

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

RE-53191 (12/28/2006)

2007 ECONOMIC CENSUS

Real Estate Services Classification

OMB No. 0607-0931: Approval Expires 12/31/2008

DUE DATE FEBRUARY 12, 2008

Mail your completed form to:

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

Need help or have questions about filling out this form?

Visit www.census.gov/econhelp

- OR -

Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

RE-53191

INFORMATION COPY DO NOT USE TO REPORT

(Please correct any errors in this mailing address.)

X

0

1 2 3 4 5 6 7 8 9

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. Please center numbers in their respective boxes. Examples:
- Do not use pencil or felt-tip pen. Do not put slashes through 0 or 7.

The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where

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.

| O | Not Applicable. |
|----------|-------------------|
| 2 | PHYSICAL LOCATION |

• Place an "X" inside the box.

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 | |
|------|-----------------------|-----|
| | | 00: |
| 0032 | No - Enter → physical | |
| | location | 00: |

| 0035 Number and street | | | | | |
|---|-------|-------|----------------|---|--|
| | | | | | |
| | | | | | |
| 0036 City, town, village, etc. | 0037 | State | 0038 ZIP Code | | |
| | | | | | |
| | | 1 | | - | |
| ally located inside the legal boundaries of the | city, | town, | village, etc.? | | |

| В. | 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 kno |
|------|-----|------|----|------|---------------------|------|------------|
| | | | | | 9 | | |

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

| 0046 | City, village, or borough | 0047 | Town or township 004 | 8 | Other | 0024 | Do not know |
|------|---------------------------|------|----------------------|---|-------|------|-------------|

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| | O 1 O 1 (12/1 | .0,2000) | | | | | | | | ı aye |
|--|---------------|----------|--|------|---------|----------|--------|-------|-----|-------|
| Which | ONE of th | ne foll | owing best describes this establishment's operational st | atus | at the | end o | of 200 |)7? | | |
| (Mark | _ | | | | | | | | | |
| 0011 L | ⊔ In oper | ation | 0013 L Temporarily 0 | orse | easona | illy ina | ctive | | | |
| 0014 | Ceased | opera | ition - Give date at right | | | | Mon | th | Day | Year |
| 0015 | AND e | nter na | ame and address of new owner or operator | | | 0018 | | | 1 | |
| | 0060 Na | me of | new owner or operator | | | 0061 E | IN (9 | digit | s) | |
| | | | | | | | - | | | |
| | 0062 M | ailing a | ddress (Number and street, P.O. Box, etc.) | | | | | | | |
| Which ONE of the following best describes this establishment's operational status at the end of 2007? (Mark "X" only ONE box.) 10011 In operation 10013 Temporarily or seasonally inactive 10014 Ceased operation - Give date at right | | | | | | | | | | |
| | 0063 Ci | ty, tow | n, village, etc. | 0064 | State | 0065 Z | IP Co | de | | 1 1 1 |
| | | | | | | | | | - | |
| 0016 | Other - | Speci | fy | | | | | | | |
| 4 - 1 8 N | Not Applica | ıble. | | | | | | | | |
| _ | | | | | | | | | | |
| | | | | of b | ousines | ss in 2 | 007? | | | |
| Rea | l estate a | gents | brokers | | | | | | | |
| 0700 5 | 31 210 10 1 | | Agent or broker - residential real estate | | | | | | | |
| 5 | 31 210 90 1 | | Agent or broker - nonresidential real estate | | | | | | | |
| 5 | 31 210 10 2 | | Time share sales or resales | | | | | | | |
| 5 | 31 210 10 3 | | Resort/vacation property rental and leasing | | | | | | | |
| Rea | l estate p | roper | ty management | | | | | | | |
| 5 | 31 311 00 1 | | Property manager - residential real estate | | | | | | | |
| 5 | 31 312 00 1 | | Property manager - nonresidential real estate | | | | | | | |
| 5 | 31 311 00 2 | | Time share management | | | | | | | |
| 5 | 31 311 00 3 | | Resort/vacation property management | | | | | | | |
| 8 | 12 220 00 4 | | Cemetery manager | | | | | | | |
| 8 | 13 990 40 2 | | Condominium or cooperative owners' association | | | | | | | |
| Act | ivities rel | ated 1 | o real estate | | | | | | | |
| 5 | 31 320 00 2 | | Appraiser - real estate | | | | | | | |
| Sold or leased to another operator - Give date at right AND enter name and address of new owner or operator and Employer (denthification Number (EMI) below? Sold Name of new owner or operator | | | | | | | | | | |
| 5 | 31 390 00 2 | | Auction service - real estate | | | | | | | |
| 5 | 31 390 00 3 | | Escrow agent - real estate | | | | | | | |
| 5 | 31 390 00 4 | | Fiduciary agent - real estate | | | | | | | |
| | | | CONTINUE WITH ® ON PAGE 3 | | | | | | | |

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| If not show Number (C | vn, please FN) from t | ente he m | r your 11-digit Census File ailing address. | | | | | | | | |
|------------------------------|--------------------------|--------------|--|--------------|------------|------|----------------|-------------|-------|-----|-------|
| 19 KIND C | F BUSINES | SS - C | ontinued | | | | | | | | |
| Activ | rities relat | ed to | real estate - Continued | | | | | | | | |
| ⁰⁷⁰⁰ 53 | 1 390 00 5 | | Real estate consultant | | | | | | | | |
| 53 | 1 390 00 6 | | Real estate asset managemen | nt | | | | | | | |
| 53 | 1 390 00 7 | | Real estate relocation service | :S | | | | | | | |
| 54 | 1 191 00 1 | | Title abstract or settlement o | ffices | | | | | | | |
| 54 | 1 191 00 2 | | Title search company | | | | | | | | |
| 522 310 00 2 Mortgage broker | | | | | | | | | | | |
| 23 | 7 210 00 3 | | Subdividing and preparing la | nd int | o lots for | sale | | | | | |
| 77 | 7 530 00 1 | | Other real estate service - <i>Sp</i> | ecify - | 7 | | | | | | |
| 0701 | | | | | | | | | | | |
| Othe | r business | acti | | | | | | | | | |
| | 4 210 00 7 | | Insurance agent or broker | | | | | | | | |
| 77 | 5 000 00 1 | | Other kind of business or act | ivity - | Specify - | 7 | | | | | |
| | | | | | | | | | | | |
| 0701 | | | | | | | | | | | |
| 30 CERTIF | ICATION - ⁻ | This r | eport is substantially accurate this report a calendar year? | | | | | ce with the | | | Year |
| ☐ Yes | | | No - Enter time period covered | d — ▶ | FROM | | II | 1 | то | | 1 1 1 |
| Name of | person to cor | ntact r | egarding this report | | Title | | | | | | |
| | | | | | | | | | | | |
| | Are | ea cod | le Number | Exte | nsion | | | Area code | | Num | nber |
| Telepho | ne | | - | | | Fax | (| | | - | |
| Internet e | -mail address | S | | | | | Б. | | Month | Day | Year |
| | | | | | | | Date comple | | | | |
| | Thanl | k yo | ou for completing yo | ur 2 | 2007 E | CONO | MIC C | ENSU | S for | m. | |

531910

Thank you for completing your 2007 ECONOMIC CENSUS form.

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