

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

FORM

DUE DATE FEBRUARY 12, 1998

SV-7304

1997 ECONOMIC CENSUS SERVICES TO BUILDINGS AND DWELLINGS

OMB No. 0607-0827: Approval Expires 10/31/99

SV-7304

If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:

BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001

Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday:

1-800-233-6136

Please read the accompanying instructions before answering the questions.

Census use

(Please correct any	errors in name,	address, ar	nd ZIP Code
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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 Census Bureau. By the same law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by Census Bureau employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

Item 1. EMPLOYER IDENTIFICATION NUMBER				in 4b -	Item 4. LEGAL FORM OF ORGANIZATION					
Is the Employer Identification Number (EIN) shown in the label the same as the one used for this establishment on its latest 1997 Employer's Quarterly Federal Tax Return, Treasury Form 941?			establish	nment on its	Which of the following best describes this establishment's legal form of organization during 1997? Mark (X) only ONE box.					
•••	•	- Report cui	rrant EIN	holow						
	094 I Fes Z INO-	- neport cui	rrent Envi	Delow	 1 ☐ Individual owner (sole proprietorship) 2 ☐ Partnership – Mark (X) this box if you file a 					
	(9	digits)			partnership Federal income tax form.					
lte	em 2. PHYSICAL LOCATION	l			5 Government – Specify					
a. Is this establishment's physical location the same as the address shown in the label? (P.O. box and rural route addresses are not physical locations)				same as I rural route	0 ☐ Corporation – Mark (X) this box if you file a corporate Federal income tax form, including Subchapter S corporations.					
	093 1 Yes 2 No -	– Report ph	ysical loc	ation below	9 Other – Specify					
Number and street				I	HOW TO REPORT Example: If a figure Dollar figures should be rounded to thousands of dollars. Example: If a figure Millions sam (000) (000)	ds lars				
	City, town, village, etc.		State	ZIP Code	DOLLAR is \$1,125,628.79 • Preferred 1 12	6				
					FIGURES report Acceptable 1 1 12	5 629				
b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?			nted inside, etc.?	de the legal	Item 5. DOLLAR VOLUME Mil. The	ou. Dol.				
	095 1 ☐ Yes 3 ☐ No legal boundaries				OPERATING RECEIPTS of this					
	2 No 4 Do 1				establishment in 1997					
					TEM 6. PATROLL	ou. Dol.				
c. In what type of municipality is this establishment physically located?			establish	ment	Payroll in 1997, BEFORE DEDUCTIONS	ì				
	· ·				a. Annual					
	096 1 ☐ City, village, or be 2 ☐ Town or township	_			031					
	3 Other - Specify				b. First quarter (January-March)					
	4 Do not know				item 7. EMPLOYIMEN I	nber				
d.	d. In what county (e.g., Dade County) is this establishment			blishment	032					
	physically located?				Number of paid employees for pay period including March 12, 1997 (Include both full- and part-time employees)					
lte	m 3. OPERATIONAL STAT	US		lumber of months						
a.	How many months during this establishment activel	1997 was y operated	00. I?	2						
b.	b. Which of the following best describes this establishment's status at the end of 1997? Mark (X) only ONE box.									
	001 1 In operation			Figures only						
	2 Temporarily or seasonally inactive Month Year			Month Year						
	3 Ceased operation	– Give dat	e at right							
4 Sold or leased to another operator – Give date at right AND enter name, etc., below			erator –		CONTINUE WITH ITEM 8 ON PAGE 2					
	Give date at right	t AND enter	name,							
	Give date at right	t AND enter	name,							
	Give date at right etc., below	t AND enter	name,							

