



Plastics Technology Top Shops 2026

Welcome to *Plastic Technology's* Top Shops Benchmarking Survey for injection molding. By completing this survey, you will receive a benchmarking report customized for your facility and have opportunities to earn top shop status as well as special recognition. This survey pertains to injection molding, specifically. **Proceed only if your facility performs injection molding.**

To make the process easier and more efficient, the survey is divided into two sections:

- Core Survey: A set of essential questions that most participants have answered in previous years.
- Optional Modules: Additional sections organized by specific areas of interest. You can choose the modules that are most relevant to your business. Once you select a module, we encourage you to complete all the questions within it for the most comprehensive results.

Now for your part:

1. Complete the core survey by March 31, 2026 to:

- Receive a customized benchmarking report.
- Earn Top Shops status.
- Be recognized as an honoree.

2. Opt-in to up to 4 modules of additional benchmarking questions after completing the core survey.

FAQ's on answering Q's

- If your company has multiple locations, respond for the location(s) you know best.
- If your company is a captive facility, answer based on the metrics your facility uses for internal reporting.

Tips

- You may stop and start the survey using the same device as many times as you like until you select 'Submit Responses' on the final page.
- We encourage you to review the list of questions for data you will need to complete the core survey. You may download a PDF of the core survey by [clicking here](#) before entering answers online.

If you have questions, please contact Mike Shirk, Senior Market Research Analyst, Gardner Intelligence, at mshirk@gardner.media.

* 1. Which primary processes does your facility perform? *Select ALL that apply.*

- ☐ Injection molding
- ☐ Blow molding
- ☐ Thermoforming
- ☐ Extrusion (any type)
- ☐ None of these



2. Of the primary processes performed, which ONE does your facility perform most? *Select ONE only.*

- ☐ Injection molding
- ☐ Blow molding
- ☐ Thermoforming
- ☐ Extrusion (any type)



Company & Contact Information

3. To receive a custom report of your facility's results, please fully complete the survey and provide your email address:

4. For the opportunity to be part of the Top Shops Honors Program, please provide the following information:

Your Name:

Job Title/Position:

Company Name:

Address:

City/Town:

State/Province:

ZIP/Postal Code:

Country:

Company Website:

**Company Phone
Number:**



Section 1: Profile Information

This first section of the survey includes questions pertaining to the general characteristics that help describe your facility. You may need to refer to company data to answer some of the following questions.

Please read the instructions at each question for the accepted format for responses. If you receive an error message and your format is correct, your value is likely an exception outside of the reasonable range, and won't be accepted.

5. Approximately how many **individual pieces** did your facility mold in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

6. Approximately how many **active tools** did your facility have in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

7. How many **injection molding machines** are in your facility?

Please enter a whole number only; no decimals, commas, or other symbols.

8. What is the **average age** (in years) of the injection molding machines in your facility?

Please enter a whole number only; no decimals, commas, or other symbols.



Profile Information

9. Which materials does your facility process? *Select ALL that apply.*

- | | |
|---|---|
| <input type="checkbox"/> Polyolefins | <input type="checkbox"/> Liquid Silicone Rubber |
| <input type="checkbox"/> PET | <input type="checkbox"/> Thermoplastic Elastomers |
| <input type="checkbox"/> PVC | <input type="checkbox"/> Bioplastics |
| <input type="checkbox"/> PUR | <input type="checkbox"/> Recycled Plastics |
| <input type="checkbox"/> Engineering Thermoplastics | <input type="checkbox"/> None of these |

10. How many **total pounds of resin** did your facility process in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.



Profile Information

11. Which of the following **processes/services** did your facility perform in 2025? *Select ALL that apply.*

- | | |
|--|---|
| <input type="checkbox"/> Assembly | <input type="checkbox"/> Additive manufacturing |
| <input type="checkbox"/> Decoration (hot stamping, pad printing) | <input type="checkbox"/> Contract manufacturing |
| <input type="checkbox"/> Plating | <input type="checkbox"/> Inventory stocking/logistics |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Product design |
| <input type="checkbox"/> Welding/joining | <input type="checkbox"/> Product testing |
| <input type="checkbox"/> CNC machining | <input type="checkbox"/> Shipping/packaging/labeling |
| <input type="checkbox"/> Annealing | |
| <input type="checkbox"/> Other (please specify) | |

