

USER'S GUIDE FOR THE PUBLIC USE TAPES

1983-1984 Nationwide Personal Transportation Study

Part 3:

Contains:

- Appendix C: Glossary of Terms
- Appendix D: 1983 NPTS Study Questionnaire
- Appendix E: Occupation Classification System Codes
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November 1985

APPENDIX C
GLOSSARY OF TERMS USED IN NPTS

APPENDIX C

GLOSSARY OF TERMS USED IN NPTS

This glossary provides the most common terms used in the NPTS survey and the definition of these terms. These definitions are provided to assist the user in the interpretation of the data.

Airport--A Commercial facility that services regularly scheduled airlines.

Carpool--A regularly scheduled traveling arrangement whereby two or more persons ride together in the same vehicle, sharing the driving and/or the cost of the trip, or simply riding together regularly with one or more persons doing the driving. If two or more household members regularly ride to work in the same vehicle, it is also considered a carpool.

Destination--For travel period trips, the destination is the farthest point of travel from the point of origin of a one-way trip of 75 miles or more.

In travel day trips, the destination is the point at which there is a break in travel.

Driver--A person who operates a motorized vehicle. If more than one person drives on a single trip, the person who drives the most miles is classified as the principal driver. If one or more household members share the driving, the percent of driving done by each household member is recorded separately. If non-household members share the driving, the total percent of driving done by all non-household members is recorded.

Employed--A person is considered employed if there is a definite arrangement for regular full-time or part-time work for pay every week or every month. A formal, definite arrangement with one or more employers to work a specified number of hours a week, or days a month, but on an irregular schedule during the work month is also considered employment. A person who is on call to work whenever there is a need for his (her) services is not considered employed.

Education Level--The number of years of regular schooling completed in graded public, private, or parochial schools, or in colleges, universities, or professional schools, whether day school or night school. Regular schooling is that which advances a person toward an elementary or high school diploma, or a college, university or professional school degree.

Family Income--The money income of all persons in a household, including those temporarily absent. Includes wages and salary (before deductions), commission, tips, cash bonuses; net income from a person's own (unincorporated) business, professional practice, or farm (gross receipts minus business expenses);

pensions, dividends, interest, unemployment or workmen's compensation, social security, veterans' payments, rent received from owned property (minus the operating costs), public assistance payments, regular gifts of money from friends or relatives not living in the household, alimony, child support, and other kinds of periodic money income other than earnings. Excludes income in kind, such as room and board, insurance, payments, lump-sum inheritances, occasional gifts of money from persons not living in the same household, money received from selling one's house, car, or other personal property, withdrawal of savings from banks, and tax refunds.

Federal-Aid Urban Area--An urban place of 5,000 or more population as determined by the Bureau of the Census.

Federal-Aid Rural Area--Any area outside of federal-aid urban areas.

Freeway, Tollway, or Expressway--A divided arterial highway for through traffic with full or partial control of access and grade separations at major intersections.

Head of Household--The one person who is regarded as the head by the members of the household. In most cases the husband is the head, if living in the household. In some cases, the head may be a parent of the chief wage earner or the only adult member of the household. An Armed Forces member is considered as the head only if he lives at home and is a household member. Only one head is designated for each household.

Household--A group of persons whose usual place of residence is a specific housing unit; these persons may or may not be related to each other. The total of all U.S. households represents the total civilian non-institutionalized population.

Household Trip--One or more household members traveling together.

Household Vehicle--A motorized vehicle that is owned, leased, rented or company-owned and left at home to be regularly used by household members during the reference period. Includes vehicles used solely for business purposes if kept at home, e.g., taxicabs, police cars, etc., which may be owned by, or assigned to, household members for their regular use. Includes vehicles brought home by a car sales person or auto mechanic, only if the vehicle was available for use by him (her) during the entire reference period. Includes all vehicles that were owned or available for use by members of the household during the reference period even though a vehicle may have been sold before the interview. Excludes vehicles that were not working and not expected to be working within 60 days, and vehicles that were purchased or received after the designated travel day.

Licensed Driver--Any person who holds a valid driver license from any state.

Means of Transportation--A personal mode used for going from one place (origin) to another (destination). Includes private and public motorized modes, as well as walking. For all travel day trips, each change of mode constitutes a separate trip. The following personal transportation modes are included:

- o Automobile: A privately owned and/or operated licensed motorized vehicle including cars, jeeps, dune buggies station wagons. Also includes leased and rented cars if they are privately operated and not picking up passengers in return for fare.
- o Vanbus/Minibus: Privately owned and/or operated vans and buses designed to carry from 5 to 13 passengers; for example, a Volkswagen bus.
- o Pickup Truck/Other Van: A small open-body motorized vehicle, privately owned and/or operated, with 4 to 6 tires, built on a chassis comparable to that of a passenger car. Accommodates fewer than 5 passengers. Includes travel trucks (service trucks) when they are not being used for commercial purposes.
- o Other Truck (Personal Use): The private use, either as a passenger or driver, of all other types of trucks, i.e.: dump trucks, trailer trucks, etc., when they are not being used for commercial purposes.
- o Motorcycle: Includes Harley-Davidson, Hondas, Vespas, etc. Does not include minibikes, etc., which cannot be licensed for highway use.
- o Self-Contained Recreational Vehicle: Includes recreational vehicles that are operated as a self-contained unit without being hitched to another vehicle; for example, a Winnebago motor home.
- o Taxi (Personal Use): The use of a passenger vehicle either by a driver or a passenger, which does not involve the duties of a professional driver for the payment of a fare by a passenger.
- o Bus: Includes Greyhounds, Trailways, etc.; mass transit systems and shuttle buses that are available to the general public. Also includes Dial-A-Bus and Senior Citizen buses that are available to the public. Does not include shuttle buses operated by a government agency or private industry for the convenience of employees, contracted or chartered buses or school buses. These latter types are included in "other."

- o Train: Includes commuter trains and passenger trains other than elevated trains and subways.
- o Streetcar: Includes trolleys, streetcars, and cable cars.
- o Elevated Rail or Subway: Includes elevated train and subway trains.
- o Airplane: Includes commercial airplanes and smaller planes that are available for use by the general public in exchange for a fare. Private planes and helicopters are included under "other."
- o Taxi (Commercial Use): The use of a taxicab by a driver for hire or by a passenger for fare. Also includes airport limousines. Does not include rental cars if they are privately operated and not picking up passengers in return for fare.
- o Truck (Commercial Use): Includes the commercial use, either as a driver or a passenger, of pickups, dump trucks, trailer trucks, being operated for business-related purposes.
- o Bicycles: Includes bicycles of all speeds and sizes and minibikes.
- o Walk: Includes jogging, walking, etc., provided the origin and destination are not the same.
- o Schoolbus: Includes county school buses, private school buses, and buses chartered from private companies for the express purposes of carrying students to/or from school and/or school-related activities. Does not include school buses chartered or reserved for other trips, such as church outings; these are included under "other."
- o Motorized Bicycle/(Often Called a Moped): Includes bicycles equipped with both pedals and a small engine, typically a horsepower or less.
- o Other: Includes any types of transportation not included above.

Motorized Vehicle: Includes all vehicles that are licensed for highway driving. Specifically excluded are snow mobiles, minibikes, etc.

Origin: Starting point of a trip.

Vehicle: Any vehicle that one or more nousehold members have purchased for private use regardless if paid for in full, or a gift or legacy to a household member for private use.

Passenger: For a specific trip, any occupant of a motorized vehicle, other than the driver.

Person (Household Member): All people, whether present or temporarily absent, whose usual place of residence is the sample unit, or people staying in the sample unit who have no other usual place of residence elsewhere.

Person Miles: A measure of person travel. When one person travels one mile, one person mile of travel results. Where 2 or more persons travel together in the same vehicle, each person makes the same number of person miles as the vehicle miles. Therefore, four persons traveling 5 miles in the same vehicle, make 4 times 5 person miles or 20 person miles.

Person Nights: The number of nights spent by each person away from home on a travel period trip. For example, two persons on a trip spending 5 nights away from home would result in 10 person nights.

Person Trip: A unit of person travel. When two or more persons travel together in the same vehicle, each person is counted as making one person trip.

Standard Metropolitan Statistical Area (SMSA): Except in the New England States, a standard metropolitan statistical area is a county or group of contiguous counties which contains at least one city of 50,000 inhabitants or more, or "twin cities" with a combined population of at least 50,000. In addition, contiguous counties are included in an SMSA if, according to certain criteria, they are socially and economically integrated with the central city. In the New England States, SMSA's consist of towns and cities instead of counties.

Rural Area: Any area outside of an urban place.

Stationwagon: A passenger vehicle, having an enclosed body of paneled design with two or more seats, where the rear seats can be removed or folded down to create larger luggage or freight compartments.

Train Station: A depot where regularly scheduled trains may be boarded for travel to cities at least 30 miles away.

Stop: For travel period trips, a break in travel other than for gasoline, rest and food. For travel day trips, each stop is treated as a separate trip.

Travel Day: A 24-hour period from 4:00 a.m. to 3:59 a.m. designed by the Bureau of the Census as the reference period for studying trips and travel of a particular a household.

Travel Period: The 14 days immediately preceding the travel day of the same household.

Traveler: A person reporting a travel day and/or travel period trip(s).

Traveling Household: A household reporting at least one travel day and/or travel period trip.

Trip: A travel day trip is defined as any one-way travel from one address (place) to another by private motor vehicle, public transportation, bicycle, or walking. Jogging and walking for exercise are excluded, as well as all bicycling and walking for individuals under 14 years of age. When travel is to more than one destination, a separate trip exists each time one or both of the following criteria is satisfied:

- a. The travel time between two destinations exceeds 5 minutes.
- b. The purpose for travel to one destination is different from the purpose for travel to another.

The one exception is travel within a shopping center or mall. It is to be considered travel to one destination, regardless of the number of stores visited.

Trip: A travel period trip is one-way to a destination which is 75 miles-or-more from place of origin.

Trip Duration: For travel period trips, the number of nights spent away from home on a single trip, including time (nights) spent enroute and at the destination. For travel day trips, usually measured in minutes.

Trip Purpose: The main reason that motivated the trip. For purposes of this survey, there are 11 trip reasons. If there are more reasons than one, and the reasons do not involve different destinations, then only the main reason is chosen. If there are two or more reasons, and they each involve different destinations, then each reason is classified as a separate trip. The 11 trip reasons are defined as follows:

- o **To or from Work:** Includes travel to a place where one reports for work. It does not include any other work-related travel.
- o **Work-Related Business:** Trips related to business activities except to the place of work; for example, a plumber drives to a wholesale dealer to purchase supplies for his business.

- o Civic/Education/Religious: Trips to politician rallies, legislative hearings, voting places, etc.; to school, college, or university for class(es), PTA meetings, seminars, etc.; to church services or to participate in other religious activities. Social activities that take place at a church or school are not classified as religious or educational.
- o Doctor or Dentist: Trips made for medical, dental or psychiatric treatment or other related professional services.
- o Shopping: Includes "window-shopping" and purchases of commodities, such as groceries, furniture, textiles, etc., for use or consumption elsewhere.
- o Family or Personal Business: Trips taken to attend organized functions of the family or friends, such as weddings, graduations, reunions, etc. Includes purchase of services such as cleaning garments, beauty parlor treatments, servicing of an auto, etc.
- o Visit Friends or Relatives: Trips made to visit friends or relatives but not prompted by organized family affairs or an emergency.
- o Pleasure Driving: Includes driving trips made with no other purpose listed here but to "go for a drive" with no destination in mind; for example, a Sunday drive in the country.
- o Vacation: Trips reported by the respondent as "vacation."
- o Other Social or Recreation: Trips taken to the theater, restaurants, etc.
- o Other: Any purpose for a trip that does not fit into one of the above categories.

Vehicle Mile: A unit to measure vehicle travel made by a household vehicle: automobile, vanbus/minibus, pickup truck/other van, other truck (personal use), motorcycle, self-contained recreational vehicle, and taxi (personal use).

Vehicle Occupancy: The number of persons, including driver and passenger(s) in a vehicle; also includes persons who did not complete a whole trip.

Vehicle Trip: A trip by a single vehicle regardless of the number of persons in the vehicle. For purposes of this study, a vehicle trip is a trip made in a household vehicle.

Vehicle Type: For purposes of the Study, one of the 12 vehicle types used for coding purposes in the household motorized vehicle record of the NTS-2 Questionnaire.

Urbanized Area: Defined by the Bureau of the Census as:

- 1a. A central city of 50,000 inhabitants or more in 1960, or in a special census conducted by the Census Bureau since 1960, or in the 1970 census; or
- o. Twin cities, i.e., cities with contiguous boundaries and constituting for general social and economic purposes, a single community with a combined population of at least 50,000, and with the smaller of the twin cities having a population of at least 15,000.
2. Surrounding closely settled territory, including the following: (but excluding the rural portions of extended cities)
 - a. Incorporated places of 2,500 inhabitants or more.
 - b. Incorporated places with fewer than 2,500 inhabitants provided that each has a closely settled area of 100 housing units or more.
 - c. Small parcels of land, normally less than one square mile in area, having a population density of 1,000 inhabitants or more per square mile. The areas of large nonresidential tracts devoted to such urban land uses as railroad yards, airports, factories, parks, golf courses, and cemeteries are excluded in computing the population density.
 - d. Other similar small areas in unincorporated territory with lower population density provided that they serve
 - o to eliminate enclaves, or
 - o to close indentations in the urbanized areas of one mile or less across the open end, or
 - o to link outlying enumeration districts of qualifying density that are not more than 1 1/2 miles from the main body of the urbanized area,

Type Z Non-Interview: A person in an interviewed household for which trip information is incomplete but for which certain demographic information is available.

Urban Place: Defined by the Bureau of the Census as follows:

- a. A place of 2,500 inhabitants or more incorporated as a city, borough, village, or town (except towns in New England, New York, and Wisconsin);

- b. The densely settled fringe, whether incorporated or unincorporated, of urbanized areas;
- c. Towns in New England and townships in New Jersey and Pennsylvania that contain no incorporated municipalities as subdivisions and have either 25,000 inhabitants or more, or a population of 2,500 to 25,000 and a density of 1,500 persons or more per square mile;
- d. Counties in states other than the New England States, New Jersey, and Pennsylvania that have no incorporated municipalities within their boundaries and have a density of 1,500 persons or more per square mile; or
- e. Unincorporated places of 2,500 inhabitants or more.

APPENDIX D
1983 NPTS STUDY QUESTIONNAIRE

PGM 1 +

FORM NPTS-1
 U.S. DEPARTMENT OF COMMERCE
 BUREAU OF THE CENSUS
 ACTING AS COLLECTION AGENT FOR
 THE DEPARTMENT OF TRANSPORTATION

NATIONWIDE PERSONAL TRANSPORTATION STUDY QUESTIONNAIRE 1983

1. R.D. PSU NPTS serial CK digit Extra unit suffix Segment Serial Travel Mo. Day

2. What is your exact address?
 Address (Include House No., St., Apt. No., or other identification)

Place State ZIP code

NOTICE — Your report to the Census Bureau is confidential by law (Title 13, U.S. Code). It may be seen only by sworn Census employees and may be used only for statistical purposes.

D.M.B. No. 2125-0195:
 Approval Expires December 31, 1983

RECORD OF INTERVIEW

a. Questionnaire of questionnaires b. Interviewer code c. Letter sent (Circle one) Y N d. Line number of Household respondent e. Date completed FROM: Mo. Date TO: Mo. Date f. Designated travel period

3. TYPE OF STRUCTURE

1 Single family detached
 2 Single family attached to 1 or more structures
 3 Single family trailer or mobile home
 4 Multi-family 2-4 units
 5 Multi-family over 4 units
 6 Other — Specify _____

4. TENURE

Are your living quarters:
 1 Owned or being bought by someone in your household?
 2 Rented for cash?
 3 Occupied without cash payment of rent?

5. LAND USE

ASK ONLY IF MARKED
 a. Does this place you (own/rent) have 10 acres or more?
 1 Yes
 2 No
 b. During the past 12 months how much did sales of crops, livestock, and other farm products from this place amount to?
 1 \$1,000 or more
 2 \$250-\$999
 3 \$50-\$249
 4 Less than \$50

6. EXTRA UNIT

Are there any occupied or vacant quarters besides your own at (street address and unit designation, if any)?
 1 Yes — Complete this interview, then contact your Regional Office for instructions on handling the extra unit.
 2 No — Go to Household Information page.

