



# Synar Survey



<b>Survey Date:</b>		<b>Survey Number:</b>	
<b>Time of Survey:</b>	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		
<b>Investigative Aide</b>	<b>Investigative Aide ID:</b>		
	<b>Age:</b>	<b>Date of Birth:</b>	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Agent Assigned</b>	<b>Name/ID:</b>		
<b>Licensee/Location Information:</b>		<b>Licensee/Location Name or address</b>	
<b>Outlet ID:</b> <b>License Number:</b> <b>Name:</b> <b>DBA:</b> <b>Address:</b> <b>City:</b> <b>State:</b> <b>Zip Code:</b>		<b>Correction:</b>	
<b>Type of Sales Transaction:</b> <input type="checkbox"/> Over the Counter <input type="checkbox"/> Vending Machine <b>Is licensed premise eligible?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (Unsatisfactory condition) <input type="checkbox"/> (I1) Out of business			
<b>If no, check one of the following reasons:</b>			
<input type="checkbox"/> (I2) Does not sell tobacco products		<input type="checkbox"/> (I7) Wholesale only/carton sale only	
<input type="checkbox"/> (I3) Inaccessible by youth		<input type="checkbox"/> (I8) Vending machine broken	
<input type="checkbox"/> (I4) Private club or private residence		<input type="checkbox"/> (I9) Duplicate	
<input type="checkbox"/> (I5) Temporary closure		<input type="checkbox"/> (I10) Other ineligibility (specify):	
<input type="checkbox"/> (I6) Un-locatable			
<b>If license premise is eligible, was the survey completed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>If no, check one of the following reasons:</b>			
<input type="checkbox"/> (N1) In operation, but closed at time of visit		<input type="checkbox"/> (N6) Drive thru only, but youth inspector has no driver license	
<input type="checkbox"/> (N2) Unsafe to access		<input type="checkbox"/> (N7) Tobacco out of stock	
<input type="checkbox"/> (N3) Presence of police		<input type="checkbox"/> (N8) Run out of time	
<input type="checkbox"/> (N4) Youth inspector knows salesperson		<input type="checkbox"/> (N9) Other non-completion (specify):	
<input type="checkbox"/> (N5) Moved to new location but not inspected			
<b>If survey was completed, was buy attempt successful?</b> <input type="checkbox"/> Yes (POS) <input type="checkbox"/> No (NEG)			
<b>Notes:</b>			
<b>Investigative Aide Initial:</b> _____ <b>Agent Signature:</b> _____			

Federally Mandated Form