



# 2002 ECONOMIC CENSUS CONSTRUCTION

FORM  
**CC-23805**

OMB No. 0607-0893: Approval Expires 08/31/2004

**DUE DATE**  
**FEBRUARY 12, 2003**

**Mail** your completed form to:  
**U.S. CENSUS BUREAU**  
**1201 East 10th Street**  
**Jeffersonville, IN 47134-0001**

CC-23805

**Please read** the accompanying information sheet(s) before answering the questions.

**Need help or have questions about filling out this form?**

**Visit** our Web site at [www.census.gov/econhelp](http://www.census.gov/econhelp)

**Call** 1-800-233-6136, between 8:00 a.m. and 8:00 p.m., Eastern time, Monday through Friday.

**- OR -**

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

**INFORMATION COPY  
DO NOT USE TO REPORT**

(Please correct any errors in this mailing address.)

**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 ink.
- Do not use pencil.
- Place an "X" inside the box.
- Please center numbers in their respective boxes. Examples:
- Do not put slashes through 0 or 7.

<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
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The reporting unit for this form is a construction establishment. A construction **establishment** is generally a permanent office, payroll office, or other place where business activities related to construction are conducted. A construction establishment manages one or more projects or jobs and is usually maintained on a continuing basis. For examples and further clarification, see information sheet(s).

**1 MONTHS IN OPERATION** Mark "X" if None

2002	
Number of months	
Number of months in operation during 2002 (If none, mark "X" and go to 29.) . . . . . 0002	<input type="checkbox"/>

**2 EMPLOYER IDENTIFICATION NUMBER**

Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2002 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021  Yes      0022  No - Enter current EIN (9 digits) → 0025

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**3 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

0032  No - Enter physical location →

0035 Number and street			
0036 City, town, village, etc.		0037 State	0038 ZIP Code

**B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?**

0041  Yes      0042  No      0043  No legal boundaries      0044  Do not know

**C. Type of municipality where this establishment is physically located**

0046  City, village, or borough      0047  Town or township      0048  Other or do not know

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

**6** EMPLOYMENT AND PAYROLL

**A.** Number of employees

**Include:**

- Full- and part-time employees 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 in the mailing address or corrected in 2.

**Exclude:**

- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Temporary staffing obtained from a staffing service.
- Subcontractors and their employees.

For further clarification, see information sheet(s).

Number of **construction workers** includes:

- Apprentices.
- Working foremen.
- Equipment operators and mechanics.
- Journeymen.
- Job-site record keepers.
- Craftsmen.
- Laborers.
- Truck drivers and helpers.
- Others engaged directly in construction.

Number of **other employees** includes:

- Supervisors above working foremen.
- Office staff.
- Executives.
- Architects.
- Personnel staff.
- Engineers.
- Accounting staff.
- Purchasing agents.
- Others engaged in nonconstruction activities.

		Number of employees for pay periods including the 12th of -							
		0	March 2002	1	May 2002	2	August 2002	3	November 2002
<b>1.</b>	Number of construction workers . . . . .	033							
<b>2.</b>	Number of other employees . . . . .	034							
<b>3. TOTAL</b>	(Sum lines A1 and A2) . . . . .	032							

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

**1.** Annual payroll

- a.** Construction workers . . . . . 0301
- b.** Other employees . . . . . 0302
- c. TOTAL** (Sum lines B1a and B1b) . . . . . 0300

**2.** First quarter payroll (January-March, 2002) . . . . . 0310

Mark "X" if None	2002	
	\$ Mil.	Thou.
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

**C.** Employer's cost for fringe benefits

- 1.** Legally required fringe benefits (Include employer payments for Social Security, Medicare, unemployment compensation, workmen's compensation, and State disability programs, if required.) . . . . . 0221
- 2.** Voluntarily provided fringe benefits (Include such items as payments for life insurance, medical insurance, pensions, welfare benefits, and union-negotiated benefits.) . . . . . 0222
- 3. TOTAL** (Sum lines C1 and C2) . . . . . 0220

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**7** LEASED EMPLOYMENT AND PAYROLL

**A.** Did this establishment have any full- or part-time leased employees whose payroll was filed under a leasing company's EIN?