FILL AT END OF INTERVIEW

7. TRANSCRIBE (From sections V and VI)
 Total number of household trips a. 14-day travel period b. Travel day

8. INTERVIEWER — Indicate the time of sunrise and sunset on travel day.
 a. Sunrise b. Sunset

9. NONINTERVIEW STATUS

TYPE A
 1 No one home
 2 Temporarily absent
 3 Refused
 4 Unable to locate
 5 Other — occupied

TYPE B
 6 Vacant — regular household furniture
 7 Vacant — storage of household furniture
 8 Temporarily occupied by persons with URE (except college housing)
 9 Unfit or to be demolished
 10 Under construction, not ready

TYPE C
 107 Demolished
 15 House or trailer moved
 16 Converted to permanent business or storage
 17 Merged
 18 Condemned
 19 Other — Specify _____

10. TYPE Z — Noninterview interview not obtained for:
 1 Household member refused
 2 Proxy refused
 3 Other — Specify _____

(Line No. Reason (Enter code from above))

(103)	
(104)	
(105)	
(106)	
(107)	
(108)	
(109)	
(110)	
(111)	
(112)	

NOTES

PGM 3 →

HOUSEHOLD INFORMATION

LINE NUMBER Circle line number of Household Respondent	HOUSEHOLD ROSTER (Last name first) What are the names of all persons living or staying here? Start with the name of the person or one of the persons who owns or rents this home.	RELATIONSHIP TO REFERENCE PERSON (RP) Ask if not apparent, What is . . . 's relationship to (read name of RP)? Enter code from below. Examples: Wife, parent, sister, daughter-in-law, partner, lodger, lodger's wife, etc.	HOUSEHOLD MEMBER Does . . . usually live here? 1 - Yes 2 - No If no, group UPE. Mark (X) appropriate box.	BIRTH DATE/AGE 15a. What is . . . 's date of birth? Example: 01-20-63 Verify age using age verification chart in information booklet (page 16). 15b. . . . is now (age)? Is that correct?		SEX Ask if not apparent. 1 - Male or 2 - Female Mark (X) appropriate box.		MARITAL STATUS For persons 15+ Ask if not apparent. 1 - Married? 2 - Widowed? 3 - Divorced? 4 - Separated? or 5 - Never married? Enter code below	EDUCATION For persons 5 years and older What is the highest grade (or year) of regular school . . . has ever attended? Enter code from below.	ARMED FORCES Ask if 17-65 Is . . . now in the Armed Forces? 1 - Yes 2 - No Mark (X) appropriate box.	RACE What is the race of each person in the household? Enter code from below. If "Other," specify. Show information card booklet B.	ETHNIC ORIGIN OR DESCENT What is . . . 's ethnic origin or descent? Enter code from below. Show information card booklet C. SKIP to Read Statement at top of page 4.							
				14. Yes No	15a. Mo. Day Year	15b. Age	16. Male Female						17. Enter code below	18a. Enter code from below	18b. Yes No	19. Yes No	20. Enter code from below	21. Enter code from below	
11.	12a.	12b.	14.	15a.	15b.	16.	17.	18a.	18b.	19.	20.	21.							
1		Reference Person	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
2			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
3			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
4			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
5			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
6			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
7			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
8			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
9			<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Yes <input type="checkbox"/> No									
If "Yes," enter name in 12a above. 13. I have listed (Read names in 12a). Have I missed - - Any babies or small children? - Any lodgers, boarders, or persons you employ who live here? - Anyone who usually lives here but is away now - traveling or in a hospital? - Anyone else staying here?		Mark (X) appropriate box <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		RELATIONSHIP CODES 1 - Reference person with other relatives in household 2 - Reference person with no other relatives in household 3 - Spouse of reference person 4 - Child of reference person 5 - Parent of reference person 6 - Brother/sister of reference person 7 - Other relative of reference person 8 - Nonrelative of reference person with own relatives in household 9 - Nonrelative of reference person with no own relatives in household				EDUCATION CODES 00 - Never attended, preschool, or kindergarten 01-12 - 1st. grade through 12th grade or equivalent (high school diploma/GED) 21 - First (freshman) year of college or equivalent 22 - Second (sophomore) year of college or equivalent (AA/AS degree) 23 - Third (junior) year of college or equivalent 24 - Fourth (senior) year of college or equivalent 31 - 1 year of graduate school 32 - 2 or more years of graduate school				RACE CODES 1 - White 2 - Black 3 - Asian, Pacific Islanders 4 - American Indian, Aleut, Eskimo 5 - Other				ETHNIC ORIGIN CODES 01 - German 02 - Italian 03 - Irish 04 - French 05 - Polish 06 - Russian 07 - English 08 - Scottish 09 - Welsh 10 - Mexican American 11 - Chinese 12 - Mexican 13 - Puerto Rican 14 - Cuban 15 - Central or South American (Spanish country) 16 - Other Spanish 20 - Afro American (Black or Negro) OR 30 - Another group not listed 31 - Don't know			

GO TO ITEM 14

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HOUSEHOLD INFORMATION - Continued

ASK AT END OF HOUSEHOLD RESPONDENT INTERVIEW

<p>22a. What is your telephone number? <input type="checkbox"/> No telephone</p> <p>Number _____</p>	<p>22b. What is the best time to call or visit?</p> <p>a.m. _____ p.m. _____</p>	<p>CHECK ITEM A</p> <p>Are non-family members entered above in item 12b?</p> <p><input type="checkbox"/> Yes - Ask 23b <input type="checkbox"/> No - SKIP to Check Item B</p>																			
<p>INCOME <i>SHOW FLASHCARD D</i></p> <p>23a. Which of these income groups represents your total combined family income from ALL sources for the past 12 months - that is, yours, your . . . 's, etc. Include income from all sources such as wages and salaries, net income from business or farm, Social Security, pensions, dividends, interest, rent and any other money income received by members of this family.</p>		<p><i>SHOW FLASHCARD D</i></p> <p>23b. Which of these income groups represents the total combined income for the past 12 months of all non-family members; that is . . . (Read name(s) of non-family member(s)? Include income from all sources.</p> <p><i>If respondent cannot or will not give the income of the non-family members, you must ask each non-family member for his/her income for the past 12 months and mark the correct category for the total combined non-family income.</i></p>	<p>INCOME CATEGORIES <i>Mark (X) appropriate box</i></p> <table border="0"> <tr> <td>01 <input type="checkbox"/> Under \$5,000</td> <td>07 <input type="checkbox"/> \$30,000-34,999</td> <td>13 <input type="checkbox"/> \$60,000-64,999</td> </tr> <tr> <td>02 <input type="checkbox"/> \$5,000-9,999</td> <td>08 <input type="checkbox"/> 35,000-39,999</td> <td>14 <input type="checkbox"/> 65,000-69,999</td> </tr> <tr> <td>03 <input type="checkbox"/> 10,000-14,999</td> <td>09 <input type="checkbox"/> 40,000-44,999</td> <td>15 <input type="checkbox"/> 70,000-74,999</td> </tr> <tr> <td>04 <input type="checkbox"/> 15,000-19,999</td> <td>10 <input type="checkbox"/> 45,000-49,999</td> <td>16 <input type="checkbox"/> 75,000-79,999</td> </tr> <tr> <td>05 <input type="checkbox"/> 20,000-24,999</td> <td>11 <input type="checkbox"/> 50,000-54,999</td> <td>17 <input type="checkbox"/> 80,000 or more</td> </tr> <tr> <td>06 <input type="checkbox"/> 25,000-29,999</td> <td>12 <input type="checkbox"/> 55,000-59,999</td> <td></td> </tr> </table>	01 <input type="checkbox"/> Under \$5,000	07 <input type="checkbox"/> \$30,000-34,999	13 <input type="checkbox"/> \$60,000-64,999	02 <input type="checkbox"/> \$5,000-9,999	08 <input type="checkbox"/> 35,000-39,999	14 <input type="checkbox"/> 65,000-69,999	03 <input type="checkbox"/> 10,000-14,999	09 <input type="checkbox"/> 40,000-44,999	15 <input type="checkbox"/> 70,000-74,999	04 <input type="checkbox"/> 15,000-19,999	10 <input type="checkbox"/> 45,000-49,999	16 <input type="checkbox"/> 75,000-79,999	05 <input type="checkbox"/> 20,000-24,999	11 <input type="checkbox"/> 50,000-54,999	17 <input type="checkbox"/> 80,000 or more	06 <input type="checkbox"/> 25,000-29,999	12 <input type="checkbox"/> 55,000-59,999	
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04 <input type="checkbox"/> 15,000-19,999	10 <input type="checkbox"/> 45,000-49,999	16 <input type="checkbox"/> 75,000-79,999																			
05 <input type="checkbox"/> 20,000-24,999	11 <input type="checkbox"/> 50,000-54,999	17 <input type="checkbox"/> 80,000 or more																			
06 <input type="checkbox"/> 25,000-29,999	12 <input type="checkbox"/> 55,000-59,999																				
<p>Enter code → <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (113)</p> <p>GO TO CHECK ITEM A →</p>		<p>CHECK ITEM B</p> <p>Refer to item 15b. Are household members age 5-13 listed above?</p>	<p><input type="checkbox"/> Yes - SKIP to section V and conduct proxy interview with household respondent for household members aged 5 through 13. <input type="checkbox"/> No - SKIP to section III and interview next household member age 14+. If no other household members - END INTERVIEW.</p>																		

NOTES

D-3

Section 1 - MOTORIZED VEHICLE RECORD

24a. How many licensed motorized vehicles were owned, or available for use on a regular basis, by members of this household during the period from _____ to _____ (14-day travel period). Include leased or company-owned licensed motorized vehicles. Also include motorized bicycles (MOPEDS) whether licensed or not.

FORM 27
 (11) _____ Number of vehicles
 0 _____ None - SKIP to section 11

Ask item 24c and enter all vehicle types. Then complete 24d through p for the first vehicle before recording the information for the second vehicle, etc.

b. Vehicle number	c. What type(s) of vehicle is it (are they)? Use codes below 1 - Automobile 2 - Station wagon 3 - Passenger van 4 - Other van 5 - Pickup truck 6 - Pickup with camper 7 - Other truck 8 - Motorized camper coach 9 - Motorcycle 10 - Motorized bicycle-moped 11 - Other p.o.v. - Specify below	d. What is the model year?	e. What is the make and model? Example: Plymouth, Duster; Volkswagon, Rabbit, etc.	f. Does it have automatic or manual transmission? 1 - Automatic 2 - Manual Mark (X) appropriate box		g. How many cylinders does it have? Enter code "77" if Rotary		h. Is it air conditioned? 1 - Yes 2 - No Mark (X) appropriate box		i. What do you consider to be the seating capacity of this vehicle?		j. Is this vehicle equipped with: Mark (X) all that apply SHOW FLASHCARD E 1 - Lap belt front seat 2 - Lap belt rear seat 3 - Lap and shoulder belt front seat 4 - Air bag 5 - Automatic belts 6 - Other - Specify below 8 - Don't know 0 - None of these		k. Who owns the vehicle? Use codes below 1 - Owned by members of household 2 - Company-owned 3 - Leased 4 - Rented 5 - Other - Specify below	l. Was it purchased, or received, new or used? 1 - New 2 - Used Mark (X) appropriate box		m. What was the date of purchase or receipt? (For vehicles purchased within the last 12 months enter MONTH and YEAR. For others, enter year only) Enter numerals.		n. Is this vehicle used at least 4 times a month to go to work? 1 - Yes 2 - No Mark (X) appropriate box.		o. About how many miles was this vehicle driven during the last 12 months (or from the date of purchase, if less than 12 months ago)? Please include mileage driven by all drivers.	p. What type of fuel does this vehicle usually use? 1 - Gas unleaded 2 - Gas leaded 3 - Diesel 4 - Other - Specify below Enter code
				Auto.	Man.	Yes	No	1	2	1	2	1	2		1	2	1	2	1	2		
1				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
2				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
3				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
4				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
5				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
6				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
7				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
8				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		
9				1	2	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2		

Section II - AVAILABILITY OF PUBLIC TRANSPORTATION

READ - Now I would like to ask about public transportation in the area.

PGM 2

25a. Is public transportation, other than taxis, available within 2 miles of your home?

- (201) 1 Yes
 2 No
 8 Don't know } SKIP to 26

b. Other than taxis, how far from your home is the NEAREST public transportation stop?

- (202) 1 Less than 3 blocks (less than 1/4 mile)
 2 3-6 blocks (1/4-1/2 mile)
 3 7-12 blocks (more than 1/2 mile, but not more than 1 mile)
 4 13-24 blocks (more than 1, not greater than 2 miles)
 5 More than 2 miles
 8 Don't know } SKIP to 26

c. What type of transportation is it?

- (203) 1 Bus
 2 Train
 3 Streetcar
 4 Subway or elevated rail
 5 Other - Specify _____

NOTES

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Section III - OCCUPATION AND TRAVEL TO WORK

Ask all household members 16 years or older

(301) _____ Household member line number - SKIP to section V if household member less than 16 years of age.

READ - Now I would like to ask you some questions about ... occupation.

26a. What were (was) ... doing most of last week (working, keeping house, going to school, or something else)?

- (302)
- | | |
|---|--|
| 1 <input type="checkbox"/> Working - SKIP to 26d | 6 <input type="checkbox"/> Unable to work - SKIP to section IV |
| 2 <input type="checkbox"/> With a job but not at work - SKIP to 26d | 7 <input type="checkbox"/> Retired |
| 3 <input type="checkbox"/> Looking for work | 8 <input type="checkbox"/> Other - Specify _____ |
| 4 <input type="checkbox"/> Keeping house | |
| 5 <input type="checkbox"/> Going to school | |

b. Did ... do any work at all last week, not counting work around the house?

- (303)
- 1 Yes - SKIP to 26d
2 No

c. Did ... have a job or business from which ... was (were) temporarily absent last week?

- (304)
- 1 Yes
2 No - SKIP to section IV

d. For whom did ... work? (For Armed Forces, enter the particular branch)

(305)

f. What kind of work were (was) ... doing? (For example, electrical engineer, stock clerk, typist, farmer, Armed Forces)

NOTE: Single word entries seldom give sufficient description.

(306)

g. What were (was) ... most important activities as a (read entry from 26f)? (For example, typing, keeping account books, selling cars, Armed Forces).

h. Were (was) ... -

- (307)
- 1 An employee of a PRIVATE company, business, or individual for wages, salary, or commissions?
2 A GOVERNMENT employee (Federal, State, county, or local)?
- SELF-EMPLOYED in OWN business, professional practice or farm?
- Is it incorporated?
- 3 Yes
4 No
- 5 Working without pay in family business or farm?

27. What is ... principal means of transportation to work?

Mark (X) one box

- (308)
- | | | |
|---|--|---|
| 01 <input type="checkbox"/> Auto (Includes personal use taxi) | 10 <input type="checkbox"/> Motorized bicycle/moped | 17 <input type="checkbox"/> Taxi (commercial use) |
| 02 <input type="checkbox"/> Station wagon | 11 <input type="checkbox"/> Other (P.O.V.) - Specify _____ | 18 <input type="checkbox"/> Bicycle |
| 03 <input type="checkbox"/> Passenger van | | 19 <input type="checkbox"/> Walk |
| 04 <input type="checkbox"/> Other van | | 20 <input type="checkbox"/> School bus |
| 05 <input type="checkbox"/> Pickup truck | 12 <input type="checkbox"/> Bus | 21 <input type="checkbox"/> Other - Specify _____ |
| 06 <input type="checkbox"/> Pickup with camper | 13 <input type="checkbox"/> Train | |
| 07 <input type="checkbox"/> Other truck | 14 <input type="checkbox"/> Streetcar | |
| 08 <input type="checkbox"/> Motorized camper coach | 15 <input type="checkbox"/> Elevated rail or subway | 25 <input type="checkbox"/> Work at home - SKIP to section IV |
| 09 <input type="checkbox"/> Motorcycle | 16 <input type="checkbox"/> Airplane | |

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Section III – OCCUPATION AND TRAVEL TO WORK – Continued
 Ask all household members 16 years or older

Household member line number

CHECK ITEM C Is one of the codes 01–08 or 11 entered in item 27?

- Yes
- No – SKIP to 30a

28a. Is this a regular arrangement of 2 or more persons traveling to work together such as a carpool or vanpool?

- 309 No – SKIP to 29
 YES – How many persons, including . . . ?
 _____ Persons

b. Do (Does) . . . share driving, drive others only or ride only?

- 310 Share driving
 Drive others only
 Ride only } SKIP to 30a

29. What is the reason that . . . travel(s) to work alone?
 Any other reason?
 Mark (X) ALL that apply

- 311 Irregular or unusual work hours
 Irregular work location
 Need car for work or errands
 It is out of the way to pick people up
 Riders are not dependable and require extra waiting
 Prefer to have car available for emergencies and occasional overtime or errands
- 312 Like privacy
 Don't know of anyone to ride with
 Don't trust others' driving
- 313 Just don't want to call others about carpooling
 Other – Specify

30a. In the last year have (has) . . . principal means of transportation to work changed?

- 314 Yes
 No – SKIP to Check Item D
- 3 Did not work last year – SKIP to Check Item D
 4 Worked at home last year – SKIP to Check Item D

b. What was the reason for the change?
 Any other reason?
 Mark (X) ALL that apply

- 315 Change of residence
 Change of job location
 Previous means too expensive
 Previous means unsatisfactory
- 316 Previous means no longer available
 Public transportation has become available
 Other – Specify

31. What was the principal means of transportation to work before this latest change?
 Mark (X) one box

- 317 Auto (Includes personal use taxi)
 Station wagon
 Passenger van
 Other van
 Pickup truck
 Pickup with camper
 Other truck
 Motorized camper coach
 Motorcycle
- Motorized bicycle/moped
 Other (P.O.V.) – Specify
 Bus
 Train
 Streetcar
 Elevated rail or subway
 Airplane
- Taxi (commercial use)
 Bicycle
 Walk
 School bus
 Other – Specify
 Work at home

CHECK ITEM D Is one of the codes 01–11 entered in 27?

- Yes – Ask 32a
- No – SKIP to 33

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Section III - OCCUPATION AND TRAVEL TO WORK - Continued
Ask all household members 16 years or older

_____ Household member line number

32a. Does . . . employer provide . . . a parking place at work?

(318) 1 Yes
 2 No

b. Do (Does) . . . pay for parking at work?

(319) 1 Yes
 2 No

33. What is the one-way distance from . . . home to . . . present place of work?

(320) _____ Mile(s)
 o Less than 1/2 mile
 777777 No fixed place - SKIP to section IV

34. How long does it usually take . . . to get from home to work?

(321) _____ Minutes

NOTES

Large empty rectangular area for handwritten notes.

