
U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU FORM

2012 ECONOMIC CENSUS
Repair, Laundry, and Other Selected Services (Enterprise Support)

OMB No. 0607-0934: Approval Expires 12/31/2013

| DUE DATE |
| :---: |
| FEBRUARY 12, 2013 |
| Need help or have questions? |
| - Read the accompanying information sheet(s) before |
| answering the questions. |
| - Visit econhelp.census.gov |
| - Call 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., |
| Eastern time, Monday through Friday. |

## INFORMATION COPY DO NOT USE TO REPORT

Report Online - It's fast and secure!
Go to: econhelp.census.gov

YOUR RESPONSE IS REOUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ballpoint pen.
- Do not use pencil or felt-tip pen.
- Do not put slashes through 0 or 7 .
- Please center numbers in their respective boxes.
- Place an "X" inside the box.

Mail your completed form to:
U.S. CENSUS BUREAU

1201 East 10th Street Jeffersonville, IN 47134-0001

## Examples:

## $\times 0123456789$

The reporting unit for this form is an establishment. An establishment is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

1 EMPLOYER IDENTIFICATION NUMBER
Is the Employer Identification Number (EIN) shown to the left of the mailing address the same as the one used for this establishment on its latest 2012 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?
$0021 \square$ Yes - Go to 2 $0022 \square$ No - Enter current EIN (9 digits) $\longrightarrow 0025$
2 PHYSICAL LOCATION
A. Is this establishment's physical location the same as shown in the mailing address? (P.O. Box and rural route addresses are not physical locations.)
$0031 \square$ Yes - Go to line $B$
0035 Number and street
0032 $\square$ No-
 physical location

| 0036 City, town, village, etc. | 0037 State | 0038 ZIP Code |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |

2 PHYSICAL LOCATION - Continued
B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?
(Mark "X" only ONE box.)
$0041 \square$ Yes
$0042 \quad \square$ No
$0043 \quad \square$ No legal boundaries
0044

Do not know
C. In what type of municipality is this establishment physically located?
(Mark "X" only ONE box.)
$0046 \square \begin{aligned} & \text { City, village, } \\ & \text { or borough }\end{aligned} \quad 0047 \quad \square$ Town or township $\quad 0048 \quad \square$ Other $\quad 0024 \quad$ Do not know
(3) OPERATIONAL STATUS

Which ONE of the following best describes this establishment's operational status at the end of 2012?
(Mark "X" only ONE box.)
$0011 \square \ln$ operation
${ }_{0} 013$ Temporarily or seasonally inactive $\square$ ATION COPY
ma Coses opeasion - INEORM MSETO REPORT
 AND enter nan e, dd dress of new owner or operator and Employer luentification Number (EIN) below 7


| 0060 Name of new owner or operator | 0061 ElN (9 digits) |
| :--- | :---: | :---: |
|  | - |

0062 Mailing address (Number and street, P.O. Box, etc.)

$0016 \square$ Other - Specify $\longrightarrow$

MONTHS IN OPERATION

Number of months in operation during 2012 (If none, mark "X" and go to 30.)

SALES, SHIPMENTS, RECEIPTS, OR REVENUE
Sales, receipts, or revenue (exclude billings) from customers outside your enterprise originating from this location (do not report sales, receipts, or revenue from other establishments within your own enterprise)
HOW TO REPORT DOLLAR FIGURES


| $\begin{aligned} & \\ & \text { Report } \longrightarrow \begin{array}{l}\text { Mark " } \\ \text { if None }\end{array} \\ &\end{aligned}$ | 2012 |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | \$ Bil. | Mil. | Thou. |  |
|  |  | 2 | 03 | 6 |
| Report $\longrightarrow X$ | $E X A M P L E$ |  |  |  |

Not Applicable.

## If not shown, please enter your 11-digit Census File

 Number (CFN) from the mailing address.(7) EMPLOYMENT AND PAYROLL

## Include:

- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown to the left of the mailing address or corrected in 1.


## Exclude:

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Purchased or managed services, such as janitorial, guard, or landscape services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.

For further clarification, see information sheet(s).
Number
2. First quarter payroll (January-March 2012) 0310

## (8)-15) Not Applicable.

## SELECTED EXPENSES

## Report the payment of selected expenses allocated by category

- Report payments for expenses directly incurred by this establishment in column 1.
- Report payments made by this establishment for expenses incurred by other establishments of your enterprise in column 2 (where applicable).