**Exclude:**

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- 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.
- Employees already reported in **6**.

For further clarification, see information sheet(s).

0241  Yes - Go to line B

0242  No - Go to **10**

**B.** Number of leased employees

Number of **leased construction workers** includes:

- Apprentices.
- Working foremen.
- Equipment operators and mechanics.
- Journeymen.
- Job-site record keepers.
- Craftsmen.
- Laborers.
- Truck drivers and helpers.
- Others engaged directly in construction.

Number of **other leased employees** includes:

- Supervisors above working foremen.
- Office staff.
- Executives.
- Architects.
- Personnel staff.
- Engineers.
- Accounting staff.
- Purchasing agents.
- Others engaged in nonconstruction activities.

		Number of employees for pay periods including the 12th of -							
		0	March 2002	1	May 2002	2	August 2002	3	November 2002
<b>1.</b>	Number of leased construction workers . . . . .	038							
<b>2.</b>	Number of other leased employees . . . . .	039							
<b>3. TOTAL</b>	(Sum lines B1 and B2) . . . . .	037							

**C.** Payroll for leased employees before deductions (Exclude employer's cost for fringe benefits.)

		Mark "X" if None	2002	
			\$ Mil.	Thou.
<b>1.</b>	Annual payroll			
<b>a.</b>	Leased construction workers . . . . .	0351	<input type="checkbox"/>	
<b>b.</b>	Other leased employees . . . . .	0352	<input type="checkbox"/>	
<b>c. TOTAL</b>	(Sum lines C1a and C1b) . . . . .	0350	<input type="checkbox"/>	
<b>2.</b>	First quarter payroll for leased employees (January-March, 2002) . . . . .	0360	<input type="checkbox"/>	
<b>D.</b>	Employer's fringe benefit cost for leased employees			
<b>1.</b>	Legally required fringe benefits (Include employer payments for Social Security, Medicare, unemployment compensation, workmen's compensation, and State disability programs, if required.) . . . . .	0226	<input type="checkbox"/>	
<b>2.</b>	Voluntarily provided fringe benefits (Include such items as payments for life insurance, medical insurance, pensions, welfare benefits, and union-negotiated benefits.) . . . . .	0227	<input type="checkbox"/>	
<b>3. TOTAL</b>	(Sum lines D1 and D2) . . . . .	0225	<input type="checkbox"/>	

**8 - 9** Not Applicable.

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

**10** INVENTORIES

Mark "X" if None

End of 2002	
\$ Mil.	Thou.

Mark "X" if None

End of 2001	
\$ Mil.	Thou.

Value of inventories for materials and supplies (Exclude work in progress and finished units.) . . . . . 0462

0472

**11** Not Applicable.

**12** ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION

(Do not include land.)

Mark "X" if None

2002	
Estimates are acceptable	
\$ Mil.	Thou.

**A.** Gross value of depreciable assets (usually original cost) at the beginning of the year.. 0500

**B.** Capital expenditures for (new and used) depreciable assets . . . . . 0520

**C.** Gross value of depreciable assets sold, retired, scrapped, destroyed, etc.. . . . . 0510

**D.** Gross value of depreciable assets (usually original cost) at the end of the year (Sum lines A and B minus C) . . . . . 0505

**E.** Depreciation charges for the year . . . . . 0540

**13** RENTAL PAYMENTS

(Exclude capital leases (leases with a contract to own at the end of the lease).)

Mark "X" if None

2002	
\$ Mil.	Thou.