Section IV - DRIVER INFORMATION

Ask all household members 16 years or older

(400) _____ Household member line number

If respondent has already indicated that he/she drives, verify and mark appropriate box

35a. Are you a licensed driver?

- (401) 1 Yes
2 No - SKIP to section V

b. About how many miles did you personally drive during the past 12 months? Please include mileage driven in all licensed motorized vehicles.

(402) _____ Miles

CHECK
ITEM E

Is there an entry in item 27 for this respondent (to indicate that he/she has a job)?

- Yes
 No - SKIP to section V

36a. As an essential part of your work do you drive a licensed motorized vehicle such as a car, van, truck, taxi, or motorcycle?

(403) 0 No - SKIP to section V

Yes - Which type of vehicle?

Mark (X) one box - If more than one type, mark the type most often driven.

- | | | |
|---|--|---|
| 01 <input type="checkbox"/> Auto (Includes personal use taxi) | 09 <input type="checkbox"/> Motorcycle | 21 <input type="checkbox"/> Other - Specify |
| 02 <input type="checkbox"/> Station wagon | 10 <input type="checkbox"/> Motorized bicycle/moped | |
| 03 <input type="checkbox"/> Passenger van | 11 <input type="checkbox"/> Other (P.O.V.) - Specify | |
| 04 <input type="checkbox"/> Other van | | |
| 05 <input type="checkbox"/> Pickup truck | | |
| 06 <input type="checkbox"/> Pickup with camper | 12 <input type="checkbox"/> Bus | |
| 07 <input type="checkbox"/> Other truck | 17 <input type="checkbox"/> Taxi (commercial use) | |
| 08 <input type="checkbox"/> Motorized camper coach | 20 <input type="checkbox"/> School bus | |

b. Approximately how many miles do you drive on an average work day, not counting driving to and from your place of work?

(404) _____ Miles

c. On the average how many days a week do you drive as a part of your work?

(405) _____ Days a week

37a. How many miles did you drive this vehicle as an essential part of your work from _____ to _____ (14 day travel period) not counting driving to and from your place of work, or, if no fixed place of work, to your first work stop?

(406) 0 None - SKIP to section V

_____ Miles

88888 Don't know

b. Of these (entry in 37a) miles, how many were driven on _____ (travel day)?

(407) 0 None

_____ Miles

88888 Don't know - SKIP to section V

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Section V - 14 DAY TRAVEL PERIOD

490 _____ Household member line number

INTERVIEWER - Ask of all household members 14 years and over. For persons 5-13 years of age ask household respondent and enter the line number of the person for whom information is being obtained. Do not include trips made by members of operating crews on airplanes, ships, and trains.

READ - Now I would like to ask about any trips . . . may have taken that ended during the period from _____ to _____ (14 day travel period). A trip occurs when you leave home, go to a destination of 75 or more miles one way from home and return home. The destination is the farthest point traveled to on the trip.

CHECK ITEM F

Mark "No" if household member less than 16 years of age.
Is there an entry of 75 miles or more in 37a, to indicate that the respondent drove as an essential part of his/her work during the 14-day period?

- Yes - Ask 38
- No - SKIP to item 39

38. You mentioned earlier that . . . drove _____ miles (entry in 37a) as an essential part of . . . work during the period from _____ to _____ (14 day period). Did . . . make any OTHER trips during this period where . . . left home, traveled 75 miles or more one-way and returned?

- 491
- 1 Yes - Ask 39
 - 2 No - SKIP to section VI

39. Do not ask italicized statement if Check Item F marked "No."
Excluding the trips . . . made as an essential part of . . . work, how many trips did . . . take during the period from _____ to _____ (14 day travel period) where . . . traveled 75 miles or more from home one way and returned home?

- 492 _____ Trips
- 0 None - SKIP to section VI

40. Please tell me the destination of this/these trip(s).

NOTES

City or Place a.	State or foreign country b.	Did . . . take more than one trip to (destination(s) in 40a)? <input type="checkbox"/> No - Ask about next destination; if no other destination, SKIP to 41. <input type="checkbox"/> Yes - How many? - Specify below c. k.

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Section V - 14 DAY TRAVEL PERIOD - Continued

_____ Household member line number

41. Transcribe city or place and state or foreign country of all trips reported in item 40. <i>NOTE - If respondent took more than one trip to any destination (e.g., 2 trips to New York,) record each trip separately.</i>	493 1 TRIP 1		493 2 TRIP 2		493 3 TRIP 3	
	Outgoing	Return	Outgoing	Return	Outgoing	Return
	City 494	READ - Now I would like to ask you about . . . return trip home from (destination).	City 494	READ - Now I would like to ask you about . . . return trip home from (destination).	City 494	READ - Now I would like to ask you about . . . return trip home from (destination).
	State OR Foreign country 495		State OR Foreign country 495		State OR Foreign country 495	
CHECK ITEM 6 Was this trip previously reported by another household member?	Yes - Which household member? 496 _____ Line No. 497 _____ Trip No.	Yes - Which household member? 508 _____ Line No. 509 _____ Trip No.	Yes - Which household member? 496 _____ Line No. 497 _____ Trip No.	Yes - Which household member? 508 _____ Line No. 509 _____ Trip No.	Yes - Which household member? 496 _____ Line No. 497 _____ Trip No.	Yes - Which household member? 508 _____ Line No. 509 _____ Trip No.
<i>If a trip was previously reported, the following items must be the same for both trips:</i> • Destination (item 41) • Date trip began (item 42) and ended (item 45) • Time trip began (item 43) • Household members on trip (item 47) • No. of persons in travel party (item 49) • Means of transportation (item 52) • Vehicle (item 54b, if household vehicle, item 55, if nonhousehold vehicle)	Interviewer - Return to item 41 and read the statement in return trip column. 499 1 <input type="checkbox"/> No 2 <input type="checkbox"/> Don't know } Continue interview with item 42	Return to item 41 and transcribe destination of next outgoing trip if no other trip SKIP to section VI. 511 1 <input type="checkbox"/> No 2 <input type="checkbox"/> Don't know } Continue interview with item 42	Interviewer - Return to item 41 and read the statement in return trip column. 499 1 <input type="checkbox"/> No 2 <input type="checkbox"/> Don't know } Continue interview with item 42	Return to item 41 and transcribe destination of next outgoing trip if no other trip SKIP to section VI. 511 1 <input type="checkbox"/> No 2 <input type="checkbox"/> Don't know } Continue interview with item 42	Interviewer - Return to item 41 and read the statement in return trip column. 499 1 <input type="checkbox"/> No 2 <input type="checkbox"/> Don't know } Continue interview with item 42	Return to item 41 and transcribe destination of next outgoing trip if no other trip SKIP to section VI. 511 1 <input type="checkbox"/> No 2 <input type="checkbox"/> Don't know } Continue interview with item 42
SHOW CALENDAR 42. On what date did the trip to (destination/home) begin? <i>Enter in numerals the month and date.</i> <i>INTERVIEWER - Refer to calendar and verify day of week with respondent. Mark (X) appropriate box.</i>	Month _____ Date _____ 500 _____ 501 _____ 502 1 <input type="checkbox"/> Sun. 5 <input type="checkbox"/> Thur. 2 <input type="checkbox"/> Mon. 6 <input type="checkbox"/> Fri. 3 <input type="checkbox"/> Tues. 7 <input type="checkbox"/> Sat. 4 <input type="checkbox"/> Wed.	Month _____ Date _____ 512 _____ 513 _____ 514 1 <input type="checkbox"/> Sun. 5 <input type="checkbox"/> Thur. 2 <input type="checkbox"/> Mon. 6 <input type="checkbox"/> Fri. 3 <input type="checkbox"/> Tues. 7 <input type="checkbox"/> Sat. 4 <input type="checkbox"/> Wed.	Month _____ Date _____ 500 _____ 501 _____ 502 1 <input type="checkbox"/> Sun. 5 <input type="checkbox"/> Thur. 2 <input type="checkbox"/> Mon. 6 <input type="checkbox"/> Fri. 3 <input type="checkbox"/> Tues. 7 <input type="checkbox"/> Sat. 4 <input type="checkbox"/> Wed.	Month _____ Date _____ 512 _____ 513 _____ 514 1 <input type="checkbox"/> Sun. 5 <input type="checkbox"/> Thur. 2 <input type="checkbox"/> Mon. 6 <input type="checkbox"/> Fri. 3 <input type="checkbox"/> Tues. 7 <input type="checkbox"/> Sat. 4 <input type="checkbox"/> Wed.	Month _____ Date _____ 500 _____ 501 _____ 502 1 <input type="checkbox"/> Sun. 5 <input type="checkbox"/> Thur. 2 <input type="checkbox"/> Mon. 6 <input type="checkbox"/> Fri. 3 <input type="checkbox"/> Tues. 7 <input type="checkbox"/> Sat. 4 <input type="checkbox"/> Wed.	Month _____ Date _____ 512 _____ 513 _____ 514 1 <input type="checkbox"/> Sun. 5 <input type="checkbox"/> Thur. 2 <input type="checkbox"/> Mon. 6 <input type="checkbox"/> Fri. 3 <input type="checkbox"/> Tues. 7 <input type="checkbox"/> Sat. 4 <input type="checkbox"/> Wed.
43. What time did the trip begin?	503 _____ : 504 1 <input type="checkbox"/> a.m. 2 <input type="checkbox"/> p.m. 8888 <input type="checkbox"/> Don't know	515 _____ : 516 1 <input type="checkbox"/> a.m. 2 <input type="checkbox"/> p.m. 8888 <input type="checkbox"/> Don't know	503 _____ : 504 1 <input type="checkbox"/> a.m. 2 <input type="checkbox"/> p.m. 8888 <input type="checkbox"/> Don't know	515 _____ : 516 1 <input type="checkbox"/> a.m. 2 <input type="checkbox"/> p.m. 8888 <input type="checkbox"/> Don't know	503 _____ : 504 1 <input type="checkbox"/> a.m. 2 <input type="checkbox"/> p.m. 8888 <input type="checkbox"/> Don't know	515 _____ : 516 1 <input type="checkbox"/> a.m. 2 <input type="checkbox"/> p.m. 8888 <input type="checkbox"/> Don't know
44. Did . . . start the trip from this address?	505 1 <input type="checkbox"/> Yes No - From what city, or place and state did . . . start the trip? City 506 State 507		505 1 <input type="checkbox"/> Yes No - From what city, or place and state did . . . start the trip? City 506 State 507		505 1 <input type="checkbox"/> Yes No - From what city, or place and state did . . . start the trip? City 506 State 507	

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Section V - 14 DAY TRAVEL PERIOD - Continued

Household member line number _____

INTERVIEWER - For each trip reported, verify that the respondent returned home during the 14-day period. If respondent did not return home during the 14-day period, delete entire trip from section V. To avoid repetition on return home trips, verify circled items with respondent. Ask all uncircled items.

FROM 2 +	TRIP 1				TRIP 2				TRIP 3									
	Outgoing		Return		Outgoing		Return		Outgoing		Return							
	Month	Date	Month	Date	Month	Date	Month	Date	Month	Date	Month	Date						
45. On what date did . . . reach (destination, home)? Enter in numerals the month and date. INTERVIEWER - Refer to calendar and verify day of week with respondent. Mark (X) appropriate box.	(517) 1	(518) [] [] [] []	(519) [] [] [] []	(530) [] [] [] []	(531) [] [] [] []	(517) 2	(518) [] [] [] []	(519) [] [] [] []	(530) [] [] [] []	(531) [] [] [] []	(517) 3	(518) [] [] [] []	(519) [] [] [] []	(530) [] [] [] []	(531) [] [] [] []			
	(520)	1 [] Sun.	5 [] Thur.	(532)	1 [] Sun.	5 [] Thur.	(520)	1 [] Sun.	5 [] Thur.	(532)	1 [] Sun.	5 [] Thur.	(520)	1 [] Sun.	5 [] Thur.	(532)	1 [] Sun.	5 [] Thur.
		2 [] Mon.	6 [] Fri.		2 [] Mon.	6 [] Fri.		2 [] Mon.	6 [] Fri.		2 [] Mon.	6 [] Fri.		2 [] Mon.	6 [] Fri.		2 [] Mon.	6 [] Fri.
		3 [] Tues.	7 [] Sat.		3 [] Tues.	7 [] Sat.		3 [] Tues.	7 [] Sat.		3 [] Tues.	7 [] Sat.		3 [] Tues.	7 [] Sat.		3 [] Tues.	7 [] Sat.
		4 [] Wed.			4 [] Wed.			4 [] Wed.			4 [] Wed.			4 [] Wed.			4 [] Wed.	
46. What was the total distance . . . traveled on the trip to (destination, home)? Include mileage from side trips on the way to (destination home), regardless of length. For trips to destination road: Also include side trips of 75 miles or more one-way once you reached (destination).	(521) _____ Miles	(533) _____ Miles	(521) _____ Miles	(533) _____ Miles	(521) _____ Miles	(533) _____ Miles	(521) _____ Miles	(533) _____ Miles	(521) _____ Miles	(533) _____ Miles	(521) _____ Miles	(533) _____ Miles	(521) _____ Miles	(533) _____ Miles				
	47. Did any household members accompany . . . to (destination home)? Any other household members?		47. Did any household members accompany . . . to (destination home)? Any other household members?		47. Did any household members accompany . . . to (destination home)? Any other household members?		47. Did any household members accompany . . . to (destination home)? Any other household members?		47. Did any household members accompany . . . to (destination home)? Any other household members?		47. Did any household members accompany . . . to (destination home)? Any other household members?		47. Did any household members accompany . . . to (destination home)? Any other household members?					
(522) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?		(534) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?		(522) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?		(534) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?		(522) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?		(534) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?		(522) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?		(534) <input type="checkbox"/> No - SKIP to item 4B Yes - Which household members?				
Line No.	Name	Line No.	Name	Line No.	Name	Line No.	Name	Line No.	Name	Line No.	Name	Line No.	Name	Line No.	Name			
(523)		(535)		(523)		(535)		(523)		(535)		(523)		(535)				
(524)		(536)		(524)		(536)		(524)		(536)		(524)		(536)				
(525)		(537)		(525)		(537)		(525)		(537)		(525)		(537)				
(526)		(538)		(526)		(538)		(526)		(538)		(526)		(538)				
(527)		(539)		(527)		(539)		(527)		(539)		(527)		(539)				
(528)		(540)		(528)		(540)		(528)		(540)		(528)		(540)				
48. Were any non-household members in the travel party?		48. Were any non-household members in the travel party?		48. Were any non-household members in the travel party?		48. Were any non-household members in the travel party?		48. Were any non-household members in the travel party?		48. Were any non-household members in the travel party?		48. Were any non-household members in the travel party?						
(529) <input type="checkbox"/> No - Ask 49 Yes - How many?		(541) <input type="checkbox"/> No - Ask 49 Yes - How many?		(529) <input type="checkbox"/> No - Ask 49 Yes - How many?		(541) <input type="checkbox"/> No - Ask 49 Yes - How many?		(529) <input type="checkbox"/> No - Ask 49 Yes - How many?		(541) <input type="checkbox"/> No - Ask 49 Yes - How many?		(529) <input type="checkbox"/> No - Ask 49 Yes - How many?		(541) <input type="checkbox"/> No - Ask 49 Yes - How many?				