## Exclude:

- Transfers made within the company
- Capitalized expenses
- Impairment
- Interest
- Bad debt
- Income tax
- Taxes collected from customers (e.g., sales and excise)
- Cost of merchandise for resale

Line 1 - Employer's cost for legally required programs and programs not required by law. Include insurance premiums for hospital plans, medical plans, and single service plans (e.g., dental, vision, prescription drugs); premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs); defined benefit pension plans; defined contribution plans (e.g., profit sharing, 401 K , stock option plans); and other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, Medicare, life insurance benefits, childcare assistance, subsidized commuting, employer contribution to pre-tax benefit accounts). Exclude employee contributions. (Include fringe benefits for all employees reported in $\mathbf{7}$, line A.)
Line 2 - Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. Include all charges for payroll, benefits, and services.
Line 3 - Include expensed office and communication equipment (e.g., copiers, fax machines, telephones); equipment used in manufacturing, sales, and service (e.g., shop and lab equipment); and computer equipment (e.g., CPUs and monitors). Report packaged software on line 5. Report leased and rented equipment on line 15.
Line 4 - Materials and supplies used in providing services to others; materials and parts used in repairs; office and janitorial supplies; small tools; containers and other packaging materials; and motor fuels. Exclude cost of merchandise for resale.

Line 5 - Purchases of prepackaged, custom coded, or vendor customized software. Include software developed or customized by others, web design services and purchases, licensing agreements, upgrades of software, and maintenance fees related to software upgrades and alterations.
Line 6 - Report the cost of electricity included in a lease or rental payment on line 16.

## SELECTED EXPENSES - Continued

Line 7 - Fuel for heating, power, or generating electricity (e.g., natural gas, propane, heating oil, coal). Report motor fuels on line 4. Report the cost of fuels included in a lease or rental payment on line 16.
Line 8 - Include computer facilities management services, computer input preparation, data storage, computer time rental, optical scanning services, and other computer-related advice and services, including training. Exclude expensed integrated systems, repair and maintenance of computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone).
Line 9 - Telephone, cellular, and fax services; computer-related communications (e.g., Internet, connectivity, online); and other wired and wireless communication services. Report expensed communication equipment on line 3.
Line 10 - Expensed repair and maintenance services to machinery, vehicles, equipment, and computer hardware. Report materials, parts, and supplies used for repairs and maintenance performed by this firm's employees on line 4.
Line 11 - Include repair and maintenance to integral parts of buildings (e.g., elevators, heating systems). Report materials, parts, and supplies used for repairs and maintenance performed by this firm's employees on line 4. Report janitorial and grounds maintenance services on line 19.
Line 12 - Include the cost of hazardous waste removal. Report the cost of utilities included in a lease or rental payment on line 16.
Line 13 - Include marketing and public relations services.
Line 14 - Include management consulting, accounting, uli, or, ok pmg, legal, actuarial, payroll processing,
 services.
Line 15 - Include lease and rintar of transportation aqument it ou operators, and penalties incurred for broken leases. Exclude capital and financing lgase gre en edi. Bport expensed software on line 5.
Line 16 - Include penalter ictrep ortroken leases.
Line 17 - Payments to government agencies for taxes and licenses. Include business and property taxes. Exclude sales and excise taxes collected from customers and income taxes.
Line 18 - Include depreciation charges taken against tangible assets owned and used by your firm, tangible assets and improvements owned by your firm within leaseholds, tangible assets obtained through capital lease agreements, and amortization charges against intangible assets (e.g., patents, copyrights). Exclude impairment.
Line 19 - All other selected expenses, unless specifically excluded in the general instructions. Exclude payroll, purchases of merchandise for resale, and nonoperating expenses.

## Personnel costs, except payroll

1. Employer's cost for employer paid insurance premiums, pension plans, payroll taxes, and other employee benefits
2. Temporary staff and leased employee expense

| Mark "X" if None | 2012 |  |  |
| :---: | :---: | :---: | :---: |
|  | Expenses of this establishment ONLY |  |  |
|  | \$ Bil. | Mil. | Thou. |
| $\square$ |  |  |  |
| 0228 |  |  |  |
| $\square$ |  |  |  |
| 0793 |  |  |  |

## Expensed equipment and materials

3. Expensed computer hardware and other equipment

4. Expensed purchases of other materials, parts, and supplies

| $\square$ | $\square$ | $\square$ | $\square$ |
| :--- | :--- | :--- | :--- |
|  |  |  |  |

## Expensed purchased

 services5. Expensed purchases of software

| $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 0801 |  |  |  |  |

## If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

SELECTED EXPENSES - Continued

## Expensed purchased services - Continued

8. Data processing and other purchased computer services
9. Purchased communication services

10. Purchased repairs and maintenance to machinery, vehicles, and equipment.
11. Purchased repairs and maintenance to buildings, structures, and offices
12. Water, sewer, refuse removal, and other util payments
13. Purchased advertising and promotional services
14. Purchased professional and technical services