**A.** Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles. . . . . 0552

**B.** Rental or lease of buildings, job-site trailers, and other structures . . . . . 0551

**14** Not Applicable.



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**15** SELECTED EXPENSES

**A.** Cost of materials, subcontract work, fuels, and electricity (Include current account expenses normally considered as cost of work performed or job-specific costs.)

1. Cost of materials, parts, and supplies. . . . . 0421

**Include:**

- All job-site, office, and construction materials and supplies.
- Cost of materials purchased by this establishment for subcontractors.

**Exclude:**

- Cost of manufacturing and production machinery, furniture, etc. (any item installed that is not part of a building structure).

2. Cost of construction work subcontracted out to others (Exclude the cost of materials purchased by this establishment for subcontractors.) . . . . . 0423

3. Cost of fuels for heat, power, lubricants

a. Natural gas and manufactured gas (propane) . . . . . 0431

b. Gasoline and diesel fuel - ON highway (not at site). . . . . 0432

c. Gasoline and diesel fuel - OFF highway (at site) . . . . . 0433

d. All other fuels and lubricants, including heating oils, lubricating oils, and greases . . . . . 0434

4. Cost of electricity . . . . . 0425

Mark "X" if None

2002		
\$ Bil.	Mil.	Thou.

**B.** Selected purchased services

**Include:**

- Current account expenses normally considered as overhead or non-job-related costs purchased from other companies.

**Exclude:**

- Cost of CONSTRUCTION activities subcontracted to others and reported in 15, line A2.
- Salaries paid to employees of this establishment for performing these services.

1. Purchased maintenance and repair of construction equipment and tools; machinery; office equipment, furniture, and vehicles, including related service contracts . . . . . 0401

2. Purchased maintenance and repair of buildings, job-site trailers, and other structures (Exclude janitorial services.) . . . . . 0400

3. Purchased communication services (telephone, Internet, connectivity, online services, FAX, cellular phones, etc.). . . . . 0402

4. Purchased legal services . . . . . 0403

5. Purchased accounting, auditing, and bookkeeping services. . . . . 0404

6. Purchased advertising and promotional services (advertising, marketing, promotional, or public relations services) . . . . . 0405

Mark "X" if None

2002	
\$ Mil.	Thou.

**16-21** Not Applicable.

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

HOW TO REPORT PERCENTS

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

**Report whole percents**

2002	
Percent	
39	%

**22** DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Kind of business  
Percent of the total reported in **4**, line C due to -

Code		2002	
		Percent of total business done	
0713	0711		

**A. Construction work activities**

Roofing contractor, except sheet metal	5612		%
Roofing contractor, sheet metal	5613		%
Gutter, downspout, fascia, or soffit contractor	5611		%
Siding contractor, except sheet metal	5614		%
Siding contractor, sheet metal	5616		%
Specialty sheet metal contractor, including metal ceiling, panel or shelving installation	5615		%
Finish carpentry contractor	5511		%
Framing contractor, except steel	5512		%
Framing contractor, steel	5513		%
Heating, ventilation, and air-conditioning contractor (HVAC)	5101		%
Painting contractor	5212		%
Insulation contractor, except boiler, pipe, or duct work	5423		%
Structural steel erection contractor	5912		%
Drywall contractor	5422		%
Waterproofing and weather stripping contractor	5982		%
Other kinds of construction (See information sheet(s) for list of construction activities.) Specify description and enter the code in the code column ↴			

0712  %

**B. Other business activity**

Manufacturing--products manufactured and sold to others	9915		%
Retail trade	9925		%
Wholesale trade	9922		%
Other business activities - Specify ↴			

0712  %

**C. TOTAL** (Percentages reported in A and B should equal 100%) 8005 100 %

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**23** TYPE OF CONSTRUCTION

Percent of the construction work reported in **4**, line A involved in the following types of construction. (Report these percentages in column (1) below on pages 8 and 9. IMPORTANT: Complete column (1) on both pages before completing columns (2) through (4). Then in columns (2), (3), and (4) allocate the percent for each line according to the three categories of construction. The sum of columns (2) through (4) should equal the entry in column (1). Refer to the information sheet(s) for a step by step example and for definitions of the three categories of construction.)