- ☐ None of these



Profile Information

12. Which of the following industries does your facility serve? *Select ALL that apply.*

- | | |
|---|---|
| <input type="checkbox"/> Aerospace, commercial | <input type="checkbox"/> Industrial Motors/Hydraulics/Mechanical Components |
| <input type="checkbox"/> Aerospace, general aviation | <input type="checkbox"/> Machinery/Industrial Equipment |
| <input type="checkbox"/> Appliances | <input type="checkbox"/> Marine/Ship & Boat Building |
| <input type="checkbox"/> Architectural/Infrastructure/Construction Components | <input type="checkbox"/> Mass Transit |
| <input type="checkbox"/> Automotive | <input type="checkbox"/> Medical/Dental |
| <input type="checkbox"/> Consumer Goods | <input type="checkbox"/> Offroad/Construction/Agricultural Machinery |
| <input type="checkbox"/> Defense/Government | <input type="checkbox"/> Oil/Gas Field & Mining Machinery |
| <input type="checkbox"/> Electronics/Computers | <input type="checkbox"/> Packaging |
| <input type="checkbox"/> Energy Storage (pressure vessels) | <input type="checkbox"/> Power Generation (turbines, batteries) |
| <input type="checkbox"/> Firearms/Ammunition | <input type="checkbox"/> Pumps, Valves & Plumbing |
| <input type="checkbox"/> Forming & Fabricating (non-automotive) | <input type="checkbox"/> Sporting Goods |
| <input type="checkbox"/> Furniture Manufacturing | <input type="checkbox"/> Wind Energy |
| <input type="checkbox"/> Hardware/Fasteners | <input type="checkbox"/> Wire Goods/Pipes |
| <input type="checkbox"/> Other (please specify) | |

13. Which descriptor below applies to your facility? *Select ONE only.*

- ☐ Captive (component of a larger company)
- ☐ Custom/Contract (independent)



Section 2: Injection Molding

This section of the survey includes questions pertaining to practices directly involved in injection molding.

Please read the instructions at each question for the accepted format for responses. If you receive an error message and your format is correct, your value is likely an exception outside of the reasonable range, and won't be accepted.

14. What ONE type of injection molding machine does your facility use most? *Select ONE only.*

- ☐ Horizontal molding
- ☐ Vertical molding

15. Please indicate the percentage of your facility's injection molding machines that are each type. Your percentages should add up to 100.

Enter each percent as a whole number. Percent signs, decimals and non-numeric characters are not accepted.

Hydraulic

All-electric

Hybrid

Other

16. What is the **clamp force range** considering all of your facility's injection molding machines? *Select ALL that apply.*

- ☐ 0 - 100 tons
- ☐ 101 - 500 tons
- ☐ 501 - 1000 tons
- ☐ Over 1000 tons

17. Does your facility have an **in-house tool room**?

- ☐ Yes
- ☐ No



Injection Molding

18. What purpose does your in-house tool room serve? *Select ALL that apply.*

- ☐ Mold building
- ☐ Mold repair
- ☐ Other (please specify)

19. What percentage of your facility's molds used **hot runner technology** in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

20. Does your facility use **automation**?

- ☐ Yes
- ☐ No

21. Which types of **inspection equipment** does your facility use? *Select ALL that apply.*

- | | |
|--|--|
| <input type="checkbox"/> CMM in quality department | <input type="checkbox"/> Portable measuring arms |
| <input type="checkbox"/> Laser trackers | <input type="checkbox"/> Vision systems |
| <input type="checkbox"/> Microscopes | <input type="checkbox"/> None of these |
| <input type="checkbox"/> Plant floor CMMs | |

22. Which types of **software** does your shop use? *Select ALL that apply.*

- | | |
|---|--|
| <input type="checkbox"/> CAD systems—2D | <input type="checkbox"/> PLM software |
| <input type="checkbox"/> CAD systems—3D | <input type="checkbox"/> Process monitoring |
| <input type="checkbox"/> CAM programming software | <input type="checkbox"/> Production monitoring |
| <input type="checkbox"/> CMM programming software | <input type="checkbox"/> SPC/quality management software |
| <input type="checkbox"/> ERP/MRP software | <input type="checkbox"/> Toolpath simulation/verification software |
| <input type="checkbox"/> Job-estimating software | <input type="checkbox"/> None of these |
| <input type="checkbox"/> Mold flow analysis | |



Injection Molding

23. How many **hours per week** was your facility open for production during 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

24. What was your facility's average **machine usage** in 2025, defined as the number of hours machines are in production in a 24 hour day.

