



**CHICAGO
REGION
TREES
INITIATIVE**

Our Trees.
Our Communities.
Our Future.

Chicago Region Trees Initiative 2016 Urban Forest Management Survey

Hello! The Chicago Region Trees Initiative, a collaboration of more than 150 area institutions, municipalities, governing bodies, and industries with a common goal of improving the health, diversity, and sustainability of the urban forest, needs your help! In order to continue delivering targeted attention to the biggest urban forestry challenges in the region, we need professionals in the seven county Chicago Region to share their experiences.

Please complete the questions in this survey that are relevant to you – it will take ~15 minutes – and **return it by January 31, 2017** via SurveyMonkey.com, email at mcustic@mortonarb.org, or mail at CRTI C/O The Morton Arboretum, 4100 Illinois Route 53, Lisle, IL 60532.

We are seeking input from a broad mix of professionals and have picked the term, “organization” to represent your employer, be it a municipality, commercial group, non-profit, etc. You may skip questions that do not apply to your work.

<<< START QUESTIONNAIRE HERE >>>

PART A: Administrative and Program Profile

1) What is your organization’s name?

2) Which of the following best defines your organization?

Check all that apply.

- Municipality
- County
- Park District
- Forest Preserve or Natural Area
- Commercial (working on public property)
- Commercial (working on private property)
- Institution (museums, hospitals, courthouses)
- Other: _____

3) How long has your organization had:

	Do not have	1-5 yrs	6-10 yrs	>10 yrs
A tree management plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tree preservation ordinances?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certified arborist(s) on staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dedicated forestry staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A tree inventory?	<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"/>

4) Does your organization have a tree management plan that: (select all that apply)

- References a tree inventory?
- Provides guidelines for tree removals?
- Identifies canopy goals?
- Identifies species diversity goals?
- Addresses age diversity goals?
- Addresses inventory management?
- Identifies staff hiring goals?
- Addresses staff training?
- Addresses tree planting?
- Addresses tree establishment?
- Addresses site suitability criteria?
- Addresses tree maintenance criteria?
- Addresses risk assessment?
- Addresses tree protection and preservation?
- Plans for tree health monitoring?
- Addresses wood utilization?
- Addresses budget (capital and operating - equipment, staff, trees, etc.)
- Other? _____

5) In 2016, what was the approximate total

- Organization budget \$ _____
- Green infrastructure budget (streambank planting, rain gardens, bioswales, trees, etc.) \$ _____
- Forestry budget (i.e., wages, equipment, supplies, plant materials, contracts) \$ _____



Chicago Region Trees Initiative 2016 Urban Forest Management Survey



6) Does your organization provide any of the following technical assistance?

	Private property	Public property	No
Site visits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newsletters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational articles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational talks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tree planting or care training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tree planting or care tips via door hangers, flyers, magnets, etc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7) Tree Inventory (Yes, No, Unsure)

	Y	N	U
Does your organization have a tree inventory/inventories?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you answered yes to Question 7:

8) How often is your inventory updated? (check one)

Continuously / as needed	<input type="checkbox"/>
Annually	<input type="checkbox"/>
Every other year	<input type="checkbox"/>
Every three to five years	<input type="checkbox"/>
Less often than every five years	<input type="checkbox"/>
Has not been updated since it was made	<input type="checkbox"/>

9) If you answered yes to Question 7:

	Y	N	U
Is the inventory current?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the inventory computerized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you willing to share your inventory with CRTI?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the inventory include public trees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the inventory include private trees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the inventory reflect all of the trees on your property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10) Natural Areas

What percentage of the land you own is natural area?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0%	1-25%	26-50%	51-75%	76-99%	100%

Y N U

11) Do you actively manage natural are-

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

12) Does your organization have an ordinance or policy that addresses any of the following forestry issues on private or public land?

	Private property	Public property	No
approved and/or prohibited tree species for planting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prohibiting topping of trees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tree preservation, care, or planting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
licensing/registration of tree care companies or contractors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tree preservation, protection, or replacement of trees or green space with respect to planning, zoning and development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tree health monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
insect/disease control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
street trees in new subdivisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
identifying staff member(s) responsible for trees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
planting of trees by residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
removal of trees to control disease or reduce safety hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incentives for removal of trees to control disease or reduce safety hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other tree ordinance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Describe: _____			



Chicago Region Trees Initiative 2016 Urban Forest Management Survey

PART B: Tree Risk Assessment and Management

13) How many times in the past 10 years has your organization had major storm damage to trees?

- 0
 1-3
 4-6
 > 6
 other

14) Is your organization an active member of the Illinois Public Works Mutual Aid Network?

- Y
 N
 U

15) Does your organization charge a permit fee for tree removals or inspection services?

