2012 ECONOMIC CENSUS

Classification Form

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

DUE DATE
30 DAYS AFTER
RECEIPT OF FORM

(Please correct any errors in this mailing address.)

RECEIPT OF F

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- 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-81290

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- 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:

× 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.

- 1 Not Applicable.
- 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.)

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

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|--------------|--|-----------------------------------|------------------|---|--------------|--------------------------------------|------------------|---------------|-------|--------------|-------|----------|---------|----|-------|---------|
| 2 | PHYSICA | L LOCATI | ION - C | ontinue | ed | | | | | | | | | | | |
| | B. Is this (Mark | establish "X" only | nment p | ohysica ox.) | lly locate | d inside th | ne legal bo | oundar | ies c | of the city, | town | , villag | e, etc. | ? | | |
| | 0041 | Yes | | 0042 | □ No | | | 0043 | N | lo legal bo | ounda | ries | 0044 | | Do no | t know |
| | C. In what (Mark | at type of | f munic ONE b | ipality ox.) | is this est | ablishmer | nt physica | lly loca | ated? | ? | | | | | | |
| | 0046 | City, villa or borou | | 0047 | ☐ Tow | n or towns | ship | 0048 | 0 |)ther | | | 0024 | | Do no | ot know |
| 3 | | | followi | _ | t describe | es this esta | | | | | | | of 201 | 2? | | |
| | 0011 | In operat | ion | | | | | | | OP | Y | | | | | |
| | In operation In operation Temporarily or seasonally inactive ATION COPY Ceased operation - GN date at right Sold or leased to another population - Gne date at right | | | | | | | | | | | | | | | |
| | 0014 | Ceased o | peratio | n - 6 | date at | right — | CE ' | 10 | F | REP | Ų | Month | Da | ay | | Year |
| | 0015 | Sold or le AND ente and Emp | er nan | e na, | idaress o | oi - Give f new own mber (EIN) | ner or ope | | | | 018 | | | | | |
| | | 0060 Nam | ne of nev | w owne | r or opera | or | • | | | | 0061 | EIN (9 d | digits) | | | |
| | | | | | | | | | | | | - | | | | |
| | | 0062 Mail | ling addı | ress (Nu | ımber and | street, P.O. | Box, etc.) | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | 0063 City, | , town, v | village, e | etc. | | | | | 0064 State | 0065 | ZIP Coc | le | | | |
| | | | | | | | | | | | | | | - | | |
| | 0010 | 045 | | | | | | | | | | | | | | |
| | 0016 | Other - S | респу | | 0815 | | | | | | | | | | | |
| 4 | -18 Not | Applicabl | le. | | | | | | | | | | | | | |
| 19 | Which O ll If none of | NE of the f the prov | followi | ing bes | st describ | es this est ppropriate | | | | | | | | | | tivity. |
| | Mark "X Barber | , beautio | | | care se | vices | | | | | | | | | | |
| 070 | າດ | 12 00 1 | | | hop or ha | | | | | | | | | | | |
| | 812 1 | 11 00 1 | | arber s | | | | | | | | | | | | |
| 812 112 00 2 | | | □ Ui | Unisex hair shop, including combined beauty/barber shop | | | | | | | | | | | | |
| | 812 1 | 12 00 4 | □ Da | ay spa, | including | g hair serv | rices | | | | | | | | | |
| | 812 1 | 99 00 7 | □ Da | ay spa, | excludin | g hair serv | vices | | | | | | | | | |
| | 812 1 | 12 00 6 | □ SI | kin care | e (i.e., est | hetician) s | services | | | | | | | | | |
| | | | | | | CONTINU | JE WITH Œ | ON PA | AGE 3 | 3 | | | | | | |
| | | | | | | | | | | | | | | | | |