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Section V - 14 DAY TRAVEL PERIOD - Continued

_____ Household member line number

	TRIP 1				TRIP 2				TRIP 3			
	Outgoing		Return		Outgoing		Return		Outgoing		Return	
<p>49. So there were _____ persons in the travel party? <small>INTERVIEWER - Verify that the sum of the numbers entered in items 47 and 48 plus the respondent is the total number of persons that were in the travel party.</small></p>	543 _____ Total number of persons		557 _____ Total number of persons		543 _____ Total number of persons		557 _____ Total number of persons		543 _____ Total number of persons		557 _____ Total number of persons	
<p>Refer to item 47. Ask only if other household members on the trip. Otherwise, SKIP to 51a if outgoing, and 51c if return trip.</p> <p>50a. Did the household members accompanying . . . to (destination home) travel the entire distance?</p> <p>b. How many miles did . . . (line number in 50a) travel?</p>	<p>544 1 <input type="checkbox"/> Yes SKIP to 51a No Who did not? <input type="checkbox"/></p>	b. Miles	<p>558 1 <input type="checkbox"/> Yes SKIP to 51c No Who did not? <input type="checkbox"/></p>	b. Miles	<p>544 1 <input type="checkbox"/> Yes SKIP to 51a No Who did not? <input type="checkbox"/></p>	b. Miles	<p>558 1 <input type="checkbox"/> Yes SKIP to 51c No Who did not? <input type="checkbox"/></p>	b. Miles	<p>544 1 <input type="checkbox"/> Yes SKIP to 51a No Who did not? <input type="checkbox"/></p>	b. Miles	<p>558 1 <input type="checkbox"/> Yes SKIP to 51c No Who did not? <input type="checkbox"/></p>	b. Miles
	Line number		Line number		Line number		Line number		Line number		Line number	
	545	546	559	560	545	546	559	560	545	546	559	560
	547	548	561	562	547	548	561	562	547	548	561	562
	549	550	563	564	549	550	563	564	549	550	563	564
	551	552	565	566	551	552	565	566	551	552	565	566
	553	554	567	568	553	554	567	568	553	554	567	568
555	556	569	570	555	556	569	570	555	556	569	570	

NOTES

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PGM 2 V

Section V - 14 DAY TRAVEL PERIOD - Continued

Household member line number

SHOW FLASHCARD F	TRIP 1			TRIP 2			TRIP 3		
	Outgoing	Return		Outgoing	Return		Outgoing	Return	
51a. What was the reason(s) for the trip to (destination)? Any other reason? Mark (X) ALL that apply	<p>(572) * <input type="checkbox"/> 1 To or from work</p> <p><input type="checkbox"/> 2 Work related business</p> <p><input type="checkbox"/> 3 Shopping</p> <p><input type="checkbox"/> 4 Other family or personal business</p> <p><input type="checkbox"/> 5 School/Church</p> <p><input type="checkbox"/> 6 Doctor/Dentist</p> <p>(573) * <input type="checkbox"/> 7 Vacation</p> <p><input type="checkbox"/> 8 Visit friends or relatives</p> <p><input type="checkbox"/> 9 Pleasure driving</p> <p>(574) * <input type="checkbox"/> 10 Other social or recreational</p> <p><input type="checkbox"/> 11 Other - Specify ↓</p>			<p>(572) * <input type="checkbox"/> 1 To or from work</p> <p><input type="checkbox"/> 2 Work related business</p> <p><input type="checkbox"/> 3 Shopping</p> <p><input type="checkbox"/> 4 Other family or personal business</p> <p><input type="checkbox"/> 5 School/Church</p> <p><input type="checkbox"/> 6 Doctor/Dentist</p> <p>(573) * <input type="checkbox"/> 7 Vacation</p> <p><input type="checkbox"/> 8 Visit friends or relatives</p> <p><input type="checkbox"/> 9 Pleasure driving</p> <p>(574) * <input type="checkbox"/> 10 Other social or recreational</p> <p><input type="checkbox"/> 11 Other - Specify ↓</p>			<p>(572) * <input type="checkbox"/> 1 To or from work</p> <p><input type="checkbox"/> 2 Work related business</p> <p><input type="checkbox"/> 3 Shopping</p> <p><input type="checkbox"/> 4 Other family or personal business</p> <p><input type="checkbox"/> 5 School/Church</p> <p><input type="checkbox"/> 6 Doctor/Dentist</p> <p>(573) * <input type="checkbox"/> 7 Vacation</p> <p><input type="checkbox"/> 8 Visit friends or relatives</p> <p><input type="checkbox"/> 9 Pleasure driving</p> <p>(574) * <input type="checkbox"/> 10 Other social or recreational</p> <p><input type="checkbox"/> 11 Other - Specify ↓</p>		
51b. What reason best describes the main purpose for the trip? Mark (X) only one	<p>(575) <input type="checkbox"/> 1 To or from work</p> <p><input type="checkbox"/> 2 Work related business</p> <p><input type="checkbox"/> 3 Shopping</p> <p><input type="checkbox"/> 4 Other family or personal business</p> <p><input type="checkbox"/> 5 School/Church</p> <p><input type="checkbox"/> 6 Doctor/Dentist</p> <p><input type="checkbox"/> 7 Vacation</p> <p><input type="checkbox"/> 8 Visit friends or relatives</p> <p><input type="checkbox"/> 9 Pleasure driving</p> <p><input type="checkbox"/> 10 Other social or recreational</p> <p><input type="checkbox"/> 11 Other - Specify ↓</p> <p>SKIP to 52</p>			<p>(575) <input type="checkbox"/> 1 To or from work</p> <p><input type="checkbox"/> 2 Work related business</p> <p><input type="checkbox"/> 3 Shopping</p> <p><input type="checkbox"/> 4 Other family or personal business</p> <p><input type="checkbox"/> 5 School/Church</p> <p><input type="checkbox"/> 6 Doctor/Dentist</p> <p><input type="checkbox"/> 7 Vacation</p> <p><input type="checkbox"/> 8 Visit friends or relatives</p> <p><input type="checkbox"/> 9 Pleasure driving</p> <p><input type="checkbox"/> 10 Other social or recreational</p> <p><input type="checkbox"/> 11 Other - Specify ↓</p> <p>SKIP to 52</p>			<p>(575) <input type="checkbox"/> 1 To or from work</p> <p><input type="checkbox"/> 2 Work related business</p> <p><input type="checkbox"/> 3 Shopping</p> <p><input type="checkbox"/> 4 Other family or personal business</p> <p><input type="checkbox"/> 5 School/Church</p> <p><input type="checkbox"/> 6 Doctor/Dentist</p> <p><input type="checkbox"/> 7 Vacation</p> <p><input type="checkbox"/> 8 Visit friends or relatives</p> <p><input type="checkbox"/> 9 Pleasure driving</p> <p><input type="checkbox"/> 10 Other social or recreational</p> <p><input type="checkbox"/> 11 Other - Specify ↓</p> <p>SKIP to 52</p>		

Section V - 14 DAY TRAVEL PERIOD - Continued

Household member line number

SHOW FLASHCARD F 51c. Other than returning home, did ...s return trip have any other purpose? Any other purpose? Mark (X) ALL that apply	TRIP 1		TRIP 2		TRIP 3	
	Outgoing	Return	Outgoing	Return	Outgoing	Return
52. What was the main means of transportation used for the trip to (destination/home)? (the means used for the longest distance) Enter code from below.	(577) * ← Enter code "Other" - Specify	(578) * No - SKIP to 52 Yes - What were they? 1. To or from work 2. Work related business 3. Shopping 4. Other family or personal business 5. School/Church 6. Doctor/Dentist 7. Vacation 8. Visit friends or relatives 9. Pleasure driving 10. Other social or recreational 11. Other - Specify	(577) * ← Enter code "Other" - Specify	(578) * No - SKIP to 52 Yes - What were they? 1. To or from work 2. Work related business 3. Shopping 4. Other family or personal business 5. School/Church 6. Doctor/Dentist 7. Vacation 8. Visit friends or relatives 9. Pleasure driving 10. Other social or recreational 11. Other - Specify	(577) * ← Enter code "Other" - Specify	(578) * No - SKIP to 52 Yes - What were they? 1. To or from work 2. Work related business 3. Shopping 4. Other family or personal business 5. School/Church 6. Doctor/Dentist 7. Vacation 8. Visit friends or relatives 9. Pleasure driving 10. Other social or recreational 11. Other - Specify
	51. Other than returning home, did ...s return trip have any other purpose? Any other purpose? Mark (X) ALL that apply	(577) * ← Enter code "Other" - Specify	(578) * No - SKIP to 52 Yes - What were they? 1. To or from work 2. Work related business 3. Shopping 4. Other family or personal business 5. School/Church 6. Doctor/Dentist 7. Vacation 8. Visit friends or relatives 9. Pleasure driving 10. Other social or recreational 11. Other - Specify	(577) * ← Enter code "Other" - Specify	(578) * No - SKIP to 52 Yes - What were they? 1. To or from work 2. Work related business 3. Shopping 4. Other family or personal business 5. School/Church 6. Doctor/Dentist 7. Vacation 8. Visit friends or relatives 9. Pleasure driving 10. Other social or recreational 11. Other - Specify	(577) * ← Enter code "Other" - Specify

MAIN MEANS OF TRANSPORTATION CODES

- 01 - Auto (includes personal use taxi)
- 02 - Station wagon
- 03 - Passenger van
- 04 - Other van
- 05 - Pickup truck
- 06 - Pickup with camper
- 07 - Other truck
- 08 - Motorized truck
- 09 - Motorcycle
- 10 - Motorized bicycle/moped
- 11 - Other (P.O.V.)
- 12 - Bus
- 13 - Train
- 14 - Streetcar
- 15 - Elevated rail or subway
- 16 - Airplane
- 17 - Taxi (Commercial use)
- 18 - Bicycle
- 19 - Walk
- 20 - School bus
- 21 - Other

NOTES

Section V - 14 DAY TRAVEL PERIOD - Continued

CHECK ITEM	Household member (see number)		
	TRIP 1	TRIP 2	TRIP 3
53. Did . . . use any other means of transportation to travel 75 miles or more one way? Enter code from below.	<p>582 1</p> <p>Outgoing <input type="checkbox"/> Yes - Ask 53 <input type="checkbox"/> No - SKIP to Check Item 1</p> <p>Return <input type="checkbox"/> Yes - Ask 53 <input type="checkbox"/> No - SKIP to Check Item 1</p> <p>583 0 <input type="checkbox"/> No - SKIP to Check Item 1 Yes - What other means of transportation was used? Enter code "Other" - Specify</p> <p>For how many miles was it used? Miles</p> <p>584 <input type="checkbox"/> Yes <input type="checkbox"/> No - Return to item 41 and ask about return portion of trip. SKIP to section VI.</p>	<p>582 2</p> <p>Outgoing <input type="checkbox"/> Yes - Ask 53 <input type="checkbox"/> No - SKIP to Check Item 1</p> <p>Return <input type="checkbox"/> Yes - Ask 53 <input type="checkbox"/> No - SKIP to Check Item 1</p> <p>583 0 <input type="checkbox"/> No - SKIP to Check Item 1 Yes - What other means of transportation was used? Enter code "Other" - Specify</p> <p>For how many miles was it used? Miles</p> <p>584 <input type="checkbox"/> Yes <input type="checkbox"/> No - Return to item 41 and ask about return portion of trip. SKIP to section VI.</p>	<p>582 3</p> <p>Outgoing <input type="checkbox"/> Yes - Ask 53 <input type="checkbox"/> No - SKIP to Check Item 1</p> <p>Return <input type="checkbox"/> Yes - Ask 53 <input type="checkbox"/> No - SKIP to Check Item 1</p> <p>583 0 <input type="checkbox"/> No - SKIP to Check Item 1 Yes - What other means of transportation was used? Enter code "Other" - Specify</p> <p>For how many miles was it used? Miles</p> <p>584 <input type="checkbox"/> Yes <input type="checkbox"/> No - Return to item 41 and ask about return portion of trip. SKIP to section VI.</p>
54a. Was a household vehicle used for this trip? Enter vehicle number "1" without asking if only one vehicle reported in 24a. Otherwise ask question as worded.	<p>585 1 <input type="checkbox"/> Yes - Ask 54b 2 <input type="checkbox"/> No - SKIP to 55</p> <p>586 Vehicle number SKIP to 56a</p> <p>587 1 <input type="checkbox"/> Owned by someone else on trip? 2 <input type="checkbox"/> Owned by someone else not on trip? 3 <input type="checkbox"/> Rented by household member? 4 <input type="checkbox"/> Rented by someone else? 5 <input type="checkbox"/> Other - Specify</p>	<p>585 1 <input type="checkbox"/> Yes - Ask 54b 2 <input type="checkbox"/> No - SKIP to 55</p> <p>586 Vehicle number SKIP to 56a</p> <p>587 1 <input type="checkbox"/> Owned by someone else on trip? 2 <input type="checkbox"/> Owned by someone else not on trip? 3 <input type="checkbox"/> Rented by household member? 4 <input type="checkbox"/> Rented by someone else? 5 <input type="checkbox"/> Other - Specify</p>	<p>585 1 <input type="checkbox"/> Yes - Ask 54b 2 <input type="checkbox"/> No - SKIP to 55</p> <p>586 Vehicle number SKIP to 56a</p> <p>587 1 <input type="checkbox"/> Owned by someone else on trip? 2 <input type="checkbox"/> Owned by someone else not on trip? 3 <input type="checkbox"/> Rented by household member? 4 <input type="checkbox"/> Rented by someone else? 5 <input type="checkbox"/> Other - Specify</p>
55. Was the vehicle used for this trip -	<p>585 1 <input type="checkbox"/> Yes - Ask 54b 2 <input type="checkbox"/> No - SKIP to 55</p> <p>586 Vehicle number SKIP to 56a</p> <p>587 1 <input type="checkbox"/> Owned by someone else on trip? 2 <input type="checkbox"/> Owned by someone else not on trip? 3 <input type="checkbox"/> Rented by household member? 4 <input type="checkbox"/> Rented by someone else? 5 <input type="checkbox"/> Other - Specify</p>	<p>585 1 <input type="checkbox"/> Yes - Ask 54b 2 <input type="checkbox"/> No - SKIP to 55</p> <p>586 Vehicle number SKIP to 56a</p> <p>587 1 <input type="checkbox"/> Owned by someone else on trip? 2 <input type="checkbox"/> Owned by someone else not on trip? 3 <input type="checkbox"/> Rented by household member? 4 <input type="checkbox"/> Rented by someone else? 5 <input type="checkbox"/> Other - Specify</p>	<p>585 1 <input type="checkbox"/> Yes - Ask 54b 2 <input type="checkbox"/> No - SKIP to 55</p> <p>586 Vehicle number SKIP to 56a</p> <p>587 1 <input type="checkbox"/> Owned by someone else on trip? 2 <input type="checkbox"/> Owned by someone else not on trip? 3 <input type="checkbox"/> Rented by household member? 4 <input type="checkbox"/> Rented by someone else? 5 <input type="checkbox"/> Other - Specify</p>

- 01 - Auto (Include personal use tax)
02 - Station wagon
03 - Passenger van
04 - Other van
05 - Pickup truck
06 - Pickup with camper
07 - Other truck
08 - Motorized bicycle/moped
09 - Motorized camper coach
10 - Motorized bicycle/moped
11 - Other (P.O.V.)
12 - Bus
13 - Train
14 - Streetcar
15 - Elevated rail or subway
16 - Airplane
17 - Taxi (Commercial use)
18 - Bicycle
19 - Walk
20 - School bus
21 - Other

Section V – 14 DAY TRAVEL PERIOD – Continued

_____ Household member line number

Enter line number without asking if respondent was alone in the vehicle.	593 1 TRIP 1		593 2 TRIP 2		593 3 TRIP 3	
	Outgoing	Return	Outgoing	Return	Outgoing	Return
56a. Who was the principal driver for the trip? (The one who drove for the longest distance.)	594 <input type="checkbox"/> Not a household member Household member _____ line number	596 <input type="checkbox"/> Not a household member Household member _____ line number	594 <input type="checkbox"/> Not a household member Household member _____ line number	596 <input type="checkbox"/> Not a household member Household member _____ line number	594 <input type="checkbox"/> Not a household member Household member _____ line number	596 <input type="checkbox"/> Not a household member Household member _____ line number
b. Did anyone else do any of the driving?	595 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	597 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	595 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	597 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	595 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	597 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
INTERVIEWER INSTRUCTION	<i>Return to item 41 and ask about return portion of trip.</i>	<i>Return to item 41 and transcribe destination of next outgoing trip. If no other trip, SKIP to section VI.</i>	<i>Return to item 41 and ask about return portion of trip.</i>	<i>Return to item 41 and transcribe destination of next outgoing trip. If no other trip, SKIP to section VI.</i>	<i>Return to item 41 and ask about return portion of trip.</i>	<i>Return to item 41 and transcribe destination of next outgoing trip. If no other trip, SKIP to section VI.</i>

NOTES

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Section VI - TRAVEL DAY

(601) _____ Household member line number

INTERVIEWER - Ask of all household members 14 years and over. For persons 5-13 years of age ask household respondent and enter the line number of the person for whom information is being obtained. Reference day is from 4:00 a.m. to 3:59 a.m. of the following day. Do not include walking and bicycling trips for person under 14 years of age. Also do not include trips made by members of operating crews on airplanes, ships and trains.

Refer to Item 39.

CHECK ITEM J Did person take any trips of 75 miles during the 14 day travel period?

Yes - Go to Read I No - Go to Read II

READ I - In the previous section, you told me about trips of 75 miles or more taken during the period from _____ to _____ (14 day travel period). Now I have some questions about ALL trips taken on (travel day), including long trips you may have already reported. A trip is anytime . . . went from one address to another by car or bus, walking, bicycling, or some other means. For example, going to work in an automobile would be one trip; walking to lunch would be a second trip, walking back to work from lunch would be a third trip; stopping at a gas station on the way home would be a fourth trip, etc. - Go to Check Item K

READ II - Now I have some questions about ALL trips taken on (travel day). A trip is anytime . . . went from one address to another by car or bus, walking, bicycling, or some other means. For example, going to work in an automobile would be one trip; walking to lunch would be a second trip, walking back to work from lunch would be a third trip; stopping at a gas station on the way home would be a fourth trip, etc. - Go to Check Item K

CHECK ITEM K

Mark "No" if household member less than 16 years of age. Refer to item 37b.

Did person drive as an essential part of his/her work on travel day?

Yes - Ask 57a
 No - SKIP to 57b

57a. Earlier you mentioned that . . . drove (entry in 37b) miles as an essential part of . . . work on (travel day). Did . . . go anywhere else on (travel day)?

(602) 1 Yes - SKIP to 58
2 No - SKIP to section VII, part A

b. Did . . . go any place on (travel day)?

(603) 1 Yes - Ask 58
2 No - SKIP to section VII, part A

Do not ask italicized statement if Check Item K marked "No".

58. (Excluding the trips you took as an essential part of your work) Please tell me everywhere . . . went on travel day.

Where did . . . go (first, . . . next)?

Did . . . go anywhere else on travel day?

1.	4.	7.
2.	5.	8.
3.	6.	9.

59a. Did . . . first trip to (first trip entered in 58) begin at home?

(604) 1 Yes - SKIP to 60
2 No

SHOW FLASHCARD F

b. What was . . . main reason for being away from home when this trip began?

Enter code from bottom of next page.

(605) ← Enter code
If "Other" - Specify _____

INTERVIEWER - To avoid repetition, verify circled items with person for return trips and travel day trips previously reported in Section V - 14-Day Travel Period.