Type of construction	Code	2002						
		Categories of construction						
		Percent of construction work		New construction		Additions, alterations, or reconstruction		Maintenance and repair work
0615	0616	0614 (1)	0611 (2)	0612 (3)	0613 (4)	0614 (4)		
<b>A. BUILDING CONSTRUCTION</b>								
Single-family houses, detached . . . . .	316		%	%	%	%	%	%
Single-family houses, attached . . . . .	317		%	%	%	%	%	%
Apartment buildings (2 or more units), such as rentals, apartment-type condominiums and cooperatives . . . . .	318		%	%	%	%	%	%
Dormitories and barracks . . . . .	319		%	%	%	%	%	%
Manufacturing and industrial warehouses . . . . .	321		%	%	%	%	%	%
Grain elevators and dry cleaning plants . . . . .	322		%	%	%	%	%	%
Other manufacturing and industrial buildings such as factories, assembly plants, and industrial research laboratories . . . . .	323		%	%	%	%	%	%
Hotels, motels, and tourist cabins . . . . .	324		%	%	%	%	%	%
Office buildings . . . . .	325		%	%	%	%	%	%
Stores, restaurants, automobile service stations, and other commercial buildings . . . . .	326		%	%	%	%	%	%
Commercial warehouses such as distribution buildings and mini-storage . . . . .	327		%	%	%	%	%	%
Religious buildings . . . . .	328		%	%	%	%	%	%
Educational buildings . . . . .	329		%	%	%	%	%	%
Health care and institutional buildings . . . . .	331		%	%	%	%	%	%
Public safety buildings such as prisons, police, and fire stations . . . . .	332		%	%	%	%	%	%
Farm buildings, nonresidential (except grain elevators) . . . . .	333		%	%	%	%	%	%
Amusement, social, and recreational buildings . . . . .	334		%	%	%	%	%	%
Indoor swimming pools . . . . .	335		%	%	%	%	%	%
Other building construction - Specify ↴								
0615	338		%	%	%	%	%	%
<b>B. NONBUILDING CONSTRUCTION</b>								
Oil and gas pipelines (except gathering), pumping stations, storage tanks, and mains . . . . .	353		%	%	%	%	%	%
Power and cogeneration plants, except hydroelectric . . . . .	356		%	%	%	%	%	%
Power plants, hydroelectric . . . . .	357		%	%	%	%	%	%

CONTINUE WITH **23** ON PAGE 9 FOR ADDITIONAL TYPES OF CONSTRUCTION

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

**23** TYPE OF CONSTRUCTION - Continued

Type of construction	Code	2002								
		Categories of construction								
		Percent of construction work			New construction		Additions, alterations, or reconstruction		Maintenance and repair work	
0615	0616	0614	(1)	0611	(2)	0612	(3)	0613	(4)	
<b>B. NONBUILDING CONSTRUCTION - Continued</b>										
Chemical (except petrochemical) complexes/plants, blast furnaces, and mining appurtenances . . . . .	359			%		%		%		%
Petrochemical plants and petroleum refineries . . . . .	364			%		%		%		%
Sewage treatment plants . . . . .	361			%		%		%		%
Water treatment plants . . . . .	362			%		%		%		%
Harbor and port facilities . . . . .	373			%		%		%		%
Outdoor recreational areas, such as outdoor athletic fields, courts, golf courses, and camp grounds . . . . .	381			%		%		%		%
Outdoor swimming pools . . . . .	375			%		%		%		%
Ships . . . . .	384			%		%		%		%
Other nonbuilding construction - Specify $\nearrow$										
0615	395			%		%		%		%
<b>C. TOTAL value of construction work done in 2002 (Sum columns 2 through 4 should equal 100% in column 1). . . . .</b>	399	1	0	0	%		%		%	%