| If not shown, please Number (CFN) from t | ente he n | er your 11-digit Census File nailing address. | | | | | | | |
|--|--------------|--|--|--|--|--|--|--|--|
| 19 KIND OF BUSINES | SS OI | R ACTIVITY - Continued | | | | | | | |
| Barber, beautician, and nail care services - Continued | | | | | | | | | |
| 0700 812 112 00 3 | | Facial salon | | | | | | | |
| 812 113 00 1 | | Nail salon | | | | | | | |
| 611 511 00 1 | | Cosmetology or beauty school and barber college or school | | | | | | | |
| Other personal | car | e and appearance services | | | | | | | |
| 812 199 00 2 | | Tanning salon | | | | | | | |
| 812 199 00 1 | | Massage salon | | | | | | | |
| 621 399 00 C | | Massage therapist(s) - NCTMB (National Mer (fied in Therapeutic Massage and Bodywork) Sauna, steam at R Mish bath | | | | | | | |
| 812 199 00 3 | | Sauna, steam and Rivish bath _ REPOR | | | | | | | |
| 812 199 00 4 | | Hair removal services, it cluding electrolysis, laser removal, and waxing | | | | | | | |
| 812 199 00 5 | | Tath Coarlin | | | | | | | |
| 812 199 00 6 | | Hair replacement services, excluding services performed by a physician | | | | | | | |
| 812 191 00 1 | | Diet or weight reducing center, excluding physical fitness facilities | | | | | | | |
| 713 940 90 5 | | Physical fitness, strength development, or weight training center | | | | | | | |
| 777 812 01 1 | | Other personal care and appearance services - Describe | | | | | | | |
| | | | | | | | | | |
| 0701 | | | | | | | | | |
| Death care ser | vices | s Funeral home/parlor | | | | | | | |
| 812 210 10 2 | | Funeral home with crematory | | | | | | | |
| | | Mortuary services | | | | | | | |
| 812 210 10 3 812 210 30 1 | | Transfer services - offers burial or cremation without a funeral service | | | | | | | |
| | | Other funeral services | | | | | | | |
| 812 210 40 1 812 220 00 1 | | Cemetery, excluding animal cemetery | | | | | | | |
| | | Animal cemetery | | | | | | | |
| 812 220 00 2 812 220 00 3 | | Crematory | | | | | | | |
| | | | | | | | | | |
| 777 812 02 1 | | Other death care services - Describe | | | | | | | |
| 0701 | | | | | | | | | |
| Automobile pa | rkin | g | | | | | | | |
| 812 930 00 1 | | Parking lot | | | | | | | |
| 812 930 00 2 | | Parking structure | | | | | | | |
| | | CONTINUE WITH 19 ON PAGE 4 | | | | | | | |

| 19 KIND OF BUSINES | SS O | R ACTIVITY - Continued | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|
| Automobile parking - Continued | | | | | | | | | | |
| ⁰⁷⁰⁰ 812 930 00 3 | | Parking structure and lot at same location | | | | | | | | |
| 812 930 00 4 | | Parking garage, underground | | | | | | | | |
| 812 930 00 5 | | Valet parking services | | | | | | | | |
| Photography services | | | | | | | | | | |
| 812 921 00 1 | | Photofinishing laboratory, excluding one-hour | | | | | | | | |
| 812 922 00 1 | | One-hour photofinishing services | | | | | | | | |
| 541 921 00 1 | | Photography studio, portrait | | | | | | | | |
| Other personal services Bail black training Bail 990 20 1 Personal files training Dating services Dating services Dating services | | | | | | | | | | |
| Other personal services ALCORMATION SERVICES | | | | | | | | | | |
| 812 990 10 1 | | Bail by Many TISE TO REPORT | | | | | | | | |
| 812 990 90 5 | | Personal files /training | | | | | | | | |
| 812 990 20 1 | | Dating services | | | | | | | | |
| 812 990 90 6 | | Party and event planning | | | | | | | | |
| 812 990 90 2 | | Escort services - social | | | | | | | | |
| 561 730 00 1 | | Lawn and garden services | | | | | | | | |
| 812 910 00 1 | Pet care services, including boarding, training, pet sitting, animal shelter, kennels, etc. (Liveterinary services.) | | | | | | | | | |
| 812 910 00 6 | | Pet grooming | | | | | | | | |
| 624 410 00 1 | | Child day care services, including those with preschool and/or Head Start programs | | | | | | | | |
| 541 213 00 1 | Income tax return preparation services, without also providing accounting, bookkeeping, or billing services | | | | | | | | | |
| 777 812 02 2 | | Other personal services - Describe | | | | | | | | |
| | | | | | | | | | | |
| 0701 | | | | | | | | | | |
| Laundry and di | rycle | | | | | | | | | |
| 812 310 20 1 | | Self-service laundry and/or drycleaning store | | | | | | | | |
| 812 310 10 1 | | Coin-operated laundry washing machine route, including service provided in apartments, dormitories, etc. | | | | | | | | |
| 812 320 20 1 Drycleaning services, excluding rug cleaning | | | | | | | | | | |
| 561 740 00 1 | | Carpet, rug, and upholstery cleaning services | | | | | | | | |
| 812 320 10 2 | Commercial or family laundry services | | | | | | | | | |
| 812 331 00 1 | | Linen supply services on a rental or contract basis | | | | | | | | |
| 812 332 00 1 | 812 332 00 1 Industrial laundry services on a rental or contract basis | | | | | | | | | |
| 812 320 30 3 | | Drop off/pick up site or garment pressing, including laundry or cleaning done by others | | | | | | | | |
| | | CONTINUE WITH 10 ON PAGE 5 | | | | | | | | |