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Section VI - TRAVEL DAY - Continued

Household member line number

		606 1 TRIP 1		606 2 TRIP 2		606 3 TRIP 3		606 4 TRIP 4		606 5 TRIP 5		606 6 TRIP 6			
<p>60. What was the main purpose for the 1st, 2nd, 3rd, . . . trip?</p> <p>INTERVIEWER - If purpose of trip is to return home, enter the purpose of the "from home" trip and mark box 66. Enter code from bottom of page.</p>		<p>607 <input type="text"/> <input type="text"/> ← Enter code</p> <p>608 <input type="checkbox"/> 66 Return home trip</p> <p>If "Other" - Specify *</p>		<p>607 <input type="text"/> <input type="text"/> ← Enter code</p> <p>608 <input type="checkbox"/> 66 Return home trip</p> <p>If "Other" - Specify *</p>		<p>607 <input type="text"/> <input type="text"/> ← Enter code</p> <p>608 <input type="checkbox"/> 66 Return home trip</p> <p>If "Other" - Specify *</p>		<p>607 <input type="text"/> <input type="text"/> ← Enter code</p> <p>608 <input type="checkbox"/> 66 Return home trip</p> <p>If "Other" - Specify *</p>		<p>607 <input type="text"/> <input type="text"/> ← Enter code</p> <p>608 <input type="checkbox"/> 66 Return home trip</p> <p>If "Other" - Specify *</p>		<p>607 <input type="text"/> <input type="text"/> ← Enter code</p> <p>608 <input type="checkbox"/> 66 Return home trip</p> <p>If "Other" - Specify *</p>			
<p>61. What time did the trip to . . . begin?</p>		<p>609 : : 610 1 <input type="checkbox"/> a.m.</p> <p>888888 <input type="checkbox"/> Don't know 2 <input type="checkbox"/> p.m.</p>		<p>609 : : 610 1 <input type="checkbox"/> a.m.</p> <p>888888 <input type="checkbox"/> Don't know 2 <input type="checkbox"/> p.m.</p>		<p>609 : : 610 1 <input type="checkbox"/> a.m.</p> <p>888888 <input type="checkbox"/> Don't know 2 <input type="checkbox"/> p.m.</p>		<p>609 : : 610 1 <input type="checkbox"/> a.m.</p> <p>888888 <input type="checkbox"/> Don't know 2 <input type="checkbox"/> p.m.</p>		<p>609 : : 610 1 <input type="checkbox"/> a.m.</p> <p>888888 <input type="checkbox"/> Don't know 2 <input type="checkbox"/> p.m.</p>		<p>609 : : 610 1 <input type="checkbox"/> a.m.</p> <p>888888 <input type="checkbox"/> Don't know 2 <input type="checkbox"/> p.m.</p>			
<p>62. Approximately how long did it take to get there?</p>		<p>611 _____ Minutes</p>		<p>611 _____ Minutes</p>		<p>611 _____ Minutes</p>		<p>611 _____ Minutes</p>		<p>611 _____ Minutes</p>		<p>611 _____ Minutes</p>			
<p>63. What was the total distance from where . . . started to destination?</p>		<p>612 _____ Miles</p> <p>0 <input type="checkbox"/> Less than 1/2 mile</p>		<p>612 _____ Miles</p> <p>0 <input type="checkbox"/> Less than 1/2 miles</p>		<p>612 _____ Miles</p> <p>0 <input type="checkbox"/> Less than 1/2 mile</p>		<p>612 _____ Miles</p> <p>0 <input type="checkbox"/> Less than 1/2 mile</p>		<p>612 _____ Miles</p> <p>0 <input type="checkbox"/> Less than 1/2 mile</p>		<p>612 _____ Miles</p> <p>0 <input type="checkbox"/> Less than 1/2 mile</p>			
<p>64a. Did other household members go on the trip?</p> <p>For return home trips enter reason of "from home" trip without asking. List respondent first.</p>		<p>613 0 <input type="checkbox"/> No - SKIP to 65 Yes - Who? *</p> <p>a. Main reason</p>		<p>613 0 <input type="checkbox"/> No - SKIP to 65 Yes - Who? *</p> <p>a. Main reason</p>		<p>613 0 <input type="checkbox"/> No - SKIP to 65 Yes - Who? *</p> <p>a. Main reason</p>		<p>613 0 <input type="checkbox"/> No - SKIP to 65 Yes - Who? *</p> <p>a. Main reason</p>		<p>613 0 <input type="checkbox"/> No - SKIP to 65 Yes - Who? *</p> <p>a. Main reason</p>		<p>613 0 <input type="checkbox"/> No - SKIP to 65 Yes - Who? *</p> <p>a. Main reason</p>			
<p>64b. What was (line number in 64a) main reason for being on the trip?</p> <p>Enter code from bottom of page.</p>		<p>Line No. Name Code</p>		<p>Line No. Name Code</p>		<p>Line No. Name Code</p>		<p>Line No. Name Code</p>		<p>Line No. Name Code</p>		<p>Line No. Name Code</p>			
		614		614		614		614		614		614			
		616		616		616		616		616		616			
		618		618		618		618		618		618			
		620		620		620		620		620		620			
		622		622		622		622		622		622			
		624		624		624		624		624		624			
<p>CHECK ITEM L</p> <p>Has this trip been previously reported by another household member?</p>		<p>901 Yes - Which household member? *</p> <p>902 <input type="checkbox"/> Line No. T.D. trip No.</p> <p>INTERVIEWER - Enter above information and SKIP to Check item P-1.</p> <p>903 0 <input type="checkbox"/> No - Ask 65</p>		<p>901 Yes - Which household member? *</p> <p>902 <input type="checkbox"/> Line No. T.D. trip No.</p> <p>INTERVIEWER - Enter above information and SKIP to Check item P-1.</p> <p>903 0 <input type="checkbox"/> No - Ask 65</p>		<p>901 Yes - Which household member? *</p> <p>902 <input type="checkbox"/> Line No. T.D. trip No.</p> <p>INTERVIEWER - Enter above information and SKIP to Check item P-1.</p> <p>903 0 <input type="checkbox"/> No - Ask 65</p>		<p>901 Yes - Which household member? *</p> <p>902 <input type="checkbox"/> Line No. T.D. trip No.</p> <p>INTERVIEWER - Enter above information and SKIP to Check item P-1.</p> <p>903 0 <input type="checkbox"/> No - Ask 65</p>		<p>901 Yes - Which household member? *</p> <p>902 <input type="checkbox"/> Line No. T.D. trip No.</p> <p>INTERVIEWER - Enter above information and SKIP to Check item P-1.</p> <p>903 0 <input type="checkbox"/> No - Ask 65</p>		<p>901 Yes - Which household member? *</p> <p>902 <input type="checkbox"/> Line No. T.D. trip No.</p> <p>INTERVIEWER - Enter above information and SKIP to Check item P-1.</p> <p>903 0 <input type="checkbox"/> No - Ask 65</p>		<p>901 Yes - Which household member? *</p> <p>902 <input type="checkbox"/> Line No. T.D. trip No.</p> <p>INTERVIEWER - Enter above information and SKIP to Check item P-1.</p> <p>903 0 <input type="checkbox"/> No - Ask 65</p>	
<p>TRIP PURPOSE CODES</p> <p>01 - To or from work 02 - Work related business 03 - Shopping 04 - Other family or personal business 05 - School/Church 06 - Doctor/Dentist 07 - Vacation</p>		<p>08 - Visit friends or relatives 09 - Pleasure driving 10 - Other social or recreational 11 - Other</p>		<p>NOTES</p>											

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PGM 2+

Section VI - TRAVEL DAY - Continued

	TRIP 1	TRIP 2	TRIP 3	TRIP 4	TRIP 5	TRIP 6
65. Were there any non-household members in the travel party?	<p>626 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p> <p>627 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p>	<p>626 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p> <p>627 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p>	<p>626 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p> <p>627 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p>	<p>626 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p> <p>627 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p>	<p>626 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p> <p>627 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p>	<p>626 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p> <p>627 <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes -- How many? <input checked="" type="checkbox"/></p>
66. So there were _____ persons in the travel party? <i>INTERVIEWER - Verify that the sum of entries in items 84a, including the respondent, and 85 was the total number of persons.</i>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>	<p>628 _____ Persons</p>
67. What was the main means of transportation used for this trip? <i>Enter code from bottom of page.</i>	<p>629 <input type="checkbox"/> Enter code If "Other" - Specify <input checked="" type="checkbox"/></p>	<p>629 <input type="checkbox"/> Enter code If "Other" - Specify <input checked="" type="checkbox"/></p>	<p>629 <input type="checkbox"/> Enter code If "Other" - Specify <input checked="" type="checkbox"/></p>	<p>629 <input type="checkbox"/> Enter code If "Other" - Specify <input checked="" type="checkbox"/></p>	<p>629 <input type="checkbox"/> Enter code If "Other" - Specify <input checked="" type="checkbox"/></p>	<p>629 <input type="checkbox"/> Enter code If "Other" - Specify <input checked="" type="checkbox"/></p>
CHECK ITEM IN	<p><input type="checkbox"/> ASK 68a</p> <p><input type="checkbox"/> SKIP to Check Item N</p> <p><input type="checkbox"/> SKIP to 71a</p>	<p><input type="checkbox"/> ASK 68a</p> <p><input type="checkbox"/> SKIP to Check Item N</p> <p><input type="checkbox"/> SKIP to 71a</p>	<p><input type="checkbox"/> ASK 68a</p> <p><input type="checkbox"/> SKIP to Check Item N</p> <p><input type="checkbox"/> SKIP to 71a</p>	<p><input type="checkbox"/> ASK 68a</p> <p><input type="checkbox"/> SKIP to Check Item N</p> <p><input type="checkbox"/> SKIP to 71a</p>	<p><input type="checkbox"/> ASK 68a</p> <p><input type="checkbox"/> SKIP to Check Item N</p> <p><input type="checkbox"/> SKIP to 71a</p>	<p><input type="checkbox"/> ASK 68a</p> <p><input type="checkbox"/> SKIP to Check Item N</p> <p><input type="checkbox"/> SKIP to 71a</p>
68a. Was a household vehicle used for this trip? <i>Enter vehicle number "1" without asking if only one vehicle reported in 24a. Otherwise ask question as worded.</i>	<p>630 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - SKIP to 68c</p>	<p>630 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - SKIP to 68c</p>	<p>630 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - SKIP to 68c</p>	<p>630 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - SKIP to 68c</p>	<p>630 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - SKIP to 68c</p>	<p>630 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - SKIP to 68c</p>
68b. Which vehicle? <i>Enter number from item 24b, page 4.</i>	<p>631 _____ Vehicle number SKIP to 69</p>	<p>631 _____ Vehicle number SKIP to 69</p>	<p>631 _____ Vehicle number SKIP to 69</p>	<p>631 _____ Vehicle number SKIP to 69</p>	<p>631 _____ Vehicle number SKIP to 69</p>	<p>631 _____ Vehicle number SKIP to 69</p>
68c. Was the vehicle that was used for this trip -	<p>632 <input type="checkbox"/> Owned by someone else on trip?</p> <p>2 <input type="checkbox"/> Owned by someone else not on trip?</p> <p>3 <input type="checkbox"/> Rented by household member?</p> <p>4 <input type="checkbox"/> Rented by someone else?</p> <p>5 <input type="checkbox"/> Other - Specify <input checked="" type="checkbox"/></p>	<p>632 <input type="checkbox"/> Owned by someone else on trip?</p> <p>2 <input type="checkbox"/> Owned by someone else not on trip?</p> <p>3 <input type="checkbox"/> Rented by household member?</p> <p>4 <input type="checkbox"/> Rented by someone else?</p> <p>5 <input type="checkbox"/> Other - Specify <input checked="" type="checkbox"/></p>	<p>632 <input type="checkbox"/> Owned by someone else on trip?</p> <p>2 <input type="checkbox"/> Owned by someone else not on trip?</p> <p>3 <input type="checkbox"/> Rented by household member?</p> <p>4 <input type="checkbox"/> Rented by someone else?</p> <p>5 <input type="checkbox"/> Other - Specify <input checked="" type="checkbox"/></p>	<p>632 <input type="checkbox"/> Owned by someone else on trip?</p> <p>2 <input type="checkbox"/> Owned by someone else not on trip?</p> <p>3 <input type="checkbox"/> Rented by household member?</p> <p>4 <input type="checkbox"/> Rented by someone else?</p> <p>5 <input type="checkbox"/> Other - Specify <input checked="" type="checkbox"/></p>	<p>632 <input type="checkbox"/> Owned by someone else on trip?</p> <p>2 <input type="checkbox"/> Owned by someone else not on trip?</p> <p>3 <input type="checkbox"/> Rented by household member?</p> <p>4 <input type="checkbox"/> Rented by someone else?</p> <p>5 <input type="checkbox"/> Other - Specify <input checked="" type="checkbox"/></p>	<p>632 <input type="checkbox"/> Owned by someone else on trip?</p> <p>2 <input type="checkbox"/> Owned by someone else not on trip?</p> <p>3 <input type="checkbox"/> Rented by household member?</p> <p>4 <input type="checkbox"/> Rented by someone else?</p> <p>5 <input type="checkbox"/> Other - Specify <input checked="" type="checkbox"/></p>

81 - Auto (includes personal use taxi)	87 - Other truck	16 - Airplane	21 - Other
82 - Station wagon	88 - Motorized bicycle/moped	17 - Taxi (commercial use)	22 - School bus
83 - Passenger van	89 - Motorized camper coach	18 - Train	23 - School bus
84 - Pickup truck	90 - Other (P.O.V.)	19 - Streetcar	24 - School bus
85 - Pickup with camper	91 - Bus	20 - Elevated rail or subway	25 - Bicycle

Section VI - TRAVEL DAY - Continued

Household member line number _____

	633 1 TRIP 1	633 2 TRIP 2	633 3 TRIP 3	633 4 TRIP 4	633 5 TRIP 5	633 6 TRIP 6
69. Who was the driver on the trip? <i>Enter line number without asking if respondent was alone in the vehicle.</i>	634 <input type="checkbox"/> Not a household member Household member line number _____	634 <input type="checkbox"/> Not a household member Household member line number _____	634 <input type="checkbox"/> Not a household member Household member line number _____	634 <input type="checkbox"/> Not a household member Household member line number _____	634 <input type="checkbox"/> Not a household member Household member line number _____	634 <input type="checkbox"/> Not a household member Household member line number _____
70. If ... parked, did ... pay for parking? <i>SKIP to 71a if trip was to return home.</i>	635 <input type="checkbox"/> Did not park 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	635 <input type="checkbox"/> Did not park 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	635 <input type="checkbox"/> Did not park 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	635 <input type="checkbox"/> Did not park 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	635 <input type="checkbox"/> Did not park 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	635 <input type="checkbox"/> Did not park 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
71a. Was public transportation, other than taxis, available for the trip within 1/2 mile from where you started and also from where you were going?	636 <input type="checkbox"/> Yes 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know SKIP to Check Item N	636 <input type="checkbox"/> Yes 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know SKIP to Check Item N	636 <input type="checkbox"/> Yes 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know SKIP to Check Item N	636 <input type="checkbox"/> Yes 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know SKIP to Check Item N	636 <input type="checkbox"/> Yes 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know SKIP to Check Item N	636 <input type="checkbox"/> Yes 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know SKIP to Check Item N
b. What type of public transportation was available? <i>Mark (X) ALL that apply.</i>	637 <input type="checkbox"/> Bus * <input type="checkbox"/> Train 3 <input type="checkbox"/> Elevated rail or subway 4 <input type="checkbox"/> Streetcar 5 <input type="checkbox"/> Other - Specify _____	637 <input type="checkbox"/> Bus * <input type="checkbox"/> Train 3 <input type="checkbox"/> Elevated rail or subway 4 <input type="checkbox"/> Streetcar 5 <input type="checkbox"/> Other - Specify _____	637 <input type="checkbox"/> Bus * <input type="checkbox"/> Train 3 <input type="checkbox"/> Elevated rail or subway 4 <input type="checkbox"/> Streetcar 5 <input type="checkbox"/> Other - Specify _____	637 <input type="checkbox"/> Bus * <input type="checkbox"/> Train 3 <input type="checkbox"/> Elevated rail or subway 4 <input type="checkbox"/> Streetcar 5 <input type="checkbox"/> Other - Specify _____	637 <input type="checkbox"/> Bus * <input type="checkbox"/> Train 3 <input type="checkbox"/> Elevated rail or subway 4 <input type="checkbox"/> Streetcar 5 <input type="checkbox"/> Other - Specify _____	637 <input type="checkbox"/> Bus * <input type="checkbox"/> Train 3 <input type="checkbox"/> Elevated rail or subway 4 <input type="checkbox"/> Streetcar 5 <input type="checkbox"/> Other - Specify _____
CHECK ITEM N <i>Refer to item 39.</i> Did person take any trips of 75 miles or more during the period from _____ to _____ (14 day travel period)?	<input type="checkbox"/> Yes - Go to Check Item O <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Go to Check Item O <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Go to Check Item O <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Go to Check Item O <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Go to Check Item O <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Go to Check Item O <input type="checkbox"/> No - SKIP to Check Item P-1
CHECK ITEM O <i>Refer to item 45.</i> Did any of the trips reported in the 14 day travel period section end on _____ (travel day)?	<input type="checkbox"/> Yes - Ask 72a <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Ask 72a <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Ask 72a <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Ask 72a <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Ask 72a <input type="checkbox"/> No - SKIP to Check Item P-1	<input type="checkbox"/> Yes - Ask 72a <input type="checkbox"/> No - SKIP to Check Item P-1
72a. Is this trip or any portion of this trip reported in the 14-Day travel period section?	638 <input type="checkbox"/> No - SKIP to Check Item P-1 Yes - Which trip? _____ Enter trip number from section V. Mark (X) one 639 <input type="checkbox"/> 1 Outgoing 2 Return	638 <input type="checkbox"/> No - SKIP to Check Item P-1 Yes - Which trip? _____ Enter trip number from section V. Mark (X) one 639 <input type="checkbox"/> 1 Outgoing 2 Return	638 <input type="checkbox"/> No - SKIP to Check Item P-1 Yes - Which trip? _____ Enter trip number from section V. Mark (X) one 639 <input type="checkbox"/> 1 Outgoing 2 Return	638 <input type="checkbox"/> No - SKIP to Check Item P-1 Yes - Which trip? _____ Enter trip number from section V. Mark (X) one 639 <input type="checkbox"/> 1 Outgoing 2 Return	638 <input type="checkbox"/> No - SKIP to Check Item P-1 Yes - Which trip? _____ Enter trip number from section V. Mark (X) one 639 <input type="checkbox"/> 1 Outgoing 2 Return	638 <input type="checkbox"/> No - SKIP to Check Item P-1 Yes - Which trip? _____ Enter trip number from section V. Mark (X) one 639 <input type="checkbox"/> 1 Outgoing 2 Return
CHECK ITEM P-1 <i>Refer to item 58.</i> Have all travel day trips been accounted for?	<input type="checkbox"/> Yes - Go to Check Item P-2 <input type="checkbox"/> No - Return to item 60 for next trip	<input type="checkbox"/> Yes - Go to Check Item P-2 <input type="checkbox"/> No - Return to item 60 for next trip	<input type="checkbox"/> Yes - Go to Check Item P-2 <input type="checkbox"/> No - Return to item 60 for next trip	<input type="checkbox"/> Yes - Go to Check Item P-2 <input type="checkbox"/> No - Return to item 60 for next trip	<input type="checkbox"/> Yes - Go to Check Item P-2 <input type="checkbox"/> No - Return to item 60 for next trip	<input type="checkbox"/> Yes - Go to Check Item P-2 <input type="checkbox"/> No - Return to item 60 for next trip