## Other selected expenses

15. Lease and rental payments for machinery, equipment, and other tangible items.


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Lease and rental payments for land, buildings, structures, store spaces, and offices

16. Lease and rental payments

$$
0561
$$



18. Depreciation and amortization charges

| $\square$ | $\square$ |  | $\square$ |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
| 0419 | $\square$ |  | $\square$ |
|  |  |  |  |
| $\square$ | $\square$ |  | $\square$ |
|  |  |  |  |

19. All other selected expenses (Specify-If more than $50 \%$ of TOTAL reported on line 20.)

0409 $\qquad$ | $\square \square \square \square \square$ |  |  |  |
| :--- | :--- | :--- | :--- |
| $\square$ | $\square$ | $\square$ | $\square$ |

20. TOTAL SELECTED EXPENSES of this establishment ONLY, excluding payroll (Add lines 1 through 19.)
19

KIND OF BUSINESS OR ACTIVITY
Which ONE of the following best describes this establishment's principal kind of business or activity in 2012? If none of the provided selections seem appropriate, provide a specific description of the primary business activity.

## Mark "X" only ONE box.

$811111001 \quad \square$ General motor vehicle and light truck repair shop
$811111003 \quad \square$ Diesel engine repair shop
$811111002 \quad \square$ Truck tractor or trailer repair shop - general
$777811011 \quad \square$ Other motor vehicle mechanical and electrical repair and maintenance services - Describe type of vehicles and repair

## Other kind of business or activity

$777811025 \quad \square$ Transportation equipment repair - Describe type of goods and repair or maintenance $\nabla$
$77781102 \mathrm{~A} \quad \square$ Electronic and precision equipment repair and maintenance - Describe type of equipment and repair or maintenance

Personal and household goods repair and maintenance - Describe type of goods and repair or maintenance

773000002Other kind of business or activity - Describe type of business or activity

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

## CLASS OF CUSTOMER

Estimate the percentage of receipts (reported in 5) from services provided to clients outside your enterprise by class of customer.

2012
Whole percent of receipts

|  |  |  |
| :--- | :--- | :--- |
|  | $\%$ |  |
|  |  |  |
|  | $\%$ |  |
|  |  |  |
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|  |  |  |
|  |  |  |
|  |  |  |

4. State and local governments

5. TOTAL

6. Business firms and farms 3108
7. Not-for-profit organizations (Include religious organizations.)
8. Federal government
A. SUPPORT SERVICES

Was this establishment primarily engaged in providing management, administrative, or support services to other establishments of your enterprise (rather than for the general public or other business firms) in 2012?
$0998 \quad \square$ Yes - Go to line $B$
$0999 \quad \square \quad$ No - Go to 22
B. PRINCIPAL BUSINESS OR ACTIVITY OF THE OPERATING ESTABLISHMENTS SERVICED

Describe the principal kind of business or activity performed by the establishments of your enterprise that are managed or serviced by this establishment.

Example: If this establishment is a corporate, subsidiary, or regional managing office, data processing service center, or administrative/support office to a chain of clothing stores, please specify "clothing stores" below. $\nabla$

0996

## DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

(Report receipts by source either as a dollar figure or as a whole percent of total receipts (reported in $\mathbf{5}$ ). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more receipts lines.)

## Receipts from providing services to clients outside your enterprise.

Line 1a-Report receipts from washing or cleaning the exteriors and interiors of automobiles or light-duty trucks. Service may be provided by automatic machines, manual labor, access to self-service facilities, or any combination.
Line 1b-Report receipts from providing body repair services. Include the installation of replacement parts for automobiles or light-duty trucks. Body repair services may include structural body repairs, painting, glass repair and replacement, conversions, upholstery repair, or minor dent repair.
Line 2a - Report receipts from washing or cleaning the exteriors and interiors of heavy trucks and buses. Report washing or cleaning services for automobiles and light-duty trucks on line 1a.

DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued
Line $\mathbf{2 b}$ - Report receipts from providing body repair services. Include the installation of replacement parts, for heavy trucks and buses. Report body repair services for automobiles and light-duty trucks on line $\mathbf{1 b}$.
Line 3a-Report receipts from providing maintenance and repair services. Include the installation of replacement parts, for computers, computer peripheral equipment, and other data processing equipment. Include parts or software bundled with maintenance and repair services. Include upgrading an existing computer system.
Line $\mathbf{3 b}$ - Report receipts from providing maintenance and repair services. Include the installation of replacement parts for office equipment (e.g., fax machines, shredders, and copy machines).
Line 3c - Report receipts from providing maintenance and repair services. Include the installation of replacement parts for communications and navigation equipment (e.g., telecommunications routers and switches, broadcasting equipment, two-way radios, cellular telephones, GPS devices, and handheld computers (PDA's)).
Line 3d - Report receipts from providing maintenance and repair services. Include the installation of replacement parts for consumer electronic equipment (e.g., televisions, computer monitors, home sound systems, and DVD players).
Line 4a - Report receipts from providing maintenance and repair services. Include the installation of replacement parts for commercial grade machinery and equipment used primarily in commercial or service industry establishments. Include maintenance and repair of equipment used in retail stores, hair salon ald restaurants.
Line 4b - Report receipts from providing maintenancerd ep iderves. vclude the installation of replacement parts
 materials.
Line 5b - Report receipts fromproviding maintenaro ind re pa services. Thclude the installation of replacement parts for personal and household gopdoe. ., n or ee tiontoys, blinds, carpets, cookware, dinnerware, utensils, and trophies).


