



2002 ECONOMIC CENSUS PIPELINES

FORM
TW-48601

OMB No. 0607-0882: Approval Expires 07/31/2004

DUE DATE
FEBRUARY 12, 2003

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

TW-48601

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

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 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 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

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 -

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

HOW TO REPORT DOLLAR FIGURES

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

If a figure is **\$1,025,628.79**:

Report →

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

Report →

Mark "X" if None

2002			
\$ Bil.	Mil.	Thou.	Dol.
	1 0 2 6		

4 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None

Operating revenue 0100

2002			
\$ Bil.	Mil.	Thou.	Dol.

5 E-COMMERCE SALES, SHIPMENTS, RECEIPTS, OR REVENUE

A. Did this establishment have any e-commerce sales, receipts, and/or revenue in 2002? (*E-commerce includes sales, commissions, rents, or fees collected from any transaction completed over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system. Transactions are agreements between buyers and sellers to transfer ownership of, or rights to use, goods or services. Payment for these goods or services may or may not be made online. Please see the information sheet(s) for further clarification.*)

0181 Yes - Go to line B

0182 No - Go to 6

2002		
Estimates are acceptable		
\$ Mil.	Thou.	Dol.

B. E-commerce sales, receipts, and/or revenue of this establishment (*Include e-commerce sales, receipts, and/or revenue in 4. Exclude sales taxes.*) 0185

6 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 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.

For further clarification, see information sheet(s).

Mark "X" if None

A. Number of employees for pay period including March 12 0320

2002	
Number	

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

Mark "X" if None

1. Annual payroll 0300

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

2002		
\$ Mil.	Thou.	Dol.



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

7 LEASED EMPLOYMENT AND PAYROLL

A. Did this establishment have any full- or part-time leased employees whose payroll was filed under an employee 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 **13**

Mark "X" if None

2002		
Number		

B. Number of leased employees for pay period including March 12. 0370

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

1. Annual payroll for leased employees 0350

2002		
\$ Mil.	Thou.	Dol.

2. First quarter payroll for leased employees (January-March, 2002) 0360

Mark "X" if None

2002		
\$ Mil.	Thou.	Dol.

8-17 Not Applicable.

18 KIND OF BUSINESS

Principal kind of business in 2002
(Mark "X" only ONE box.)

Pipelines

- 0700 486 110 00 16 Crude petroleum
- 486 910 00 18 Refined petroleum, including liquefied petroleum gas
- 486 210 10 21 Pipeline transportation of natural gas and storage of natural gas
- 211 111 00 17 Petroleum and natural gas field gathering lines
- 486 990 00 11 Other pipelines - Specify ↴

0701

Other business activities

- 221 210 20 12 Natural gas distribution
- 774 000 00 18 Other kind of business or activity - Specify ↴

0701

19-21 Not Applicable.

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HOW TO REPORT PERCENTS		2002				
		Estimates are acceptable. Report dollars OR percents.				
		\$ Bil.	Mil.	Thou.	Dol.	Percent
If figure is 38.76% of total sales:		Report whole percents			3 9	

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE
 (Report sources of operating revenue for this establishment, either as a dollar figure or as a whole percent of total operating revenue (reported in 4). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more lines.)

Description of sales, shipments, receipts, or revenue	Cen- sus use	2002				
		Estimates are acceptable. Report dollars OR percents.				
		\$ Bil.	Mil.	Thou.	Dol.	Percent
0723	0720	0721				0722
1. Pipeline transportation of petroleum products and other commodities, including natural gas liquids						
a. Crude petroleum	46000					
b. Refined petroleum products	46010					
c. Other pipeline products	46020					
2. Pipeline transportation of natural gas and storage of natural gas from processing plants to local distribution systems, excluding the distribution of natural gas to final consumers	46030					
3. Sales of energy and resources						
a. Natural gas distribution to final consumer	49020					
b. Natural gas - power marketing and brokering	49030					
c. Mixed, manufactured, or liquefied gas	49040					
4. All other operating revenue - Specify ↴						
	49810					
5. Total (Should equal 4 if reporting in dollars.)	49990					1 0 0

23-25 Not Applicable.



