



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

FORM

OS-81206 (11-16-2011)

2012 ECONOMIC CENSUS

Parking Services

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

DUE DATE
FEBRUARY 12, 2013

(Please correct any errors in this mailing address.)

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.

OS-81206

INFORMATION COPY
DO NOT USE TO REPORT

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

- **OR** -

Mail your
completed
form to:

U.S. CENSUS BUREAU
1201 East 10th Street
Jeffersonville, IN 47134-0001

YOUR RESPONSE IS REQUIRED 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.

Examples:

☒ 0 1 2 3 4 5 6 7 8 9

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 ☐ Yes - Go to **2**

0022 ☐ No - Enter current EIN (9 digits) —————→

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 ☐ Yes - Go to line B

0032 ☐ No - Enter —————→
physical
location

0035 Number and street

0036 City, town, village, etc.

0037 State

0038 ZIP Code

-

CONTINUE WITH **2** ON PAGE 2

PENALTY FOR FAILURE TO REPORT

CONTINUE ON PAGE 2

81206013

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 ☐ Yes 0042 ☐ No 0043 ☐ No legal boundaries 0044 ☐ Do not know

C. In what type of municipality is this establishment physically located?
(Mark "X" only ONE box.)

0046 ☐ City, village, or borough 0047 ☐ Town or township 0048 ☐ Other 0024 ☐ 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 ☐ In operation

0013 ☐ Temporarily or seasonally inactive

0014 ☐ Ceased operation - Give date at right

0015 ☐ Sold or leased to another corporation - Give date at right
AND enter name and address of new owner or operator
and Employer Identification Number (EIN) below

Month	Day	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

0060 Name of new owner or operator

0061 EIN (9 digits)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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0062 Mailing address (Number and street, P.O. Box, etc.)

<input type="text"/>

0063 City, town, village, etc.

0064 State

0065 ZIP Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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0016 ☐ Other - Specify

0815

4 MONTHS IN OPERATION

Mark "X" if None

2012 Number

Number of months in operation during 2012 (If none, mark "X" and go to 30.) 0002 ☐

HOW TO REPORT DOLLAR FIGURES

Dollar figures should be **rounded to thousands** of dollars.

If a figure is **\$2,035,628.79**:

Report

Mark "X" if None

If a value is "0" (or less than \$500.00):

Report

☒

2012 \$ Bil. Mil. Thou.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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EXAMPLE

5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None

2012 \$ Bil. Mil. Thou.

Operating receipts 0100 ☐

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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6 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).

(For automobile parking companies operating more than one parking lot or structure, report payroll and employees at the location where the employees spend most of their time. If an establishment is a self-park service location at which no employees are assigned, mark "X" on all lines.)

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A. Number of employees for pay period including March 12 0320 ☐

Mark "X"
if None

2012
Number

B. Payroll before deductions
(Exclude employer's cost for fringe benefits.)

Mark "X"
if None

2012

\$ Bil. Mil. Thou.

1. Annual payroll 0300 ☐

2. First quarter payroll (January-March 2012) 0310 ☐

8 - 18 Not Applicable.

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.

Automobile parking

- 0700
- 812 930 00 1 ☐ Parking lot
- 812 930 00 3 ☐ Parking structure and lot at same location
- 812 930 00 2 ☐ Parking structure
- 812 930 00 4 ☐ Parking garage, underground
- 812 930 00 5 ☐ Valet parking services
- 812 930 00 8 ☐ Other parking services - Describe ↗


0701

Other kind of business or activity

773 000 00 1 ☐ Other kind of business or activity - Describe ↗

0701

20 and 21 Not Applicable.

HOW TO REPORT PERCENTS		2012			
		Report thousands of dollars OR whole percents. Estimates are acceptable.			
		\$ Bil.	Mil.	Thou.	Percent
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		If figure is 38.76% of total sales: Report →			
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

22 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 **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.)

Line 1 - Report receipts from providing parking for automobiles, motorcycles, and bicycles. Include the provision of space only and the provision of space bundled with an automobile parking service (valet service). Include the collection of fees for parking on streets, roads, and public places. Exclude rental services of lock-up garages or garage premises for vehicles by the month or year.

Description of sales, shipments, receipts, or revenue		2012			
		Report thousands of dollars OR whole percents. Estimates are acceptable.			
		\$ Bil.	Mil.	Thou.	Percent
1. Parking services					
a. Off-street parking services					
(1) Hourly or daily 33691		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(2) Weekly or monthly, in buildings 33692		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(3) Weekly or monthly, on lots 33693		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(4) Add lines 1a(1) through 1a(3) 33690		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. On-street parking services 33700		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Valet parking services 33710		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Management fees for the operation of parking facilities . . 33720		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Resale of merchandise 39694		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. All other operating receipts - Describe if more than 10 percent of total receipts ↴					
<div style="border: 1px solid black; height: 30px; width: 450px;"></div> 39785		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. TOTAL OPERATING RECEIPTS - Sum of lines should equal 5 if reporting in dollars 39850		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

23-25 Not Applicable.

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

26 SPECIAL INQUIRIES

FRANCHISE

1. Was this establishment operating under any trademark(s) authorized by a franchisor in 2012?
(Mark "X" only ONE box.)

0237 ☐ Yes - franchisee-owned establishment

0238 ☐ Yes - franchisor-owned establishment

0239 ☐ No

2. If yes, provide the trademark(s) below. ↗

0235

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27-29 Not Applicable.

REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

30 CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.

Is the time period covered by this report a calendar year?

☐

Yes

☐

No - Enter time period covered →

FROM

Month

Year

Month

Year

TO

Name of person to contact regarding this report

Title

Tele-
phone

Area code

Number

Extension

Fax

Area code

Number

E-mail address

Date
completed

Month

Day

Year

Thank you for completing your 2012 ECONOMIC CENSUS form.

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.

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