Your answer should be between 1 and 24. You may enter a decimal, but no other signs or symbols.

Example: For 8 hours, you would enter 8. For 8 1/2 hours, you would enter 8.5.

25. What was your facility's average **capacity utilization** in 2025?

There is no single formula that fits how every facility figures **capacity utilization**. For this question, please think about what you consider to be at full capacity for your facility. Then enter as a percentage, the degree to which your facility's capacity was typically in use relative to being at full capacity in 2025.

You may enter a decimal, but no other signs or symbols.

Example: if your facility was typically using capacity that represented 85% of full capacity in 2025, meaning your facility typically had 15% capacity available, you would enter 85 for capacity utilization.



Injection Molding

26. What was your facility's average **setup/startup time** in 2025?

*Please respond in terms of **minutes** and enter a whole number only; no decimals, commas, or other symbols.*

27. What was your facility's average **number of changeovers per day** in 2025?

You may enter a decimal, but no other signs or symbols.

Example: For 6 changeovers you would enter 6. For 6 1/2 changeovers you would enter 6.5.

28. What was your facility's average **mold-change time** in 2025?

*Please respond in terms of **minutes** and enter a whole number only; no decimals, commas, or other symbols.*

29. What was your facility's **finished product first-pass quality yield** in 2025, defined as the percentage of products passing inspection on the first attempt?

Enter your number without a % sign. You may enter a decimal, but no other signs or symbols.

Example: For 80%, you would enter 80. For 80.5%, you would enter 80.5

30. What was your facility's **scrap rate** in 2025, defined as the number of parts scrapped internally as a percentage of total parts? Enter a number between 0 and 100 without a % sign.

You may enter a decimal, but no other signs or symbols.

Example: If you molded 1000 parts and 83 were scrapped, you would enter 8.3.

31. Did your facility process in-house scrap material in 2025?

☐ Yes

☐ No



Injection Molding

32. What percentage of your facility's scrap material is **reused or diverted from landfills**?

Enter your number without a % sign.

You may enter a decimal, but no other signs or symbols.

Example: For 80% you would enter 80. for 80.5% you would enter 80.5.

33. What was your facility's **order lead time** in 2025, defined as the average number of days from receipt of order to delivery to customer.

Please enter a whole number only; no decimals, commas, or other symbols.

34. What was your facility's **on-time delivery rate** in 2025, defined as the number of shipments made on or before scheduled ship date as a percentage of the total number of shipments. Enter your number without a % sign.

You may enter a decimal, but no other signs or symbols.

Example: For 80%, you would enter 80. For 80.5%, you would enter 80.5.



Section 3: Business Strategy & Performance

This section of the survey includes questions pertaining to financial, operational and customer information.

Please read the instructions at each question for the accepted format for responses. If you receive an error message and your format is correct, your value is likely an exception outside of the reasonable range, and won't be accepted.

35. Please provide your plant's **total revenue** for 2025 in US dollars. Providing your plant's revenue confidentially enables us to perform useful calculations on your behalf.

Please enter a whole number only; no decimals, commas, or other symbols.

36. Please provide your plant's 2025 **gross sales per machine** in US dollars.

Round to the nearest dollar and enter without any signs or symbols.

Example: If your gross sales were \$5000 and you have 5 machines, you would enter 1000.

37. Please provide your plant's 2025 **gross sales per employee** in US dollars.

Round to the nearest dollar and enter without any signs or symbols.

Example: If your gross sales were \$5000 and you have 20 employees, you would enter 250.

38. Please provide your plant's **percent change in annual sales** from 2024 to 2025 using the following formula. Round to the nearest whole number, using a minus sign if necessary.

Formula = $[(2025 \text{ gross sales} - 2024 \text{ gross sales}) / 2024 \text{ gross sales}] * 100$

Example: If your 2024 sales were \$4000 and your 2025 sales were \$5000, you would enter 25.

39. Were any **capital investments** made in your facility in 2025?

☐ Yes

☐ No

☐ Not sure



Business Strategy & Performance

40. How much did your facility spend (in US dollars) on **capital equipment** in 2025?

Round to the nearest dollar and enter without any signs or symbols.