- Y
 N
 U

16) On what cycle does your organization currently prune trees?

- No cycle
 1-2 years
 3-6 years
 >10 years
 Other: _____

17) What is the tree pruning cycle your organization would adopt given sufficient time and manpower?

- No cycle
 1-2 years
 3-6 years
 >10 years
 Other: _____

18) How many ash trees in your community: public private

have been removed in the last 10 years? _____ _____
 were removed in 2016? _____ _____
 are standing dead? _____ _____
 are being treated? _____ _____

PART C: Tree Planting

19) How many trees did your organization plant in 2016?

Number of trees planted _____

20) What percentage of the trees planted in the following locations by your organization are oaks? %

Parks _____
 Parkways and medians _____
 Natural areas _____
 Private residential property _____
 Institutional property _____

21) Rate the importance of the following criteria for selecting a tree species (1=very important, 3=not important).

Criteria	1	2	3
Mature height/ spread	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ornamental appeal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Required maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerance of site conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wildlife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diversity of community trees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disease tolerance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Usefulness as green infrastructure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resilience to extreme weather events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____			

22) From which nurseries did you order trees in 2016?

- Member of Suburban Tree Consortium
 Did you order trees from outside the Consortium?

Y N U

23) Are you happy with the quality of trees you have received?

Y N U

Other: _____



Chicago Region Trees Initiative 2016 Urban Forest Management Survey



Y N U

PART E: Tree Removal

24) Does your municipality allow residents to plant trees on municipal property, including easements? Y N U

- Yes, if they obtain a permit first
- Other: _____

25) Does your organization provide financial or other assistance for tree planting on private property? Y N U

- Other: _____

26) Does your organization have a cost share program for tree planting on public property? Y N U

- Other: _____

27) Does your organization provide technical assistance for tree planting on private property? Y N U

- Other: _____

On public land On private land

30) Does your organization Remove trees? On public land On private land

Hire contractors to remove trees?

Inspect trees for pests/disease?

Conduct tree risk assessments?

Process removed trees into forest products (firewood, mulch, lumber, etc.)?

Describe product: _____

31) How many trees were removed in 2016? _____

32) What percentage of those trees were invasive, buckthorn (*Rhamnus*)? _____%

33) What was the average DBH of trees removed in 2016?

PART D: Maintenance of Trees

28) What tree maintenance activities were conducted regularly in your organization and by whom? (E = Employees, C = Contractors, V = Volunteers, N = None)? (check all that apply)

Maintenance Activity	E	C	V	N
Planting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pruning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Watering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mulching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fertilizing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspection, tree health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspection, hazard trees	<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"/>

29) Does your program conduct regular maintenance of trees on private property, including easements? Y N U

- Other: _____

Y N U

34) Did you have to pay to dispose of removed trees? Y N U

- Other: _____

35) If forest products were created from removed trees, how much revenue was generated (if any) from the sale of these products? \$ _____

36) If forest products were created from removed trees, who were the trees sold or given to?

- Residents
- Municipalities
- Contractors
- Other: _____

37) Does your organization have a wood/brush/landscape waste disposal site? Check all that apply.

- Yes, for use by residents
- Yes, for use by my organization's employees
- No
- Other: _____



Chicago Region Trees Initiative 2016 Urban Forest Management Survey



PART F: Community and Contact Information

38) How are staff educated about forestry/arboriculture?
 Check all that apply.

	Director	Field staff
ISA certification	<input type="checkbox"/>	<input type="checkbox"/>
Four year degree (related to forestry)	<input type="checkbox"/>	<input type="checkbox"/>
Two year degree (related to forestry)	<input type="checkbox"/>	<input type="checkbox"/>
Workshops	<input type="checkbox"/>	<input type="checkbox"/>
Webinars	<input type="checkbox"/>	<input type="checkbox"/>
Printed materials (ANSI standards, BMPs)	<input type="checkbox"/>	<input type="checkbox"/>
In-house training	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

39) Rank the following resources needed to improve your forestry program. 1=most needed, 9=least needed

Additional staff	_____
Trees	_____
Financial aid/grants	_____
Staff training/ education resources	_____
Community education materials	_____
Education resources for elected officials	_____
Education resources for administrative staff	_____
Additional operating funds	_____
N/A	_____
Other: _____	_____

Program Contact Person: _____

Years in position (years): _____

Years of Professional Experience: _____

Title: _____ Department: _____

Address: _____

City: _____

Zip: _____ County: _____

Phone: (_____) _____ Email: _____

Contact name, email, and phone number for tree board or tree commission representative:

Please provide any final comments you may have that you feel will help us understand your tree activities.

Thank you for completing this survey!
 Your responses will help us develop programs to fill needs and overcome challenges.
 Please return the survey by January 31, 2017.