



2012 ECONOMIC CENSUS

Building Inspection Services

FORM
PS-54113 (11-16-2011)

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.

PS-54113

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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

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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		

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CONTINUE WITH **2** ON PAGE 2

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* →

Month	Day	Year

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

0018

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0060 Name of new owner or operator	0061 EIN (9 digits)
	-

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

0063 City, town, village, etc.	0064 State	0065 ZIP Code
		-

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

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HOW TO REPORT DOLLAR FIGURES

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

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

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

Mark "X" if None

2012		
\$ Bil.	Mil.	Thou.

EXAMPLE

5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None 2012

Operating receipts 0100

2012		
\$ Bil.	Mil.	Thou.

6 Not Applicable.

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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).

Mark "X" if None

2012 Number

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A. Number of employees for pay period including March 12, 2012 0030

B. Payroll before deductions (Exclude employer's cost for fringe benefits.) Mark "X" if None

	2012		
	\$ Bil.	Mil.	Thou.
1. Annual payroll 0300 <input type="checkbox"/>			
2. First quarter payroll (January-March 2012) 0310 <input type="checkbox"/>			

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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.**

Building inspection services

- 0700
- 541 350 00 1 Home or building inspection services
 - 541 350 00 2 Specific element inspection services such as structural, electrical, and roofing
 - 541 620 00 7 Environmental hazard detection services
 - 561 710 00 5 Pest inspection, control and extermination services
 - 777 541 04 2 Other inspection services - Describe

0701

Testing services

- 541 380 00 9 Radon testing
- 541 380 00 1 Testing laboratory, excluding veterinary and medical

CONTINUE WITH **19** ON PAGE 4

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

21 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 Yes

0999 No

HOW TO REPORT PERCENTS

Percents should be **rounded to whole** percents.

If figure is **38.76%** of total sales: **Report** →

2012			
Report thousands of dollars OR whole percents. Estimates are acceptable.			
\$ Bil.	Mil.	Thou.	Percent
			39

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.)

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Line 1 - Report receipts from visual examination of the components forming a commercial property such as the structure; interior and exterior elements; heating, cooling, ventilation, and electrical systems; roofing; plumbing; insulation; fireplaces and solid fuel burning appliances. This service usually includes a report to the client on any defects or deficiencies. Include estimates of the cost of the remediation action, as well as an interview and record search related to the property under examination. Report inspection services related to homes and residential properties with fewer than four residential units on **line 2**.

Line 2 - Report receipts from visual examinations of the components forming a residential property such as the structure; interior and exterior elements; heating, cooling, ventilation, and electrical systems; roofing; plumbing; insulation; fireplaces and solid fuel burning appliances. This service usually includes a report to the client on any defects or deficiencies. Include estimates of the cost of the remediation action, as well as an interview and record search related to the property under examination. Report inspection services related to homes and residential properties with four or more residential units on **line 1**. Report inspection services related to new home construction on **line 3**.

Line 4 - Report receipts from visual examinations of residential property combined with assessing the level of activity and extent of damage caused by termites or other wood-destroying organisms. This service usually includes a report to the client on any defects or deficiencies and may include estimates of the cost of remedial action as well as an interview and record search related to the property under examination. Report pest inspection services when not combined with home inspection services on **line 7**.

Line 5 - Report receipts from the detection of the presence of environmental hazards such as lead-based paint, radon, asbestos, mold, water or air contamination, carbon monoxide or carbon dioxide, and underground fuel tanks, etc.

Line 6 - Report receipts from specific element, system, or site feature inspection services when not undertaken as part of a standard property condition assessment.

Line 6f - Report receipts from visual examination of a building's exterior elements to identify type, material, condition, potential impact on building, capacity, general adequacy, and safety concerns. Include examination of vegetation, drainage, patios, balconies, stairs, railings, wall cladding, flashing, exterior doors and windows, parking, pools, fountains, lighting, and signage.

Line 6h - Report receipts from visual examination of a property's recreational facilities. Include spas, saunas, steam baths, swimming pools, tennis courts, playground equipment, and other exercise, entertainment, or athletic facilities.

Line 6i - Report receipts from a visual examination of specific elements, systems, or site features forming part of a property not elsewhere classified. Include examining elevators and escalators; life safety equipment such as fire alarms, fire sprinkler systems, and security systems; docks, break-walls, and sea walls; etc.

Line 9 - Report receipts from other services related to building inspection. Include expert witness services; technical audits and reserve fund studies of condominiums and co-operative dwellings; economic analysis of building defects, including cost estimates; and other post-inspection consulting services; etc.

Description of sales, shipments, receipts, or revenue	2012			
	Report thousands of dollars OR whole percents. Estimates are acceptable.			
	\$ Bil.	Mil.	Thou.	Percent
1. Commercial building inspection services 38230				
2. Home inspection services (Include only buildings with fewer than four residences.) 38200				

CONTINUE WITH 22 ON PAGE 6

CONTINUE ON PAGE 6

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22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

Description of sales, shipments, receipts, or revenue	2012			
	Report thousands of dollars OR whole percents. Estimates are acceptable.			
	\$ Bil.	Mil.	Thou.	Percent
3. New home construction inspection services 38220				
4. Combined home and pest inspection services 38210				
5. Environmental hazard detection services (Include asbestos, lead-based paint, radon, and mold.) 38240				
6. Specific element inspection services				
a. Structural component inspection services 36571				
b. Electrical system inspection services 36572				
c. Roofing inspection services 36573				
d. Heating and cooling system inspection services 36574				
e. Septic system inspection services 36575				
f. Exterior inspection services 36576				
g. Moisture intrusion analysis services 36577				
h. Recreational facilities inspection services 36578				
i. Other specific element inspection services - Describe ↴				
<input type="text"/> 36579				
j. Add lines 6a through 6i 36570				
7. Pest inspection services 38260				
8. All other inspection services - Describe ↴				
<input type="text"/> 36580				
9. Other services related to building inspection - Describe ↴				
<input type="text"/> 38270				

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CONTINUE WITH **22** ON PAGE 7

CONTINUE ON PAGE 7

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

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

Description of sales, shipments, receipts, or revenue	2012			
	Report thousands of dollars OR whole percents. Estimates are acceptable.			
	\$ Bil.	Mil.	Thou.	Percent
10. Resale of merchandise - Describe ∇ <div style="border: 1px solid black; height: 30px; width: 100%;"></div>				
39697				
11. All other operating receipts - Describe if more than 10 percent of total receipts ∇ <div style="border: 1px solid black; height: 30px; width: 100%;"></div>				
39729				
12. TOTAL OPERATING RECEIPTS - Sum of lines should equal 5 if reporting in dollars 39850				100

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23 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 Yes - Go to line B

0912 No - Go to **30**

2012		
\$ Bil.	Mil.	Thou.

B. Amount of receipts or revenue for exported services 0914

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

27-29 Not Applicable.

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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.

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

Yes

No - Enter time period covered →

FROM	Month	Year	TO	Month	Year
	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>

Name of person to contact regarding this report

Title

Area code	Number	Extension
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax	Area code	Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

E-mail address

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

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

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