			
- 9	Don't know		
Q23			
-	use any of the following social media for marketing/customer generation?		
	all that apply		
	Facebook		
□ ₂	Instagram Pinterest		
□ ₃	Snapchat		
□ 4□ 5	Twitter		
\Box 6	Yelp		
_ , _ 8	Other (specify):		
9	Not sure (Exclusive)		
□ 10	None of the above (Exclusive)		
024			
Q24	this business are started substantially maintains of societal if account and d2		
	this business was started what was the primary source of capital, if any was needed? Loan from bank/credit union		
O ₁ O ₂	Loan from friends and/or family		
O 3	Personal savings		
O 4	Equity investors		
O 5	Debt investors		
O 6	Online start-up campaign (e.g. Kickstarter, etc.)		
O 7	Other (specify):		
8 C	No start-up capital was needed		
O 9	Don't know/not sure		
Q24 a	Show if Q24 personalsavings		
_	what personal savings type did you draw upon for resources to start up your business?		
	all that apply		
	Savings/checking account		
□ 2	Credit card		
□ 3	Home equity		

\Box 4	Stock / investment account
□ 5	Retirement account
□ 6	Other
 7	Don't know (Exclusive)
□ 8	Prefer not to answer (Exclusive)
Q25	Show if Q24 need capital
What w	vas the total amount of capital needed to start your business or organization?
O_1	Less than \$500
O_2	\$500-\$1,000
O 3	\$1,001-\$5,000
O 4	\$5,001-\$10,000
O 5	\$10,001-\$25,000
O 6	\$25,001-\$50,000
O 7	More than \$50,000
O 8	Don't know (Exclusive)
O 9	Prefer not to answer (Exclusive)
Q26	
If you v	vere going to tell your local government how they can help businesses like yours to be successful,
what th	nree things should they consider?
Please r	rank them 1 to 3.
	Affordable space/subsidized rent
	Access to capital
	Marketing of businesses to local residents
	Affordable options for health insurance and other benefits A skilled workforce in the community
	Technical assistance for business development (e.g. getting more customers / vendors,
	developing an online presence, etc.)
	Assistance with digital strategies (e.g. marketing online, developing online
	operations/infrastructure to sell online)
	Opportunities to network with other business owners
	Expedited licensing/permits Expertise on health / safety protocols
	Tax incentives
	Other
	Not sure
- 9	None of the above

Q27 Show if Q26 Other

You ranked "Other" as one of the 3 things you would tell your local government, could you tell us a bit more on what this would be?

anythir	do not enter personally identifying information (e.g., name, email address, phone number, mailing address), as ng you enter may be shared with the sponsor of this research.
_ -9	Don't know
Q28	
Are yo	ou aware of business assistance funding or programs available through your local government?
O_1	Yes
O 2	No
O_3	Not sure
O 4	Prefer not to answer
Q29	Show if Q28 yes
Which	types of local resources has your business benefited from/have you leveraged?
	all that apply
\square 1	Access to capital
\square 2	Networking or mentorship
\square 3	Skills training
\Box 4	Other (specify):
□ 5	Don't Know * (Exclusive)
Levels 1	marked with * are randomized
Page	e COVID19 Experience
Q30	•
•	any, the Coronavirus outbreak (COVID-19) has had a profound impact. Which of the following ways
	affected your business?
	all that apply
	It forced me to shut down my business or organization permanently
	It forced me to shut down my business or organization temporarily
	It forced me to shift activity I usually conduct offline to an online mode
☐ ₄	It made me expand what I was already doing online
1 5	It forced me to lay off or furlough some or all of my employees
☐ 6	It led to a reduction in my business revenues
D 7	It led to an increase in my business revenues
□ ₈	Other (specify):
_ ₉	It has not affected my business or organization (Exclusive)