41. Please provide your plant's 2025 **capital equipment expenditure as a percentage of gross sales**. Round to the nearest whole number and enter without a % sign.

Formula = $[(2025 \text{ cap equip exp} / 2025 \text{ gross sales}) * 100]$

Example: If your capital equipment expenditure was \$500 and your gross sales were \$5000, you would enter 10.

42. Please provide your plant's 2025 **overall profit margin percentage**, defined as your plant's net income (after tax) relative to gross sales, rounded to the nearest whole number. Include a minus sign if your number is negative.

Formula = $[(2025 \text{ net income} / 2025 \text{ gross sales}) * 100]$

Example: If your 2025 net income was negative \$300 and your gross sales were \$5000, you would enter -6.



Business Strategy & Performance

43. What was your **customer retention rate** for 2025? This is the number of customers in 2025 who were also customers in 2024, as a percentage of your 2024 total customer base. Enter your number without a % sign.

Example: If you had 50 customers in 2025 who were also customers in 2024, and a total of 60 customers in 2024, your customer retention rate would be 83%, and you would enter 83. You may enter decimals but no other signs or symbols.

44. Which of the following sales/marketing tools does your facility use? *Select ALL that apply.*

- | | |
|---|--|
| <input type="checkbox"/> Advertising - online | <input type="checkbox"/> Industry awards/recognition |
| <input type="checkbox"/> Advertising - print (e.g. magazines) | <input type="checkbox"/> Online keyword advertising (e.g. Google) |
| <input type="checkbox"/> Blogs | <input type="checkbox"/> Online videos |
| <input type="checkbox"/> Brochures/catalogs | <input type="checkbox"/> Open house |
| <input type="checkbox"/> Company website | <input type="checkbox"/> Sales personnel |
| <input type="checkbox"/> Customer tours of your shop | <input type="checkbox"/> Social media (Facebook, Twitter, YouTube, etc.) |
| <input type="checkbox"/> Directory listing - online | <input type="checkbox"/> Trade shows/events |
| <input type="checkbox"/> Directory listing - print | <input type="checkbox"/> None of these |
| <input type="checkbox"/> Email promotions | |

45. Briefly explain one new technology, equipment strategy or strategic initiative that has been most influential in contributing to the overall success of your business in recent years. *Please be specific.*



Section 4: Human Resources

The final section of the core survey pertains to employees, training, and safety.

46. Which human resource practices/programs did your shop use in 2025? *Select ALL that apply.*

- | | |
|--|--|
| <input type="checkbox"/> 401(k) plan | <input type="checkbox"/> Formal safety/health program |
| <input type="checkbox"/> 401(k) matching | <input type="checkbox"/> Leader/supervisor development |
| <input type="checkbox"/> Annual review and raise program | <input type="checkbox"/> Paid medical benefits |
| <input type="checkbox"/> Apprenticeship program | <input type="checkbox"/> Paid holiday/vacation |
| <input type="checkbox"/> Bonus plan | <input type="checkbox"/> Profit- or revenue-sharing plan |
| <input type="checkbox"/> Education reimbursements | <input type="checkbox"/> Teaming/team-building practices |
| <input type="checkbox"/> Employee ownership options (ESOP) | |
| <input type="checkbox"/> Formal employee training programs | |
| <input type="checkbox"/> Other (please specify) | |

- ☐ No HR programs in place

47. How many **total people** did your facility employ in 2025 at the location(s) to which your answers apply?

Please enter a whole number only; no decimals, commas or other symbols.

48. What was your plant's annual **labor turnover rate of plant floor employees** in 2025?

This is the number of voluntary plus involuntary separations of plant floor employees as a percentage of the total usual number of plant floor staff. Enter your number between 0 and 100 without a % sign.

You may enter a decimal, but no other signs or symbols.

Example: If 6 plant floor employees left in 2025 and your usual plant floor staff totals 30, you would enter 20.

49. What was the approximate average **hourly wage rate** in US dollars, without overtime, for non-management plant floor employees in 2025?

You may enter a decimal, but no other signs or symbols.

50. On average, about how many **hours of operations training** did each hourly paid, non-management plant floor employee receive in 2025? *Select ONE only.*

- ☐ Less than 8 hours
- ☐ 8-20 hours
- ☐ 21-40 hours
- ☐ More than 40 hours



Thank you for completing the core questions!