**24-25** Not Applicable.

**26** SPECIAL INQUIRIES

**A. OWNERSHIP OF CONSTRUCTION PROJECTS**

Percent of the construction work reported in **4**, line A on projects owned by the following:

	2002	Percent
1. Private businesses and individuals . . . . .	9000	%
2. State and local governments . . . . .	9001	%
3. Federal government. . . . .	9002	%
<b>4. TOTAL (Percentages reported in lines A1 through A3 should equal 100%.) . . . . .</b>		<b>1 0 0</b> %

**B. CONSTRUCTION WORK DONE AS A SUBCONTRACTOR**

Percent of the amount you reported in **4**, line A which represents work you did for other contractors or builders

(Enter "0" if you did not subcontract work from other contractors or builders.) . . . . . 9100

2002	Percent
	%

CONTINUE WITH **26** ON PAGE 10

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**26** SPECIAL INQUIRIES - Continued

**C. CONSTRUCTION WORK DONE BY STATE**

Percent of the construction work reported in **4**, line A which occurred in each state  
(The sum of the percentages reported should equal 100%.)

	State	2002	
		Percent	
9201	Alabama		%
9202	Alaska		%
9204	Arizona		%
9205	Arkansas		%
9206	California		%
9208	Colorado		%
9209	Connecticut		%
9210	Delaware		%
9211	District of Columbia		%
9212	Florida		%
9213	Georgia		%
9215	Hawaii		%
9216	Idaho		%
9217	Illinois		%
9218	Indiana		%
9219	Iowa		%
9220	Kansas		%
9221	Kentucky		%

	State	2002	
		Percent	
9222	Louisiana		%
9223	Maine		%
9224	Maryland		%
9225	Massachusetts		%
9226	Michigan		%
9227	Minnesota		%
9228	Mississippi		%
9229	Missouri		%
9230	Montana		%
9231	Nebraska		%
9232	Nevada		%
9233	New Hampshire		%
9234	New Jersey		%
9235	New Mexico		%
9236	New York		%
9237	North Carolina		%
9238	North Dakota		%
9239	Ohio		%

	State	2002	
		Percent	
9240	Oklahoma		%
9241	Oregon		%
9242	Pennsylvania		%
9244	Rhode Island		%
9245	South Carolina		%
9246	South Dakota		%
9247	Tennessee		%
9248	Texas		%
9249	Utah		%
9250	Vermont		%
9251	Virginia		%
9253	Washington		%
9254	West Virginia		%
9255	Wisconsin		%
9256	Wyoming		%
	<b>United States</b>	1 0 0	%

**27-28** Not Applicable.



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

**29 OPERATIONAL STATUS**

Activity that best describes this establishment's status at the end of 2002  
(Mark "X" only ONE box.)

0011 <input type="checkbox"/> In operation	0014 <input type="checkbox"/> Ceased operation - Give date at right →	0018	Month	Day	Year
0013 <input type="checkbox"/> Temporarily or seasonally inactive	0015 <input type="checkbox"/> Sold or leased to another operator - Give date at right AND enter new name and mailing address below ↴				

0060 Name of new owner or operator	0061 Employer Identification Number		
	Enter EIN of new owner (9 digits) →	-	
0062 Mailing address (number and street, P.O. Box, etc.)			
0063 City, town, village, etc.	0064 State	0065 ZIP Code	
		-	

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?

0078  Yes      0079  No - Enter time period covered →

FROM 0070	Month	Year	TO 0071	Month	Year

0072 Name of person to contact regarding this report	0073 Title

Telephone 0074	Area code	Number	Extension	Fax 0075	Area code	Number
		-				-

0076 Internet e-mail address	Date completed 0069	Month	Day	Year

**Thank you for completing your 2002 Economic Census form.**  
**PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

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