Section VI - TRAVEL DAY - Continued		_____ Household member line number
CHECK ITEM P-2	Refer to trip purpose (item 60) for last trip reported. Did person return home?	<input type="checkbox"/> Yes - SKIP to Check Item P-3 <input type="checkbox"/> No - Ask 72b
72b. On the last trip, . . . were (was) _____ purpose in 60 for last trip. How many miles did . . . travel before returning home?		PGM 2 ▾ (640) _____ Miles
CHECK ITEM P-3	Refer to item 67 for each trip reported. Is one of the codes 12-17 entered, to indicate public transportation was used on any of the trips?	<input type="checkbox"/> Yes <input type="checkbox"/> No - SKIP to 74
73a. . . . used public transportation on (some of) those trips. What were . . . reasons for using it? Any other reason? Mark (X) ALL that apply		(641) 1 <input type="checkbox"/> No driver's license 2 <input type="checkbox"/> No car available 3 <input type="checkbox"/> Cheaper than auto 4 <input type="checkbox"/> No parking problems (642) 5 <input type="checkbox"/> No driving strain 6 <input type="checkbox"/> Faster than auto 7 <input type="checkbox"/> Other - Specify
b. Could . . . have made these trips without using public transportation?		(643) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to interviewer instruction at bottom of page.
74. . . . did not use public transportation on any of these trips. What were . . . reasons for not using it? Any other reason? Mark (X) ALL that apply.		(644) 1 <input type="checkbox"/> None available 2 <input type="checkbox"/> Schedule is inconvenient 3 <input type="checkbox"/> Location is inconvenient 4 <input type="checkbox"/> Too many transfers 5 <input type="checkbox"/> Too expensive 6 <input type="checkbox"/> Takes too long (645) 7 <input type="checkbox"/> Preferred to use car 8 <input type="checkbox"/> Need auto for work 9 <input type="checkbox"/> Had too much to carry 10 <input type="checkbox"/> Physical disability (646) 11 <input type="checkbox"/> Mental impairment 12 <input type="checkbox"/> Not familiar with transit system 13 <input type="checkbox"/> Wasn't traveling far enough (647) 14 <input type="checkbox"/> Other - Specify
INTERVIEWER - Transcribe total number of travel day trips reported for this person from item 58		(648) _____ Trips

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Section VII – USE OF SAFETY DEVICES IN HOUSEHOLD VEHICLES

(700) _____ Household member line number

Part A – FOR HOUSEHOLD MEMBERS AGE 5+

CHECK
ITEM Q-1

Refer to Item 24a, page 4.

Is there an entry of one or more household vehicles?

- Yes – SKIP to Read Statement
 No – Go to Check Item Q-2

CHECK
ITEM Q-2

Refer to household member line number at the top of the page.

Is line number that of the household respondent?

- Yes – Return to household roster page and ask items 22 and 23.
 No – Complete sections III–VI for next household member aged 5+. If no other household members, END INTERVIEW.

READ – Now I would like to ask a few questions about . . . use of safety devices in household vehicles.

INTERVIEWER – If motorcycle and/or mopeds ONLY entries) in 24b, SKIP to Check Item R-1.

75. How often do (does) . . . wear seat belts –

- (701) 1 Always – SKIP to 78a 3 Sometimes
2 Most of the time 4 Never – SKIP to item 79a

76. How often do (does) . . . wear seat belts –

- (702) 1 Always
2 Most of the time
3 Sometimes
4 Never

a. When roads are wet, or snow and ice covered?

b. On long trips of 75 miles or more?

- (703) 1 Always
2 Most of the time
3 Sometimes
4 Never

c. On short trips around town?

- (704) 1 Always
2 Most of the time
3 Sometimes
4 Never

77. Do (Does) . . . wear seat belts when . . . are (is) –

Do not ask if respondent under 16 years of age.

a. The driver?

- (705) 1 Yes
2 No
0 Household member does not drive

b. Front seat passenger?

- (706) 1 Yes
2 No

c. Back seat passenger?

- (707) 1 Yes
2 No

For persons 25 years and younger, use alternative "since childhood".

78a. Since 1964, when seat belts became available (Since childhood) have (has) . . . worn seat belts?

- (708) 1 Yes – SKIP to Check Item R-1
2 No

D-23

Section VII - USE OF SAFETY DEVICES IN HOUSEHOLD VEHICLES - Continued

_____ Household member line number

78b. Why did . . . begin wearing seat belts?

Mark (X) ALL that apply

Any other reason?

- 709 Safety
- * 2 Peer pressure
- 3 Spouse insisted
- 4 Media advertisement
- 5 Got married
- 6 Got older
- 710 Required by parent
- * 8 Required by employer
- 9 To set good family example
- 10 Changed to new vehicle
- 711 Previous accident or emergency
- * 12 Stop experience involving injury
- 13 Ignition interlock
- 712 Other - Specify _____

} SKIP to Check Item R-1

79a. Have (has) . . . ever worn seat belts?

- 713 Yes - SKIP to 79c
- 2 No - Ask 79b

b. Why don't (doesn't) . . . wear seat belts?

Mark (X) ALL that apply

- 714 Inconvenient
- * 2 Don't need them
- 3 Uncomfortable
- 4 Fear of being trapped in vehicle
- 5 Previous accident experience
- 6 Don't work
- 715 Other - Specify _____
- * 7 _____

} SKIP to Check Item Q-3

c. Why did . . . stop wearing seat belts?

Mark (X) ALL that apply

- 716 Inconvenient
- * 2 Don't need them
- 3 Uncomfortable
- 4 Fear of being trapped in vehicle
- 5 Previous accident experience
- 6 Don't work
- 717 Other - Specify _____
- * 7 _____

Refer to 79a

CHECK
ITEM Q-3

Has person ever worn seat belts?

- Yes - Ask 80
- No - SKIP to Check Item R-1

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Section VII - USE OF SAFETY DEVICES IN HOUSEHOLD VEHICLES - Continued

Household member line number

80. How often did . . . wear seat belts?

a. When roads were wet, or snow and ice covered?

- 718
- 1 Always
 - 2 Most of the time
 - 3 Sometimes
 - 4 Never

b. On long trips of 75 miles or more?

- 719
- 1 Always
 - 2 Most of the time
 - 3 Sometimes
 - 4 Never

c. On short trips around town?

- 720
- 1 Always
 - 2 Most of the time
 - 3 Sometimes
 - 4 Never

81. Why did . . . wear them?

Mark (X) ALL that apply

Any other reason?

- 721 *
- 1 Safety
 - 2 Peer pressure
 - 3 Spouse insisted
 - 4 Media advertisement
 - 5 Got married
 - 6 Got older
 - 7 Required by parent
 - 8 Required by employer
 - 9 To set good example for family
 - 10 Changed to new vehicle
 - 11 Previous accident or emergency stop
 - 12 Started work, left school
 - 13 Ignition interlock
 - 14 Other - Specify: *
- 722 *
- 723 *
- 724 *

CHECK ITEM R-1 Refer to Item 24c, page 4. Is there an entry of code 9, motorcycle?

- Yes - Ask 82a
- No - SKIP to Check Item R-2

82a. Do (does) . . . drive or ride a motorcycle?

- 725
- 1 Yes
 - 2 No - SKIP to Check Item R-2

b. How often do (does) . . . wear a helmet when driving/riding a motorcycle?

- 726
- 1 Always
 - 2 Most of the time
 - 3 Sometimes
 - 4 Never

Section VII - USE OF SAFETY DEVICES IN HOUSEHOLD VEHICLES - Continued		_____ Household member line number
CHECK ITEM R-2	<i>Refer to item 35e.</i> Is the household member a licensed driver?	<input type="checkbox"/> Yes - Ask 83a <input type="checkbox"/> No - SKIP to Check Item S-1
	83a. Have . . . had any accidents as a driver during the past 12 months?	(727) Yes - How many? _____
		<input type="checkbox"/> No - SKIP to Check Item S-1
	b. Was anyone in . . . vehicle injured in any of the accidents?	(728) Yes - How many? _____
		<input type="checkbox"/> No - Go to Check Item S-1
CHECK ITEM S-1	<i>Refer to household member line number at the top of the page.</i> Is this the household respondent?	<input type="checkbox"/> Yes - Go to Check Item S-2 <input type="checkbox"/> No - Complete sections III-VII-A for next household member aged 5+. If no other household members, END INTERVIEW.
CHECK ITEM S-2	<i>Refer to household roster page, item 15, page 2.</i> Are there any household members age four years or younger?	<input type="checkbox"/> Yes - SKIP to section VII, part B <input type="checkbox"/> No - Return to household roster page, and ask items 22 and 23.
NOTES		

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Section VII - USE OF SAFETY DEVICES IN HOUSEHOLD VEHICLES - Continued

Part B - FOR CHILDREN 4 YEARS OF AGE AND YOUNGER

READ - How I would like to ask about the use of safety devices in vehicles owned or used by this household for household members four years of age or younger.

INTERVIEWER - Transcribe line number and name of each household member four years of age or younger to appropriate space below.

PGM 24	Line number	Line number	Line number	Line number
84. Do you own or have access to a child safety seat for ...?	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No
85a. Does ... usually use a child safety seat, seat belts or some other safety device while a passenger in a household vehicle?	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Don't know Return to item 84 for next child four or younger. If no other child four or younger, return to household roster page and ask items 22 and 23.	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Don't know Refer to item 84 for next child four or younger. If no other child four or younger, return to household roster page and ask items 22 and 23.	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Don't know Return to item 84 for next child four or younger. If no other child four or younger, return to household roster page and ask items 22 and 23.	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Don't know Return to item 84 for next child four or younger. If no other child four or younger, return to household roster page and ask items 22 and 23.
b. What type of safety devices does ... usually use? SHOW FLASHCARD H Mark (X) ALL that apply Any others?	<input type="checkbox"/> 1 Child safety seat <input type="checkbox"/> 2 Lap belts <input type="checkbox"/> 3 Lap and shoulder belts <input type="checkbox"/> 4 Child harness <input type="checkbox"/> 5 Child held by passenger <input type="checkbox"/> 6 Other - Specify	<input type="checkbox"/> 1 Child safety seat <input type="checkbox"/> 2 Lap belts <input type="checkbox"/> 3 Lap and shoulder belts <input type="checkbox"/> 4 Child harness <input type="checkbox"/> 5 Child held by passenger <input type="checkbox"/> 6 Other - Specify	<input type="checkbox"/> 1 Child safety seat <input type="checkbox"/> 2 Lap belts <input type="checkbox"/> 3 Lap and shoulder belts <input type="checkbox"/> 4 Child harness <input type="checkbox"/> 5 Child held by passenger <input type="checkbox"/> 6 Other - Specify	<input type="checkbox"/> 1 Child safety seat <input type="checkbox"/> 2 Lap belts <input type="checkbox"/> 3 Lap and shoulder belts <input type="checkbox"/> 4 Child harness <input type="checkbox"/> 5 Child held by passenger <input type="checkbox"/> 6 Other - Specify
CHECK ITEM T				
85b. Where in the vehicle is the child safety seat usually positioned?	<input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Back <input type="checkbox"/> 3 Don't know	<input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Back <input type="checkbox"/> 3 Don't know	<input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Back <input type="checkbox"/> 3 Don't know	<input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Back <input type="checkbox"/> 3 Don't know
b. Does the child safety seat have a built-in belt or internal harness?	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No - SKIP to 86d	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No - SKIP to 86d	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No - SKIP to 86d	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No - SKIP to 86d

Section VII - USE OF SAFETY DEVICES IN HOUSEHOLD VEHICLES - Continued

PCOM 2.1	Line number	Line number	Line number	Line number	Line number
<p>85c. How often do you buckle the internal harness or built-in belt in the child safety seat?</p>	<p>806</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>806</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>806</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>806</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>807</p>
<p>4. How often do you fasten the vehicle's seat belt around the child seat?</p>	<p>809</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>809</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>809</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>809</p> <p>1 <input type="checkbox"/> Always 2 <input type="checkbox"/> Most of the time 3 <input type="checkbox"/> Sometimes 4 <input type="checkbox"/> Never</p>	<p>809</p>
<p>87a. Has ... ever been injured in a traffic accident or emergency stop while not in the child safety seat?</p>	<p>810</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know</p>	<p>810</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know</p>	<p>810</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know</p>	<p>810</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 8 <input type="checkbox"/> Don't know</p>	<p>810</p> <p>Return to item 84 for next child. If no other child four years or younger, return to household roster page and ask items 22 and 23.</p>
<p>8. Was ... treated in a hospital for the injury?</p>	<p>811</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>	<p>811</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>	<p>811</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>	<p>811</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>	<p>811</p> <p>Return to item 84 for next child. If no other child four years or younger, return to household roster page and ask items 22 and 23.</p>

NOTES

APPENDIX E
OCCUPATIONAL CLASSIFICATION SYSTEM
OCCUPATION CODES

U.S. DEPARTMENT OF COMMERCE
Bureau of the Census
Washington, D.C. 20233

1980 CENSUS OF POPULATION
OCCUPATIONAL CLASSIFICATION SYSTEM
DETAILED OCCUPATIONAL CATEGORIES

(The numbers in parentheses refer to the 1980 Standard Occupational Classification code equivalents. Pt means part. M.e.c. means not elsewhere classified.)