Next are opportunities for additional benchmarking that can be just as useful as the core. The choice to take advantage is yours.

There are 4 categories of questions that we call modules: profile, injection molding, business strategy & performance, and human resources. Some modules may be of more interest to you than others. If you are, for example, re-examining your shop's business strategies, you may want to complete that module. Any questions you do answer will be included in your custom benchmarking report.

If you choose to opt out of all modules, you will be taken to the end of the survey to submit your responses.

* 51. Please select the additional modules in which you'd like to participate. Choose as many as you like **or** select the last option to proceed to a screen where you submit your core responses.

- ☐ Profile (5 questions)
- ☐ Injection Molding (13 questions)
- ☐ Business Strategy & Performance (17 questions)
- ☐ Human Resources (10 questions)
- ☐ I cannot benefit from additional benchmarking



Profile Information

52. How many **different resins** (not grades) did your facility process in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

53. Which of the following, if any, describe your company? *Select ALL that apply.*

- ☐ Family owned
- ☐ Minority owned
- ☐ Veteran owned
- ☐ Woman owned
- ☐ None of these

54. Of which trade associations was your facility, or were your employees, a member in 2025?

Select ALL that apply.

- ☐ PLASTICS
- ☐ MAPP
- ☐ SPE
- ☐ Other (please specify)

55. As of the end of 2025, about how many years had your facility been in business?

Please enter a whole number only; no decimals, commas or other symbols.

56. What is the total square footage of your entire building? Enter your best estimate if you do not have the measurements handy.

Please enter a whole number only; no decimals, commas or other symbols.



Injection Molding

57. Which types of **dryers** were used on a regular basis at your facility in 2025? *Select all that apply.*

- | | |
|---|--|
| <input type="checkbox"/> Hot air dryer | <input type="checkbox"/> Honeycomb dryer |
| <input type="checkbox"/> Compressed air dryer | <input type="checkbox"/> Hopper dryer |
| <input type="checkbox"/> Dehumidifying dryer | <input type="checkbox"/> Vacuum dryer |
| <input type="checkbox"/> Desiccant dryer | |
| <input type="checkbox"/> Other (please specify) | |

☐ None of these

58. About what percentage of parts required mixing at the press with a multicomponent blender in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

59. Which, if any, **specialty injection molding technologies** does your facility offer? *Select ALL that apply.*

- ☐ 2-shot
- ☐ Gas/water-assist
- ☐ MuCell microcellular foam
- ☐ Inmold labeling/inmold decoration
- ☐ Insert molding
- ☐ Other (please specify)

☐ None

60. Did your facility set a goal of holding a certain tolerance level in 2025?

- ☐ Yes
- ☐ No
- ☐ Not sure



Injection Molding

61. What was your facility's goal **tolerance** level in 2025? *Select the option that comes closest.*

- ☐ +/- 0.0001 inch
- ☐ +/- 0.0005 inch
- ☐ +/- 0.0010 inch
- ☐ +/- 0.0050 inch
- ☐ +/- 0.0100 inch

62. What percentage of your facility's molds featured **more than 16 cavities** in 2025?
Please enter a whole number only; no decimals, commas, or other symbols.

63. What percentage of your facility's molds included **in-mold sensing for temperature** in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

64. What percentage of your facility's molds included **in-mold sensing for pressure** in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

65. What types of automation does your facility use? *Select ALL that apply.*

- ☐ Articulated arm
- ☐ Cartesian
- ☐ Sprue picker
- ☐ Other (please specify)



Injection Molding

66. Which of the following practices and improvement methodologies does your facility use?

Select ALL that apply OR the last option only.

- | | |
|---|--|
| <input type="checkbox"/> 5S workplace organization | <input type="checkbox"/> Lean manufacturing |
| <input type="checkbox"/> Benchmarking | <input type="checkbox"/> Overall Equipment Effectiveness (OEE) monitoring and analysis |
| <input type="checkbox"/> Cellular manufacturing | <input type="checkbox"/> Poka yoke (error prevention) |
| <input type="checkbox"/> Continuous improvement program | <input type="checkbox"/> Six Sigma |
| <input type="checkbox"/> Customer surveys | <input type="checkbox"/> Theory of constraints |
| <input type="checkbox"/> Daily layered accountability | <input type="checkbox"/> Total productive maintenance |
| <input type="checkbox"/> Design of experiments | <input type="checkbox"/> Total quality management |
| <input type="checkbox"/> Just-in-time movement of materials | <input type="checkbox"/> Value-stream mapping |
| <input type="checkbox"/> Kaizen events/blitzes | <input type="checkbox"/> No formal methodology |
| <input type="checkbox"/> Kanban and pull systems | |

67. Did the average price your facility paid per pound of resin increase, stay about the same, or decrease in 2025 compared to 2024?