Item 8. KIND OF BUSINESS OR ACTIVITY a. Mark (X) the ONE box which best describes the bus	iness	Item 9.	SOURCES OF RECEIPT	S – Co	ntinued			
or activity that accounted for the MAJOR portion of establishment's receipts in 1997.	this	LION TO	If figure is 38.76 %	of	Mil.	⊺ □ Thou.	⊺ □ Dol.	Per-
establishment s receipts in 1997.		HOW TO REPORT	total sales:			<u> </u>	1	cent
		PERCENTS	Report whole per	rcents				39
	070		Not acceptable —					38.76
Exterminating and pest control				Cen-	ESTIIV Repor	IATES a t dollars	re acce _l OR pe	otable. rcents.
Exterminating service		Sour	ces of receipts	sus use	•			Per-
Fumigating service	/342102			use	Mil.	Thou.	Dol.	cent
Janitorial service		a. Rug/carp	et and upholstery	400	401	!		402
Janitorial service	7349001	cleaning	or and apholocol,			 		
Housekeeping service (on fee or contract basis)	7349002	(1) In pla	ant	3601		İ		
Maid service (except registries)	7349003					 		
Window cleaning service		(2) On c	ustomers' premises	3602		<u> </u>		
Disinfecting service	7342201	b. Extermin control	ating and pest	3650		[
General building cleaning and maintenance (except major repairs)	7349005			3030		·		
			s cleaning and ance services			 		
Airplane cleaning and janitorial service Landscaping care and maintenance	4581031	(1) Nonr	esidential building			İ	l	
Lawn and garden service	0782001		ning services	3701		[
Ornamental shrub and tree service	0783001		dential cleaning			ĺ		
Rug, carpet, and upholstery cleaning		servi	ces	3702				
Rug, carpet, and upholstery cleaning service	7217001	d. Landscar maintena	oing care and			İ		
Other cleaning and maintenance		mamilena	ance			 		
Swimming pool cleaning and maintenance		(1) Lawr	and garden services	3751		İ		
service		(2) Orna	mental shrub and tree					
Chimney cleaning service		servi		3752		1		
Gutter cleaning service		e. Snowplo	wing and .			1		
Duct cleaning service		streetcle	aning services	3770		1		
Furnace cleaning service		f. Swimmin	ng pool cleaning ntenance services	3780		i	ĺ	
Cesspool cleaning, sewer cleaning, and rodding Drain cleaning (except plumbing repair)		g. Sales of	merchandise,			1		
	7039321	separate	from services - Describe if this is			1		
Residential exterior cleaning service (pressure/power washing)	7389052	largest s	ource of receipts			! 		
Fire and flood cleanup service	7349007	076				[
Industrial machines and equipment repair	7699031							
Laundry or drycleaning service – Describe	7777776							
				8613		1		
		h . All other	receipts – Describe					
Construction site cleanup service	1799401		han 10 percent of			ļ		
All other cleaning and maintenance – Describe			eipis			[[
		077				İ		
						[
All other services Home and building inspection service	7389121			8962		1		
Facilities support management services (providing	<u> </u>	i TOTAL (Should equal item 5			1		
a range of services, including operating staff, to support operations within a client's facility. Not			if reporting in dollars)	8990		! 		100%
involved with core of client's business)	8744001	Item 10.	RECEIPTS, BY CLASS (OF CLIE	NT		Report in	
			e percentage of receipt y class of client.	s (repo	rted	450	ole pere	51113
General building repair or construction trade contractor (painting, plumbing, electrical,		a. Individua	•					
carpentry, HVAC repair, brickwork, etc.) – Describe	1700001	b. Trade, fa	rming, industrial, trans	portati	on,	451		
		financial,	, and other business fir	ms				
		- Fadaval (?			452		
		c. Federal (Jovernment			453		
Other kind of activity – <i>Describe</i>	7777777	d. State and	d local governments					
						454		
		e. All other						
	115 <u> </u>	,					4000/	
engaged in providing management, administrative, or support services to	1 Yes	f. TOTAL					100%	
other establishments of the same company (rather than for the general	2 L No		EXPORTED SERVICES					
public or other business firms) in 1997?		or client (in	exported service is a s dividual, government,	busine	ss estak	olishmer	nt, etc.)	ner
Item 9. SOURCES OF RECEIPTS	District of C	side the United States Columbia, U.S. Commo	nwealt	h Territe	ories, or	U.S.		
Report receipts by source either in dollar figures (see exa	ample for item 5)		s). Services performed as (i.e., foreign parent f					etc.)
or as percentages (in whole percents) of the total - see e	•	are included	d. Services provided to	dome	stic sub	sidiaries	of fore	ign
Line c – Report receipts from providing nonresidentia								
cleaning and maintenance services on line c(1). Repor	t receipts	item 5 incl	ceipts reported in lude any amounts			Mil.	Thou.	Dol.
from residential cleaning services on line c(2). Report airplane cleaning and janitorial services on line c(1). R	eport	received fo	or exported services	?		406] I	
receipts from building repair work on line h. Line h – Include receipts from contracted services for	nainting	405 1 ☐ Ye	s – Amount ———		→		: 	
plumbing, electrical, carpentry, HVAC repair, brickworl		2 □ No					<u> </u>	

(n)	

Form SV-7304

lf fr	not shown, please enter om the address label on	your 11-digit C page 1	ensus File Number	Census	s File Number				
lt	em 12. OWNERSHIP, CO	NTROL, AND LO	CATIONS OF OPERATION	V					
a.	Is the FIRST DIGIT of yo	our Census File	Number (shown in the	address labe	el immediately after "CFN") a	a zero?			
	1 ☐ Yes – Comple 2 ☐ No – Skip to it								
b.	ls this company owned or controlled by another company?	Enter name,	Enter name, address, and EIN of the owning or controlling company						
	097 1 Yes ———	•			_				
	2 No				EIN (9 digits)				
C.	Does this company ow or control any other company or companies		address, and EIN of the o	owned or conti	rolled company				
	098 1 Yes	•							
	2 No				EIN (9 digits)				
						Number 079			
d.	How many establishme label (or as corrected in			ntification N	umber shown in the	0,0			
	If more than one, provide each establishment. The room is needed, continue	headquarters loca	ation should be first, foll	owed by all ot	her locations. If more				
	Estimates are acceptab	ole if book figures	s are not available.						
	Name					1997 Mil. Thou. Dol	ī		
	Number and street					Receipts 081			
					1	Annual 082	П		
1	City			State	ZIP Code	Paid employees for pay	H		
	Kind-of-business description	on		1		period including March 12			
						083			
						Census ⁰⁸⁸	П		
	Name					1997 Mil. Thou. Dol	_		
	N					081			
	Number and street					Receipts	H		
	City			State	ZIP Code	payroll			
2	Kind-of-business description	on				Paid employees for pay period including March 12	į		
						083			
						Census ⁰⁸⁸ use			
	Name					1997 Mil. Thou. Dol			
	Number and street					Receipts 081			
				la.	Table	Annual 082	П		
3	City			State	ZIP Code	Paid employees for pay			
	Kind-of-business description					period including March 12			
						Census ⁰⁸⁸ use			
R	EMARKS – Please use this	space for any ex	planations that may be e	essential in und	derstanding your reported data				
		· ·	-		pared in accordance with instru				
	eriod covered y this report	Mo. ¦ Year	TO: Mo. Ye	ear Name of p	person to contact regarding this	s report – <i>Print or type</i>			
Te	Area code	Number	Extension	Title			\neg		
	gnature of authorized pers	on				Date	\dashv		
	,								

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