Line 6a - Report receipt 5 om providing laundry and dry cleaning services. Include ironing services for motels, hospitals, clinics, or other business institutions that already own their linen or uniforms and need laundry services to keep the items clean. Include time-scheduled pick-up, cleaning, maintenance, replacement when necessary, and delivery service.

Line 6b - Report receipts from providing digital photo and photofinishing services. Include the developing of electronic media, negatives, printing, re-sizing, and other effects. These services may be provided on-site or off-site and to film or digital photos.

Description of sales, shipments, receipts, or revenue

1. Maintenance and repair services for cars and light trucks
a. Washing and cleaning services for cars and light trucks
b. Body repair services for cars and light trucks
c. Scheduled, factory-recommended, and preventative maintenance services for cars and light trucks
```
                            tative
```

$\qquad$
d. Other repair services for cars and light trucks - Describe 7
$\qquad$
2. Maintenance and repair services for heavy trucks and buses
a. Washing and cleaning services for heavy trucks and buses
b. Body repair services for heavy trucks and buses 31820

2012
Report thousands of dollars OR whole percents. Estimates are acceptable.


| Percent |
| :--- |
|  |
|  |
|  |
|  |
|  |

## If not shown, please enter your 11-digit Census File

 Number (CFN) from the mailing address.DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

Description of sales, shipments, receipts, or revenue
2. Maintenance and repair services for heavy trucks and buses Continued
c. Scheduled, factory-recommended, and preventative maintenance services for heavy trucks and buses
d. Other repair services for heavy trucks and buses Describe 7
a. Computer hardware peripheral equipment
b. Office equipment, excluding computer hardware and peripheral equipment
luding computer hardware and
c. Communications and navigation equipment $\qquad$
d. Consumer electronics

31910
e. Other electronic and precision equipment - Describe $\downarrow$
4. Maintenance and repair of commercial and industrial machinery and equipment
a. Commercial and service industry machinery and equipment
b. Industrial machinery and equipment

32020
5. Maintenance and repair of personal and household goods


Description of sales, shipments, receipts, or revenue
6. Other services
a. Laundry and/or dry cleaning services - Describe type of service 7

2012
Report thousands of dollars OR whole percents.
Estimates are acceptable.

| Mil. | Thou. |
| :--- | :--- |

b. Digital photo and photofinishing services

32440 INFORMATION

COPY
c. Al oher seevices D Describe type of senicer REPORT
7. Resale of merchandise - DSsi e;
8. All other operating receipts - Describe principal activity and estimated receipts
$\qquad$
9. TOTAL OPERATING RECEIPTS - Sum of lines should equal 5 if reporting in dollars

39767


| Preant |  |
| :---: | :---: |
|  |  |

$\qquad$

and 24 Not Applicable.
25) EXPORTED SERVICES

NOTE - An exported service is a product (e.g., service performed, license agreement) that is sold or transferred to, or performed for a customer or client (individual, government, business establishment, etc.) located outside the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions). Include products provided to unaffiliated and affiliated foreign firms (e.g., foreign parent firms, subsidiaries, branches). Exclude products provided to domestic subsidiaries of foreign firms.
A. Did the receipts or revenue (reported in (5) include any amounts for exported services?
$0911 \square$ Yes - Go to line $B$
$0912 \square$ No - Go to 26
B. Amount of receipts or revenue for exported services 0914

| 2012 |  |  |  |
| :---: | :---: | :---: | :---: |
| \$ Bil. | Mil. | Thou. |  |
|  |  |  |  |
|  |  |  |  |

## If not shown, please enter your 11-digit Census File

 Number (CFN) from the mailing address.SPECIAL INQUIRIES
REPAIR RECEIPTS
Estimate the percentage of repair receipts reported in 22, lines 1 through 5, by category:

1. Labor charges
2. Parts installed in repair work
3. TOTAL

## 

 DO NOT USECERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.


Thank you for completing your 2012 ECONOMIC CENSUS form. PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.