☐ ₁₀	Not sure	(Exclusive)		
Q31				
	=	, has a website made for your business or organization during COVID-19?		
	ll that apply It helped me s	hift more business or activities online		
	=	ommunicate changes to customers or participants		
	•	o market my business or organization to new people		
_ ₃	-	tart a new business without having to rent space or buy equipment right away		
\square 5	It helped in ot	her ways (specify):		
□ 6		any difference (Exclusive)		
1 7	Not sure	(Exclusive)		
Q32				
-		ollowing Federal funding?		
	ll that apply Paycheck Prot	tection Program (PPP)		
	-	nue Operators Grant (SVOG)		
		rry Disaster Load (EIDL)		
☐ ₄	Restaurant Re	vitalization Fund		
□ 5	SBA debt relie			
\Box 6		r):		
1 7	☐ 7 No I did not apply for any funding (Exclusive)			
022	Cl. (COOO.T.			
Q33	Show if Q32 Fund	-		
	select each Fed ll that apply	eral program from which you received funding.		
		ection Program (PPP) (Show if Q32 1 Paycheck Protec)		
	•	uue Operators Grant (SVOG) (Show if Q32 2 Shuttered Venue)		
		iry Disaster Load (EIDL) (Show if Q32 3 Economic Injury)		
□ 4	Restaurant Re	vitalization Fund (Show if Q32 4 Restaurant Revi)		
□ 5	SBA debt relief (Show if Q32 5 SBA debt relief)			
□ 6	< <q32.specify< td=""><td></td></q32.specify<>			
1 7	None of the ab	oove (Exclusive)		
024				
Q34		recommendation recognize against a second stable COVID 10 Covid and a second stable and second stable		
=	ur business or o iment ?	rganization receive assistance related to COVID-19 from your state and/or local		
_	ll that apply			
		nformation from them about federal programs		
		elp from them to apply for federal programs		
\Box 3		tate or local grants or loans		
□ 4	I did receive state or local tax breaks			

□ 5 □ 6 □ 7	I did receive other star I did not receive any s Not sure (Exclusion	tate or local assistance
Page	City/State specifi	c questions
	ch of the following geograph Ithat apply My neighborhood Las Vegas area State of Nevada United States International Don't know	raphical areas do your <u>customers</u> reside?
	Sectio	n Firmographics and Demographics D1, D2, D3, D4, D5, D6, D7, D8
Page	Demographics	
D1 We are with: O 1 O 2 O 3	interested in knowing male Female Other	more about our customers. Please tell us which gender you most identify
O 4	Prefer not to answer	
	of the following describ Il that apply Woman-owned Black-owned Latino-owned Foreign born-owned Veteran-owned None of the above Prefer not to answer	es this business? (Exclusive) (Exclusive)

D3		
With which race do you most identify?		
O 1	White	
O_2	Black or African American	
O 3	Asian or Pacific Islander	
O 4	American Indian or Alaska Native	
O 5	Other or multi-racial	
O 6	Prefer not to answer	
D4		
Are you of Hispanic origin or descent, such as Mexican, Puerto Rican, Cuban, or some other Spanish		
background?		
O 1	Yes	
O 2	No	
O 3	Prefer not to answer	
J		
D5		
	ou born in the United States or in another country?	
O ₁	United States	
O 2	Another country	
O 3	Prefer not to answer	
O 3		
D6		
D6		
	the last year of school or degree that you completed?	
O 1	Less than high school High school graduate (Crade 12 or CED cortificate)	
O 2	High school graduate (Grade 12 or GED certificate)	
O 3	Technical, trade, or vocational school AFTER high school	
O 4	Some college, no 4-year degree (including Associate's Degree)	
O 5	College graduate (B.S., B.A., or other 4-year degree) Graduate degree (Master's Degree or Ph.D.; law or medical school)	
O 6	Prefer not to answer	
O 7	Prefer not to answer	
D7		
	of the following ranges contains your age?	
O_1	Under 20	
O 2	20-29	
O 3	30-39	
O 4	40-49	
O 5	50-59	
O 6	60-69	
O 7	70+	
\bigcirc \circ	Prefer not to answer	

D8	
Which l	pest describes your living situation?
O_1	I live in a home I own for which there is no mortgage
O 2	I live in a home I own for which I maintain a mortgage
O 3	I live in a home or apartment for which I pay rent
O 4	I live in a home with no rent expectation
O 5	Prefer not to answer
	Section End of survey
	Incentive, ContactEmail, EndGD

Page Incentives

Incentive

As a thank you for participating in the survey, the first 250 GoDaddy Customers who complete the survey will receive a \$25 USD e-gift card, and the next 50 customers who complete will receive a \$10 USD e-gift card.

If you are one of the first 300 people to complete, would you like to receive this gift card? \bigcirc_1 Yes \bigcirc_2 No \bigcirc_{-8} Not interested

ContactEmail Show if Incentive yes

In order to send you a gift card, we need the email address where you would like to receive it.

Note: Your email address will not be used for marketing or any activities other than sending you a gift card. You will only be contacted IF you are one of the first 300.

 \square ₋₈ I do not want to give my email and refuse the incentive

Page End Page

EndGD

Thank you! Those are all the questions that we have. We appreciate your time today.

Status Code: -1