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26 SPECIAL INQUIRIES

CONSTRUCTION ACTIVITY

1. Capital expenditures for new construction, including renovation *(Include labor and materials. Exclude land and the value of production machinery and equipment that are not an integral part of a structure.)*

Mark "X" if None

2002		
\$ Mil.	Thou.	Dol.

(If NONE, go to line 3.) 0900

2. Percentage of the capital expenditures (reported on line 1) that represented work done by your own employees as opposed to work done by contractors or other hired labor 0901

2002	
Whole percent of capital expenditures	
	%

3. Expenses for maintenance and repairs *(Exclude expenses for such activities as janitorial services, cleaning, lawn maintenance, etc.)*
(If NONE, go to 25.) 0918

Mark "X" if None

2002		
\$ Mil.	Thou.	Dol.

4. Percentage of the expenses for maintenance and repairs (reported on line 3) that represented work done by your own employees, as opposed to work done by contractors or other hired labor 0919

2002	
Whole percent of expenses	
	%

27 Not Applicable.



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28 ESTABLISHMENT ACTIVITIES

A. Indicate activities that were performed by this establishment or were performed for this establishment by another company during 2002.
(Mark "X" ALL that apply.)

	This activity was performed by this establishment	This activity was performed for this establishment by another company	This activity was not provided by this establishment
1. Product Development			
a. Product design/engineering	0921 <input type="checkbox"/>	0941 <input type="checkbox"/>	0961 <input type="checkbox"/>
b. Materials fabrication/processing/assembly/blending	0922 <input type="checkbox"/>	0942 <input type="checkbox"/>	0962 <input type="checkbox"/>
2. Order Fulfillment			
a. Bundling or kitting (combining multiple items into a prepackaged product)	0923 <input type="checkbox"/>	0943 <input type="checkbox"/>	0963 <input type="checkbox"/>
b. Pick and pack (taking goods from inventory and packaging them to fill orders)	0924 <input type="checkbox"/>	0944 <input type="checkbox"/>	0964 <input type="checkbox"/>
c. Warehousing	0925 <input type="checkbox"/>	0945 <input type="checkbox"/>	0965 <input type="checkbox"/>
d. Breaking bulk (reducing large shipments into smaller portions for customers)	0926 <input type="checkbox"/>	0946 <input type="checkbox"/>	0966 <input type="checkbox"/>
e. Local delivery (within a city, town, or other local area, including adjoining towns and suburban areas)	0927 <input type="checkbox"/>	0947 <input type="checkbox"/>	0967 <input type="checkbox"/>
f. Long distance delivery (beyond local areas and commercial zones)	0928 <input type="checkbox"/>	0948 <input type="checkbox"/>	0968 <input type="checkbox"/>
g. Less than truckload	0929 <input type="checkbox"/>	0949 <input type="checkbox"/>	0969 <input type="checkbox"/>
3. Other Services			
a. Customs brokerage (providing the services of a licensed customs broker).	0930 <input type="checkbox"/>	0950 <input type="checkbox"/>	0970 <input type="checkbox"/>
b. Logistics consulting (providing advice and expertise)	0931 <input type="checkbox"/>	0951 <input type="checkbox"/>	0971 <input type="checkbox"/>
c. Processing of returned merchandise	0932 <input type="checkbox"/>	0952 <input type="checkbox"/>	0972 <input type="checkbox"/>

B. During 2002 did this establishment:

1. Manage inventory owned by this establishment AND held at this location?	0936 <input type="checkbox"/>	Yes	0937 <input type="checkbox"/>	No
2. Manage inventory owned by this establishment BUT held at a customer's location?	0956 <input type="checkbox"/>	Yes	0957 <input type="checkbox"/>	No
3. Manage inventory owned by another company BUT held at this location?	0976 <input type="checkbox"/>	Yes	0977 <input type="checkbox"/>	No
4. Manage inventory owned by another company AND held somewhere other than at this location?	0994 <input type="checkbox"/>	Yes	0995 <input type="checkbox"/>	No



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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 <input type="checkbox"/> Yes	0079 <input type="checkbox"/> No - Enter time period covered →	FROM	Month	Year	TO	Month	Year
		0070			0071		

0072 Name of person to contact regarding this report	0073 Title

Telephone	Area code	Number	Extension	Fax	Area code	Number
0074				0075		

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

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

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