Form **OS-81290** (11-16-2011)

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| | (** ** - | | | | | | | | | |
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| If not show Number (C | If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address. | | | | | | | | | |
| (19) KIND OF BUSINESS OR ACTIVITY - Continued | | | | | | | | | | |
| Lau | Laundry and drycleaning services - Continued | | | | | | | | | |
| ⁰⁷⁰⁰ 8 | 12 320 30 2 | | Retail agent for laundries and drycleaners (work done by others) | | | | | | | |
| 8 | 12 320 40 1 | | Leather and/or fur cleaning services | | | | | | | |
| 7 | 77 812 03 1 | | All other laundry services - Describe | | | | | | | |
| | | | | | | | | | | |
| 0701 | | | | | | | | | | |
| Oth | er clothing | and | fabric services | | | | | | | |
| 8 | 11 490 40 2 | | Garment alteration or repair services | | | | | | | |
| 8 | 11 430 00 1 | | Shoe and leather good report to the same and leather good report t | | | | | | | |
| 7 | 77 812 03 2 | | Custom taller - Describe primar type of clothing manufactured 7 | | | | | | | |
| 0701 | | | Garment alteration or repair services Shoe and leather good rip ATION COPY Custom tailor - Describe primar type of clothing manufactured 7 | | | | | | | |
| 7 | 77 812 03 4 | | Sewing contractor, sewing materials owned by others for apparel and accessories - Describe primary type of clothing manufactured or modified | | | | | | | |
| | | | | | | | | | | |
| 0701 | | | | | | | | | | |
| Oth | er kind of b | usin | ness or activity | | | | | | | |
| 7 | 73 000 00 2 | | Other kind of business or activity - Describe type of business or activity | | | | | | | |
| | | | | | | | | | | |
| 0701 | | | | | | | | | | |
| 20-29 N | Not Applicabl | le. | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |

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

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| 30 CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. | | | | | | | | | | | | |
|--|--|----------------------------------|--------|------------------|-----|-------|--------|----------|------|--|--|--|
| | time period co lar year? | overed by this report a | | Month | | Year | | Month | Year | | | |
| | Yes | No - Enter time period covered — | → FROM | | | | то | | | | | |
| Name | Name of person to contact regarding this report Title | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | Area code | Number | ion | Area code Number | | | | | | | | |
| Tele- phone | | - 888 - 8888 - | | | Fax | |] - [] | <u> </u> | 0000 | | | |
| E-mail | address | | | | | Month | Day | Year | | | | |
| | | | | Date completed | | | | | | | | |
| Thank you for completing your 2012 ECONOMIC CENSUS form. | | | | | | | | | | | | |

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