MANAGERIAL AND PROFESSIONAL SPECIALTY OCCUPATIONS

1980
CODE

EXECUTIVE, ADMINISTRATIVE, AND MANAGERIAL OCCUPATIONS

003 Legislators (111)
004 Chief executives and general administrators,
public administration (112)
005 Administrators and officials, public administra-
tion (1132-1139)
006 Administrators, protective services (1131)
007 Financial managers (122)
008 Personnel and labor relations manager (123)
009 Purchasing managers (124)
013 Managers, marketing, advertising, and public rela-
tions (125)
014 Administrators, education and related fields (128)
015 Managers, medicine and health (131)
016 Managers, properties and real estate (1353)
017 Postmasters and mail superintendents (1344)
018 Funeral directors (pt 1359)
019 Managers and administrators, n.e.c (121, 126, 127,
132-139, exc. 1344, 1353, pt 1359)

Management Related Occupations

023 Accountants and auditors (1412)
024 Underwriters (1414)
025 Other financial officers (1415, 1419)
026 Management analysts (142)
027 Personnel, training, and labor relations special-
ists (143)
028 Purchasing agents and buyers, farm products (1443)
029 Buyers, wholesale and retail trade except farm
products (1442)

033 Purchasing agents and buyers, n.e.c. (1449)
034 Business and promotion agents (145)
035 Construction inspectors (1472)
036 Inspectors and compliance officers, exc. construction (1473)
037 Management related occupations, n.e.c. (149)

Professional Specialty Occupations

Engineers, Architects, and Surveyors

043 Architects (161)

Engineers

044 Aerospace (1622)
045 Metallurgical and materials (1623)
046 Mining (1624)
047 Petroleum (1625)
048 Chemical (1626)
049 Nuclear (1627)
053 Civil (1628)
054 Agricultural (1632)
055 Electrical and electronic (1633, 1636)
056 Industrial (1634)
057 Mechanical (1635)
058 Marine and naval architects (1637)
059 Engineers, n.e.c. (1639)
063 Surveyors and mapping scientists (164)

Mathematical and Computer Scientists

064 Computer systems analysts and scientists (171)
065 Operations and systems researchers and analysts (172)
066 Actuaries (1732)
067 Statisticians (1733)
068 Mathematical scientists, n.e.c. (1739)

Natural Scientists

069 Physicists and astronomers (1842, 1843)
073 Chemists, except biochemists (1845)
074 Atmospheric and space scientists (1846)
075 Geologists and geodesists (1847)
076 Physical scientists, n.e.c. (1849)
077 Agricultural and food scientists (1853)
078 Biological and life scientists (1854)
079 Forestry and conservation scientists (1852)
083 Medical scientists (1855)

Health Diagnosing Occupations

084 Physicians (261)
085 Dentists (262)
086 Veterinarians (27)
087 Optometrists (281)
088 Podiatrists (283)
089 Health diagnosing practitioners, n.e.c. (289)

Health Assessment and Treating Occupations

095 Registered nurses (29)
096 Pharmacists (301)
097 Dietitians (302)

Therapists

098 Inhalation therapists (3031)
099 Occupational therapists (3032)
103 Physical therapists (3033)
104 Speech therapists (3034)
105 Therapists, n.e.c. (3039)
106 Physicians' assistants (304)

Teachers, Postsecondary

113 Earth, environmental, and marine science teachers
(2212)
114 Biological science teachers (2213)
115 Chemistry teachers (2214)
116 Physical teachers (2215)
117 Natural science teachers, n.e.c. (2216)
118 Psychology teachers (2217)
119 Economics teachers (2218)
123 History teachers (2222)
124 Political science teachers (2223)
125 Sociology teachers (2224)
126 Social science teachers, n.e.c. (2225)
127 Engineering teachers (2226)
128 Mathematical science teachers (2227)
129 Computer science teachers (2228)
133 Medical science teachers (2231)
134 Health specialists teachers (2232)
135 Business, commerce, and marketing teachers (2233)
136 Agriculture and forestry teachers (2234)
137 Art, drama, and music teachers (2235)
138 Physical education teachers (2236)
139 Education teachers (2237)
143 English teachers (2238)
144 Foreign language teachers (2242)
145 Law teachers (2243)
146 Social work teachers (2244)
147 Theology teachers (2245)
148 Trade and industrial teachers (2246)
149 Home economics teachers (2247)
153 Teachers, postsecondary, n.e.c. (2249)
154 Postsecondary teachers, subject not specified

Teachers, Except Postsecondary

155 Teachers, prekindergarten and kindergarten (231)
N(156) Teachers, elementary school (232)
P(157) Teachers, secondary school (233)
158 Teachers, special education (235)
159 Teachers, n.e.c. (236, 239)

163 Counselors, educational and vocational (24)

	Librarians, Archivists, and Curators
164	Librarians (251)
165	Archivists and curators (252)
	Social Scientists and Urban Planners
166	Economists (1912)
167	Psychologists (1915)
168	Sociologists (1916)
169	Social scientists, n.e.c. (1913, 1914, 1919)
173	Urban planners (192)
	Social, Recreation, and Religious Workers
174	Social workers (2032)
175	Recreational workers (2033)
176	Clergy (2042)
177	Religious workers, n.e.c. (2049)
	Lawyers and Judges
178	Lawyers (211)
179	Judges (212)
	Writers, Artists, Entertainers, and Athletes
183	Authors (321)
184	Technical writers (389)
185	Designers (322)
186	Musicians and composers (323)
187	Actors and directors (324)
188	Painters, sculptors, craft-artists, and artist printmakers (325)
189	Photographers (326)
193	Dancers (327)
194	Artists, performers, and related workers, n.e.c. (328, 329)
195	Editors and reporters (331)
197	Public relations specialists (332)
198	Announcers (333)
199	Athletes (34)

TECHNICAL, SALES, AND ADMINISTRATIVE SUPPORT OCCUPATIONS

Technicians and Related Support Occupations

Health Technologists and Technicians

203	Clinical laboratory technologists and technicians (362)
204	Dental hygienists (363)
205	Health record technologists and technicians (364)
206	Radiologic technicians (365)
207	Licensed practical nurses (366)
208	Health technologists and technicians, n.e.c. (369)

Technologists and Technicians, Except Health Engineering and Related Technologists and Technicians

- 213 Electrical and electronic technicians (3711)
- 214 Industrial and electronic technicians (3712)
- 215 Mechanical engineering technicians (3713)
- 216 Engineering technicians, n.e.c. (3719)
- 217 Drafting occupations (372)
- 218 (Surveying and mapping technicians (373)

Science Technicians

- 223 Biological technicians (382)
- 224 Chemical technicians (3831)
- 225 Science technicians, n.e.c. (3832, 3833, 384, 389)

Technicians; Except Health, Engineering, and Science

- 226 Airplane pilots and navigators (825)
- 227 Air traffic controllers (392)
- 228 Broadcast equipment operators (393)
- 229 Computer programmers (3971, 3972)
- 233 Tool programmers, numerical control (3974)
- 234 Legal assistants (396)
- 235 Technicians, n.e.c. (399)

Sales Occupations

- 243 Supervisors and proprietors, sales occupations (40)

Sales Representative, Finance and Business Services

- 253 Insurance sales occupations (4122)
- 254 Real estate sales occupations (4123)
- 255 Securities and financial services sales occupations
- 256 Advertising and related sales occupations (4153)
- 257 Sales occupations, other business services (4152)

Sales Representatives, Commodities Except Retail

- 258 Sales engineers (421)
- 259 Sales representatives, mining, manufacturing and wholesale (423, 424)

Sales Workers, Retail and Personal Services

- 263 Sales workers, motor vehicles and boats (4342, 4344)
- 264 Sales workers, apparel (4346)
- 265 Sales workers, shoes (4351)
- 266 Sales workers, furniture and home furnishings (4348)
- 267 Sales workers, radio, TV, hi-fi, and appliances (4343, 4352)

268 Sales workers, hardware and building supplies
(4353)
269 Sales workers, parts (4367)
274 Sales workers, other commodities (4343, 4347,
4356, 4359, 4362, 4369)
275 Sales counter clerks (4363)
Q(276) Cashiers (4364)
277 Street and door-to-door sales workers (4366)
278 News vendors (4365)

Sales Related Occupations

283 Demonstrators, promoters and models, sales (445)
284 Auctioneers (447)
285 Sales support occupations, n.e.c. (444, 446, 449)

Administrative Support Occupations, including Clerical

Supervisors, Administrative Support Occupations

303 Supervisors, general office (4511, 4515, 4516,
4519, 4529)
304 Supervisors, computer equipment operators (4512)
305 Supervisors, financial records processing (4512)
306 Chief communications operators (4523)
307 Supervisors distribution, scheduling and adjusting
clerks (4522, 4524-4528)

Computer Equipment Operators

308 Computer operators (4612)
309 Peripheral equipment operators (4613)

Secretaries, Stenographers, and Typists

R(313) Secretaries (4622)
314 Stenographers (4623)
315 Typists (4624)

Information Clerks

316 Interviewers (4642)
317 Hotel clerks (4643)
318 Transportation ticket and reservation agents
(4644)
319 Receptionists (4645)
323 Information clerks, n.e.c. (4649)

Records Processing Occupations, Except Financial

325 Classified-ad clerks (4662)
326 Correspondence clerks (4663)
327 Order clerks (4664)
328 Personnel clerks, except payroll and timekeeping
(4692)
329 Library clerks (4694)
335 File clerks (4696)
336 Records clerks (4699)

Financial Records Processing Occupations

S(337) Bookkeepers, accounting, and auditing clerks (4712)
338 Payroll and timekeeping clerks (4713)
339 Billing clerks (4715)
343 Cost and rate clerks (4716)
344 Billing, posting and calculating machine operators
(4718)

Duplicating, Mail and Other Office Machine Operators

345 Duplicating machine operators (4722)
346 Mail preparing and paper handling machine
operators (4723)
347 Office machine operators, n.e.c. (4729)

Communications Equipment Operators

348 Telephone operators (4732)
349 Telegraphers (4733)
353 Communications equipment operators, n.e.c. (4739)

Mail and Message Distributing Occupations

354 Postal clerks, except mail carriers (4742)
355 Mail carriers, postal service (4743)
356 Mail clerks, except postal service (4744)
357 Messengers (4745)

Material Recording, Scheduling, and Dist. Clerks

359 Dispatchers (4751)
363 Production coordinators (4752)
364 Traffic, shipping, and receiving clerks (4753)
365 Stock and inventory clerks (4754)
366 Meter readers (4755)
368 Weighers, measurers, and checkers (4756)
369 Samplers (4757)
373 Expeditors (4758)
374 Material recording, scheduling, and distributing
clerks, n.e.c. (4759)

Adjusters and Investigators

375 Insurance adjusters, examiners, and investigators
(4782)
376 Investigators and adjusters, except insurance
(4783)
377 Eligibility clerks, social welfare (4784)
378 Bill and account collectors (4786)

Miscellaneous Administrative Support Occupations

379 General office clerks (463)
383 Bank Tellers (4791)
384 Proofreaders (4792)
385 Data-entry keyers (4793)
386 Statistical clerks (4794)
387 Teachers' aides (4795)
389 Administrative support occupations, n.e.c. (4787,
4799)

SERVICE OCCUPATIONS

Private Household Occupations

403 Launderers and ironers (503)
404 Cooks, private household (504)
405 Housekeepers and butlers (505)
406 Child care workers, private household (506)
T(407) Private household cleaners and servants (502, 507,
509)

Protective Service Occupations

Supervisors, Protective Service Occupations

413 Supervisors, firefighting and fire prevention
occupations (5111)
414 Supervisors, police and detectives (5112)
415 Supervisors, guards (5113)

Firefighting and Fire Prevention Occupations

416 Fire inspection and fire prevention occupied to
authorize an individual to charge

538 Office machine repairers (6174)
539 Mechanical controls and valve repairers (6175)
543 Elevator installers and repairers (6176)
544 Millwrights (6178)
547 Specified mechanics and repairers, n.e.c. (6177,
6179)
549 Not specified mechanics and repairers

Construction Trades

Supervisors, construction occupations

553 Supervisors, brickmasons, stonemasons, and tile
setters (6312)
554 Supervisors, carpenters and related workers (6313)
555 Supervisors, electricians and power transmission
installers (6314)
556 Supervisors; painters, paperhangers, and plaster-
ers (6315)
557 Supervisors; plumbers, pipefitters, and
steamfitters (6316)
558 Supervisors, n.e.c. (6311, 6318)

Construction Trades, Except Supervisors

563 Brickmasons and stonemasons (pt 6412, pt 6413)
564 Brickmason and stonemason apprentices (pt 6412, pt
6413)
565 Tile setters, hard and soft (6414, pt 6462)
566 Carpet installers (pt 6422)
Y(567) Carpenters (pt 6422)
569 Carpenter apprentices (pt 6422)
573 Drywall installers (6424)

575 Electricians (pt 6432)
 576 Electrician apprentices (pt 6432)
 577 Electrical power installers and repairers (6433)
 579 Painters, construction and maintenance (6442)
 583 Paperhangers (6443)
 584 Plasterers (6444)
 585 Plumbers, pipefitters, and steamfitters (pt 645)
 587 Plumber, pipefitter, and steamfitter apprentices
 (pt 645)
 588 Concrete and terrazzo finishers (6463)
 589 Glaziers (6464)
 593 Insulation workers (6465)
 594 Paving, surfacing, and tamping equipment operators
 (6466)
 595 Roofers (6468)
 596 Sheetmetal duct installers (6472)
 597 Structural metal workers (6473)
 598 Drillers, earth (6474)

Extractive Occupations

613 Supervisors, extractive occupations (632)
 614 Drillers, oil well (652)
 615 Explosives workers (653)
 616 Mining machine operators (654)
 617 Mining occupations, n.e.c. (656)

Precision Production Occupations

633 Supervisors, production occupations (67, 71)

Precision Metal Working Occupations

634 Tool and die makers (pt 6811)
 635 Tool and die maker apprentices (pt 6811)
 636 Precision assemblers, metal (6812)
 637 Machinists (pt 6017)
 639 Machinist apprentices (pt 6813)
 643 Toolmakers (6814)
 644 Precision grinders, filers, and tool sharpeners
 (6816)
 645 Patternmakers and model makers, metal (6817)
 646 Lay-out workers (6821)
 647 Precious stones and metal workers (Jewelers 6822,
 6866)
 649 Engravers, metal (6823)
 653 Sheet metal workers (pt 6824)
 654 Sheet metal worker apprentices (pt 6824)
 655 Miscellaneous precision metal workers (6829)

Precision Woodworking Occupations

656 Patternmakers and model makers, wood (6831)
 657 Cabinet makers and bench carpenters (6832)
 658 Furniture and wood finishers (6835)
 659 Miscellaneous precision woodworkers (6839)

**Precision Textile, Apparel, and Furnishings
Machine Workers**

- 666 Dressmaking (pt 6852, pt 7752)
- 667 Tailors (pt 6852)
- 668 Upholsterers (6853)
- 669 Shoe repairers (6854)
- 673 Apparel and fabric pattenmakers (6856)
- 674 Miscellaneous precision apparel and fabric workers
(6859, pt 7752)

Precision Workers Assorted materials

- 675 Hand molders and shapers, except jewelers (6861)
- 676 Pattenmakers, lay-out workers, and cutters (6682)
- 677 Optical goods workers (6864 pt 7477, pt 7677)
- 678 Dental laboratory and medical appliance technicians
(6865)
- 679 Bookbinders (6844)
- 683 Electrical and electronic equipment assemblers
(6867)
- 684 Miscellaneous precision workers, n.e.c. (6869)

Precision Food Production Occupations

- 686 Butchers and meat cutters (6871)
- 687 Bakers (6872)
- 688 Food batchmakers (6873, 6879)

Precision Inspectors, Testers, and Related Workers

- 689 Inspectors, testers, and graders (6881, 828)
- 693 Adjusters and calibrators (6882)

Plan and System Operators

- 694 Water and sewage treatment plant operators (691)
- 695 Power plant operators (pt 693)
- 696 Stationary engineers (pt 693, 7668)

OPERATORS, FABRICATORS, AND LABORERS

Machine Operators, Assemblers, and Inspectors

**Machine Operators and Tenders, except Precision
Metalworking and Plastic Working Machine Operators**

- 703 Lathe and turning machine set-up operators (7312)
- 704 Lathe and turning machine operators (7512)
- 705 Milling and planing machine operators (7313,
7513)
- 706 Punching and stamping press machine operators
(7314, 7317, 7514, 7517)
- 707 Rolling machine operators (7316, 7516)
- 708 Drilling and boring machine operators (7318, 7518)
- 709 Grinding, abrading, buffing, and polishing machine
operators (7322, 7324, 7522)
- 713 Forging machine operators (7319, 7519)
- 714 Numerical control machine operators (7326)
- 715 Miscellaneous metal, plastic, stone, and glass
working machine operators (7329, 7529)

- 717 Fabricating machine operators, n.e.c. (7339, 7539)
- Metal and Plastic Processing Machine Operators**
- 719 Molding and casting machine operators (7315, 7342, 7515, 7542)
- 723 Metal plating machine operators (7343, 7543)
- 724 Heat treating equipment operators (7344, 7544)
- 725 Miscellaneous metal and plastic processing machine operators (7349, 7549)
- Woodworking Machine Operators**
- 726 Wood lathe, routing, and planing machine operators (7431, 7432, 7631, 7632)
- 727 Sewing machine operators (7433, 7633)
- 728 Shaping and joining machine operators (7435, 7635)
- 729 Nailing and tacking machine operators (7636)
- 733 Miscellaneous woodworking machine operators (7434, 7439, 7634, 7639)
- Printing Machine Operators**
- 734 Printing machine operators (7443, 7643)
- 735 Photoengravers and lithographers (6842, 7444, 7644)
- 736 Typesetters and compositors (6841, 7642)
- 737 Miscellaneous printing machine operators (6849, 7449, 7649)
- Textile, Apparel, and Furnishings Machine Operators**
- 738 Winding and twisting machine operators (7451, 7651)
- 739 Knitting, looping, taping, and weaving machine operators (7452, 7652)
- 743 Textile cutting machine operators (7434, 7439, 7634, 7639)
- 744 Textile sewing machine operators (7655)
- 745 Shoe machine operators (7656)
- 747 Pressing machine operators (7657)
- 748 Laundering and dry cleaning machine operators (6855, 7658)
- 749 Miscellaneous textile machine operators (6855, 7658)
- Machine Operators, Assorted Materials**
- 753 Cement and gluing machine operators (7661)
- 754 Packaging and filling machine operators (7462, 7662)
- 755 Extruding and forming machine operators (7463, 7663)
- 756 Mixing and blending machine operators (7664)
- 757 Separating, filtering, and clarifying machine operators (7476, 7666, 7676)
- 758 Compressing and compacting machine operators (7467, 7667)

- 759 Painting and paint spraying machine operators (7669)
- 763 Roasting and baking machine operators, food (7472, 7672)
- 764 Washing, cleaning, and pickling machine operators (7673)
- 765 Folding machine operators (7474, 7674)
- 766 Furnace, kiln, and oven operators, except food (7675)
- 768 Crushing and grinding machine operators (pt 7477, pt 7677)
- 769 Slicing and cutting machine operators (7478, 7678)
- 773 Motion picture projectionists (pt 7479)
- 774 Photographic process machine operators (6863, 6868, 7671)
- 777 Miscellaneous machine operators, n.e.c. (pt 7479, 7665, 7679)
- 779 Machine operators, not specified