- ☐ Increased
- ☐ Stayed about the same
- ☐ Decreased

68. Did your facility have any accident incidents in 2025?

- ☐ Yes
- ☐ No



Injection Molding

69. What was your facility's **accident incident rate for plant floor employees** in 2025, defined as the number of plant floor accident incidents as a percentage of the typical number of plant floor staff. Enter your number without a % sign.

Example: if you had 2 accident incidents in 2025 and your plant floor staff typically totals 30, you would enter 6.67.

You may enter a decimal, but no other signs or symbols.



Business Strategy & Performance

70. Which of the following supply chain practices does your plant use? *Select ALL that apply.*

- | | |
|--|---|
| <input type="checkbox"/> Accessing/using customer forecasts | <input type="checkbox"/> Just-in-time deliveries to customers |
| <input type="checkbox"/> Certification of major suppliers | <input type="checkbox"/> Sharing forecasts with suppliers |
| <input type="checkbox"/> Collaborative design/DFM with customers | <input type="checkbox"/> Inventory managed by suppliers |
| <input type="checkbox"/> Collaborative design/DFM with suppliers | <input type="checkbox"/> Inventory managed for customers |
| <input type="checkbox"/> Customer satisfaction surveys | <input type="checkbox"/> None of these |
| <input type="checkbox"/> Just-in-time deliveries from suppliers | |

71. Please provide your plant's 2025 **ROA**, defined as your plant's net income (after tax) relative to total assets, rounded to the nearest whole number. Include a minus sign if your number is negative.

Formula = $[(2025 \text{ net income} / 2025 \text{ total assets}) * 100]$

Example: If your 2025 net income was negative \$300 and your total assets were \$5000, you would enter -6.

72. On average, did your machine-hour rates increase, stay about the same, or decrease in 2025 compared to 2024?

- ☐ Increased
- ☐ Stayed about the same
- ☐ Decreased

73. Did your facility manufacture any proprietary products for direct resale in 2025?

- ☐ Yes
- ☐ No



Business Strategy & Performance

74. What percentage of your facility's 2025 **revenue** came from **proprietary products**?

Please enter a whole number only; no decimals, commas, or other symbols.

75. How many **active customers** did your facility have in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.



Business Strategy & Performance

76. About **how many** quotes for new parts did your facility deliver in one month, on average, during 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

77. About **how long** from the time a request was received in 2025 did it typically take your facility to deliver a quote for new parts?

- ☐ 12 hours or less
- ☐ 24 hours
- ☐ 48 hours
- ☐ 72 hours
- ☐ More than 72 hours
- ☐ Not sure

78. About what **percentage** of quotes for new parts did your facility win in 2025?

Please enter a whole number only; no decimals, commas, or other symbols.

79. As best as you can say, was the pricing your facility quoted typically higher or lower than the pricing competition quoted for the same new parts in 2025?

- ☐ Higher
- ☐ Lower
- ☐ Don't know

80. Did your facility utilize process simulation software when considering new jobs in 2025?

- ☐ Yes
- ☐ No



Business Strategy & Performance

81. By about how much was your facility's pricing for new parts different than the competition's in 2025?

- ☐ less than 5%
- ☐ 5% - 10%
- ☐ 11% - 15%
- ☐ 16% - 20%
- ☐ more than 20%
- ☐ Don't know

82. Which type(s) of simulation software did your facility deploy in 2025? Select all that apply

- ☐ Moldflow simulation
- ☐ Materials simulation
- ☐ Process simulation
- ☐ Not sure

83. Which tools/formats did your facility typically use for estimating new parts in 2025?

- ☐ Paper
- ☐ Excel
- ☐ Job Quoting Software
- ☐ ERP System
- ☐ Other (please specify)

- ☐ Don't know

84. During 2025, was your facility part of any online sourcing services that match buyers with qualified suppliers? Examples include Xometry, Fictiv, Paperless Parts.

- ☐ Yes
- ☐ No
- ☐ Not sure



Business Strategy & Performance

85. Below are business practices that your shop may or may not apply. Please select all that you consider to have been in place at your shop in 2025.

- ☐ Business metric goal setting
- ☐ Business strategy development
- ☐ Regularly scheduled management/department head meetings
- ☐ Regularly scheduled, formal review of the state of the business
- ☐ Steering board/committee including outside membership
- ☐ Family business/succession planning
- ☐ Regular peer group participation
- ☐ None of these

86. Which **social media outlets** did your company use in 2025 to generate business? *Select ALL that apply.*

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Twitter | <input type="checkbox"/> Snapchat |
| <input type="checkbox"/> LinkedIn | <input type="checkbox"/> YouTube |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> None of these |
| <input type="checkbox"/> Instagram | |



Human Resources

87. About what percentage of the training your facility offered or supported for certifications in 2025 was **delivered by a third party**?

Please enter a whole number only; no decimals, commas or other symbols.

88. Which statement best describes your plant as far as **skills relative to needs** in 2025?
Select ONE only.

- ☐ We experienced a shortage of skills needed and took action.
- ☐ We experienced a shortage of skills needed but did not take action.
- ☐ We did not experience a shortage of skills needed.



Human Resources

89. Which actions did your facility take in 2025 to address a shortage of skills your shop needs? *Select ALL that apply.*

- | | |
|--|--|
| <input type="checkbox"/> Advertising (e.g. billboard, radio, TV) | <input type="checkbox"/> Outreach program at local schools |
| <input type="checkbox"/> Attendance incentives | <input type="checkbox"/> Outreach program to broader populations (e.g. completed rehab; released from incarceration) |
| <input type="checkbox"/> Cross training | <input type="checkbox"/> Provide, pay for, or subsidize transportation to/from facility |
| <input type="checkbox"/> Flexible schedules | <input type="checkbox"/> Rewards for referrals |
| <input type="checkbox"/> 'Get paid to learn/train' program | <input type="checkbox"/> Signing incentives |
| <input type="checkbox"/> Increased automation | <input type="checkbox"/> Temp agency/Temp-to-Perm hiring |
| <input type="checkbox"/> Loosened hiring criteria | <input type="checkbox"/> Weekend only shifts |
| <input type="checkbox"/> Mentor program | |
| <input type="checkbox"/> Other (please specify) | |

90. Does your facility partner with any area schools for things like open houses or staff recruitment?

- ☐ Yes
- ☐ No



Human Resources

91. Please select the rating that best describes your shop's practice in 2025 in each area listed below.

| | Did not have written guidelines | Had written guidelines, but they were not well known | Had written guidelines, and they were broadly known |
|--|---------------------------------|--|---|
| Hazardous material handling | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Heavy equipment operation | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Personal protective equipment usage | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Safety training for new employees | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Safety training refreshers/updates for tenured employees | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Safety incident reporting | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

92. Which of the following designated safety roles did your shop have in place in 2025?

- ☐ Safety manager
- ☐ Safety committee
- ☐ Neither of these



Human Resources

Please read the instructions at each question for the accepted format for responses. If you receive an error message and your format is correct, your value is likely an exception outside of the reasonable range, and won't be accepted.

93. How many employees were **directly involved in plant floor operations** in 2025 at the location(s) to which your answers apply?

Please enter a whole number only; no decimals, commas or other symbols.

94. What is the **average age** of your facility's plant floor employees?

Please enter a whole number only; no decimals, commas or other symbols.

95. What is the **average years of plastics processing/manufacturing experience** of your facility's plant floor employees?

Please enter a whole number only; no decimals, commas or other symbols.

96. During 2025, did the size of your facility's full-time plant staff increase, decrease, or stay the same? *Select ONE only.*

- ☐ Increased
- ☐ Stayed the same
- ☐ Decreased



Almost finished!

This is the final page of the survey. Please double-check your responses for accuracy and completeness before you continue.

Before you click **Submit Responses**, you may close and return to the survey on this device to make changes as many times as you like until the deadline on March 31, 2026. Once you click **Submit Responses** on this page, you will be taken to the *Plastics Technology* website. Your survey will be locked and submitted and you will not be able to change any of your answers.