Fabricators, Assemblers, and Hand Working Occupations

- 783 Welders and cutters (7332, 7532, 7714)
- 784 Solderers and brazers (7333, 7533, 7717)
- 785 Assemblers (772, 774)
- 786 Hand cutting and trimming occupations (7753)
- 787 Hand molding, casting, and forming occupations (7754, 7755)
- 789 Hand painting, coating, and decorating occupations (7756)
- 793 Hand engraving and printing occupations (7757)
- 794 Hand grinding and polishing occupations (7758)
- 795 Miscellaneous hand working occupations (7759)

Production Inspectors, Testers, Samplers, and Weighers

- 796 Production inspectors, checkers, and examiners (782, 787)
- 797 Production testers (783)
- 798 Production samplers and weighers (784)
- 799 Graders and sorters, except agricultural (785)

Transportation and Material Moving Occupations

Motor Vehicle Operators

- 803 Supervisors, motor vehicle operators (8111)
- Z(804) Truck drivers, heavy (8212, 8213)
- 805 Truck drivers, light (8214)
- 806 Driver-sales workers (8218)
- 808 Bus drivers (8215)
- 809 Taxicab drivers and chauffeurs (8216)
- 813 Parking lot attendants (874)
- 814 Motor transportation occupations, n.e.c. (8219)

Transportation Occupations, Except Motor Vehicles

Rail Transportation Occupations

- 823 Railroad conductors and yardmasters (8113)
- 824 Locomotive operating occupations (8332)
- 825 Railroad brake, signal, and switch operators
(8233)
- 826 Rail vehicle operators, n.e.c. (8239)

Water Transportation Occupations

- 828 Ship captains and mates, except fishing boats (pt
8241, 8242)
- 829 Sailors and deckhands (8243)
- 833 Marine engineers (8244)
- 834 Bridge, lock, and lighthouse tenders (8245)

Material Moving Equipment Operators

- 843 Supervisors, material moving equipment operators
(812)
- 844 Operating engineers (8312)
- 845 Longshore equipment operators (8313)
- 848 Hoist and winch operators (8314)
- 849 Crane and tower operators (8315)
- 853 Excavating and loading machine operators (8316)
- 855 Grader, dozer, and scraper operators (8316)
- 856 Industrial truck and tractor equipment operators
(8318)
- 859 Miscellaneous material moving equipment operators
(8319)

Handlers, Equipment Cleaners, Helpers, and Laborers

- 863 Supervisors, handlers equipment cleaners, and
laborers, n.e.c. (85)
- 864 Helpers, mechanics and repairers (863)
- 865 Helpers, construction trades (8641,-8645, 8648)
- 866 Helpers, surveyor (8646)
- 867 Helpers, extractive occupations (865)
- 869 Construction laborers (871)
- 873 Production helpers (861, 862)

Freight, Stock, and Material Handlers

- 875 Garbage collectors (8722)
- 876 Stevedores (8723)
- 877 Stock handlers and baggers (8724)
- 878 Machine feeders and offbearers (8725)
- 883 Freight, stock, and material handlers, n.e.c.
(8726)
- 885 Garage and service station related occupations
(873)
- 887 Vehicle washers and equipment cleaners (875)
- 888 Hand packers and packagers (8761)
- 889 Laborers, except construction (8769)

EXPERIENCED UNEMPLOYED NOT CLASSIFIED BY OCCUPATIONS

905 Last job Armed Forces
909 Last worked 1974 or earlier

APPENDIX F
INDUSTRIAL CLASSIFICATION SYSTEM
INDUSTRY CODE

January, 1982

1980 Census of Population
Industry Classification

(Number in parentheses are the 1972
SIC code equivalents 1/)

Census
Code

AGRICULTURE, FORESTRY, AND FISHERIES

010 (A) Agricultural production, crops (01)
011 Agricultural production, livestock (02)
020 Agricultural services, except horticultural (07, except 078)
021 Horticultural services (078)
030 Forestry (08)
031 Fishing, hunting, and trapping (09)

MINING

040 Metal mining (10)
041 Coal mining (11, 12)
042 Crude petroleum and natural gas extraction (13)
050 Nonmetallic mining and quarrying, except fuel (14)

060 (B) **CONSTRUCTION** (15, 16, 17)

MANUFACTURING

Nondurable goods

Food and kindred products
100 Meat products (201)
101 Dairy products (202)
102 Canned and preserved fruits and vegetables (203)
110 Grain mill products (204)
111 Bakery products (205)
112 Sugar and confectionery products (206)
120 Beverage industries (208)
121 Miscellaneous food preparations and kindred products
(207, 209)
122 Not specified food industries
130 Tobacco manufactures (21)
Textile mill products
132 Knitting mills (225)
140 Dyeing and finishing textiles, except wool and knit goods
(226)

1/ See Executive Office of the President, Office of Management and Budget, Standard Industrial Classification Manual, 1972 and the 1977 Supplement.

Census
Code

MANUFACTURING-Continued

Nondurable goods-Continued

141 Floor coverings, except hard surface (227)
142 Yarn, thread, and fabric mills (228, 221-224)
150 Miscellaneous textile mill products (229)
Apparel and other finished textile products
151 Apparel and accessories, except knit (231-238)
152 Miscellaneous fabricated textile products (239)
Paper and allied products
160 Pulp, paper, and paperboard mills (261-263, 266)
161 Miscellaneous paper and pulp products (264)
162 Paperboard containers and boxes (265)
Printing, publishing, and allied industries
171 (C) Newspaper publishing and printing (271)
172 Printing, publishing, and allied industries, except
newspapers (272-279)

Chemicals and allied products

180 Plastics, synthetics, and resins (282)
181 Drugs (283)
182 Soaps and cosmetics (284)
190 Paints, varnishes, and related products (285)
191 Agricultural chemicals (287)
192 Industrial and miscellaneous chemicals (281, 286, 289)

Petroleum and coal products

200 Petroleum refining (291)
201 Miscellaneous petroleum and coal products (295, 299)

Rubber and miscellaneous plastics products

210 Tires and inner tubes (301)
211 Other rubber products, and plastics footwear and belting
(302-304, 306)
212 Miscellaneous plastics products (307)
Leather and leather products
220 Leather tanning and finishing (311)
221 Footwear, except rubber and plastic (313, 314)
222 Leather products, except footwear (315-317, 319)

Durable goods

Lumber and wood products, except furniture

230 Logging (241)
231 Sawmills, planing mills, and millwork (242, 243)
232 Wood buildings and mobile homes (245)
241 Miscellaneous wood products (244, 249)
242 Furniture and fixtures (25)

Stone, clay, glass, and concrete products

250 Glass and glass products (321-323)
251 Cement, concrete, gypsum, and plaster products (324, 327)
252 Structural clay products (325)
261 Pottery and related products (326)
262 Miscellaneous nonmetallic mineral and stone products
(328, 329)

Census
Code

MANUFACTURING-Continued

Durable goods-Continued

	Metal industries
270	Blast furnaces, steelworks, rolling and finishing mills (331)
271	Iron and steel foundries (332)
272	Primary aluminum industries (3334, part 334, 3335-3355, 3361)
280	Other primary metal industries (3331-3333, 3339, Part 334, 3351, 3356, 3357, 3362, 3369, 339)
281	Cutlery, handtools, and other hardware (342)
282	Fabricated structural metal products (344)
290	Screw machine products (345)
291	Metal forgings and stampings (346)
292	Ordinance (348)
300	Miscellaneous fabricated metal products (341, 343, 347, 349)
301	Not specified metal industries
	Machinery, except electrical
310	Engines and turbines (351)
311	Farm machinery and equipment (352)
312	Construction and material handling machines (353)
320	Metalworking machinery (354)
321	Office and accounting machines (357, except 3573)
322	Electronic computing equipment (3573)
331	Machinery, except electrical, n.e.c. (355, 356, 358, 359)
332	Not specified machinery
	Electronical machinery, equipment, and supplies
340	Household appliances (363)
341	Radio, T.V., and communication equipment (365, 366)
342	Electrical machinery, equipment, and supplies, n.e.c. (361, 362, 364, 367, 369)
350	Not specified electrical machinery, equipment, and supplies
	Transportation equipment
351	Motor vehicles and motor vehicle equipment (371)
352	Aircraft and parts (372)
360	Ship and boat building and repairing (373)
361	Railroad locomotives and equipment (374)
362	Guided missiles, space vehicles, and parts (376)
370	Cycles and miscellaneous transportation equipment (375, 379)
	Professional and photographic equipment, and watches
371	Scientific and controlling instruments (381, 382)
372	Optical and health services supplies (383, 384, 385)
380	Photographic equipment and supplies (386)
381	Watches, clocks, and clockwork operated devices (387)
382	Not specified professional equipment
390	Toys, amusement, and sporting goods (394)
391	Miscellaneous manufacturing industries (39 exc. 394)
392	Not specified manufacturing industries

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Code

**TRANSPORTATION, COMMUNICATIONS,
AND OTHER PUBLIC UTILITIES**

Transportation

400 Railroads (40)
401 Bus service and urban transit (41, except 412)

**TRANSPORTATION, COMMUNICATIONS,
AND OTHER PUBLIC UTILITIES - Continued**

402 Taxicab service (412)
410 Trucking service (421, 423)
411 Warehousing and storage (422)
412 U.S. Postal Service (43)
420 Water transportation (44)
421 Air transportation (45)
422 Pipe lines, except natural gas (46)
432 Services incidental to transportation (47)
Communications
440 Radio and television broadcasting (483)
441 Telephone (wire and radio) (481)
442 Telegraph and miscellaneous communication services (482, 489)
Utilities and sanitary services
460 Electric light and power (491)
461 Gas and steam supply systems (492, 496)
462 Electric and gas, and other combinations (493)
470 Water supply and irrigation (494, 497)
471 Sanitary services (495)
472 Not specified utilities

WHOLESALE TRADE

Durable goods

500 Motor vehicles and equipment (501)
501 Furniture and home furnishings (502)
502 Lumber and construction materials (503)
510 Sporting goods, toys, and hobby goods (504)
511 Metals and minerals, except petroleum (505)
512 Electrical goods (506)
521 Hardware, plumbing and heating supplies (507)
522 Not specified electrical and hardware products
530 Machinery, equipment, and supplies (508)
531 Scrap and waste materials (5093)
532 Miscellaneous wholesale, durable goods (5094, 5099)

Nondurable goods

540 Paper and paper products (511)
541 Drugs, chemicals, and allied products (512, 516)
542 Apparel, fabrics, and notions (513)
550 Groceries and related products (514)
551 Farm products - raw materials (515)

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WHOLESALE TRADE-Continued

552 Petroleum products (517)
560 Alcoholic beverages (518)
561 Farm supplies (5191)
562 Miscellaneous wholesale, nondurable goods (5194, 5198, 5199)
571 Not specified wholesale trade

RETAIL TRADE

580 Lumber and building material retailing (521, 523)
581 Hardware stores (525)
582 Retail nurseries and garden stores
590 Mobile home dealers (527)
591 (D) Department stores (531)
592 Variety stores (533)
600 Miscellaneous general merchandise stores (539)
601 (E) Grocery stores (541)
602 Dairy products stores (545)
610 Retail bakeries (546)
611 Food stores, n.e.c. (542, 543, 544, 549)
612 Motor vehicle dealers (551, 552)
620 Auto and home supply stores (553)
621 Gasoline service stations (554)
622 Miscellaneous vehicle dealers (555, 556, 557, 559)
630 Apparel and accessory stores, except shoe (56, except 566)
631 Shoe stores (566)
632 Furniture and home furnishings stores (571)
640 Household appliances, TV, and radio stores (572, 573)
641 (F) Eating and drinking places (58)
642 Drug stores (591)
650 Liquor stores (592)
651 Sporting goods, bicycles, and hobby stores (5941, 5945, 5946)
652 Book and stationery stores (5942, 5943)
660 Jewelry stores (5944)
661 Sewing, needlework, and piece goods stores (5949)
662 Mail order houses (5961)
670 Vending machine operators (5962)
671 Direct selling establishments (5963)
672 Fuel and ice dealers (598)
681 Retail florists (5992)
682 Miscellaneous retail stores (593, 5947, 5948, 5993, 5994, 5999)
691 Not specified retail trade

FINANCE, INSURANCE, AND REAL ESTATE

700 (G) Banking (60)
701 Savings and loan associations (612)
702 Credit agencies, n.e.c. (61, except 612)
710 Security, commodity brokerage, and investment companies
(62, 67)

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FINANCE, INSURANCE, AND REAL ESTATE-Continued

- 711 (H) Insurance (63, 64)
- 712 Real estate, including real estate-insurance-law offices
(65, 66)

BUSINESS AND REPAIR SERVICES

- 721 Advertising (731)
- 722 Services to dwellings and other buildings (734)
- 730 Commercial research, development, and testing labs (7391, 7397)
- 731 Personnel supply services (736)
- 732 Business management and consulting services (7392)
- 740 Computer and data processing services (737)
- 741 Detective and protective services (7393)
- 742 Business services, n.e.c. (732, 733, 735, 7394, 7395,
7396, 7399)

BUSINESS AND REPAIR SERVICES - Continued

- 750 Automotive services, except repair (751, 752, 754)
- 751 Automotive repair shops (753)
- 752 Electrical repair shops (762, 7694)
- 760 Miscellaneous repair services (763, 764, 7692, 7699)

PERSONAL SERVICES

- 761 (J) Private households (88)
- 762 Hotels and motels (701)
- 770 Lodging places, except hotels and motels (702, 703, 704)
- 771 Laundry, cleaning, and garment services (721)
- 772 Beauty shops (723)
- 780 Barber shops (724)
- 781 Funeral service and crematories
- 782 Shoe repair shops (725)
- 790 Dressmaking shops (part 729)
- 791 Miscellaneous personal services (722, part 729)

ENTERTAINMENT AND RECREATION SERVICES

- 800 Theaters and motion pictures (78, 792)
- 801 Bowling alleys, billiard and pool parlors (793)
- 802 Miscellaneous entertainment and recreation services
(791, 794, 799)

PROFESSIONAL AND RELATED SERVICES

- 812 Offices of physicians (801, 803)
- 820 Offices of dentists (802)
- 821 Offices of chiropractors (8041)
- 822 Offices of optometrists (8042)
- 830 Offices of health practitioners, n.e.c. (8049)
- 831 (K) Hospitals (806)

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PROFESSIONAL AND RELATED SERVICES--Continued

832 Nursing and personal care facilities (805)
840 Health services, n.e.c. (807, 808, 809)
841 Legal services (81)
842 (L) Elementary and secondary schools (821)
850 (M) Colleges and universities (822)
851 Business, trade, and vocational schools (824)
852 Libraries (823)
860 Educational services, n.e.c. (829)
861 Job training and vocational rehabilitation services (833)
862 Child day care services (835)
870 Residential care facilities, without nursing (836)
871 Social services, n.e.c. (832, 839)
872 Museums, art galleries, and zoos (84)
880 Religious organizations (866)
881 Membership organizations (861-865, 869)
882 Engineering, architectural, and surveying services (891)
890 Accounting, auditing, and bookkeeping services (893)
891 Noncommercial educational and scientific research (892)
892 Miscellaneous professional and related services (899)

PUBLIC ADMINISTRATION

900 Executive and legislative offices (911-913)
901 General government, n.e.c. (919)
910 Justice, public order, and safety (92)
921 Public finance, taxation, and monetary policy (93)
922 Administration of human resources programs (94)
930 Administration of environmental quality and housing programs
(95)
931 Administration of economic programs (96)

**EXPERIENCED UNEMPLOYED NOT CLASSIFIED
BY INDUSTRY**

991 Last job Armed Forces
992 Last worked 1974 or earlier

APPENDIX G

NPTS Public Use Tape Request Form

1. Data Format Desired:
 SAS
 TPL
 EBCDIC
2. Number of Tapes Submitted:
 One (if requesting 6250 BPI)
 Four (if requesting 1600 BPI)
3. Method of Tape Submittal:
 With order
 Under separate cover
4. Type of Labeling Desired:
 Standard IBM labels
 No labels
5. Recording Density (9-track)
 1600 BPI 6250 BPI
6. Type of Organization
No Copying Fee:
 Educational
 Government
 Private Nonprofit
Copying Fee Charged:
 Private, other than nonprofit
 Private Individual
 Other, specify: _____
7. Name and Address
Name _____
Organization _____
Address _____
City, State, Zip Code _____
Phone No. _____
8. Total Fee Enclosed (Tape copying fee is applicable only to those organizations indicated in item 6.)
 \$36 (6250 BPI - 1 tape)
 \$144 (1600 BPI - 4 tapes)
9. Payment Enclosed as:
 Money Order
 Check. Make check payable to the Federal Highway Administration and send to:
Department of Transportation, FHWA, Office of Highway Information
Management (HPM-30), Washington, D. C. 20590. (202) 426-0160

APPENDIX H
URBANIZED AREAS WITHOUT AND WITH RAIL

Areas of 1,250,000 and greater without rail include:

Baltimore, MD
Dallas/Ft. Worth, TX
Denver, CO
Detroit, MI
Houston, TX
Los Angeles - Long Beach, CA
Miami, FL
Minneapolis - St. Paul, MN
Phoenix, AZ
Pittsburgh, PA
San Diego, CA
St. Louis, MO

Areas of 1,250,000 and greater with rail include:

Atlanta, GA
Boston, MA
Chicago, IL - Northwestern Indiana
Cleveland, OH
New York, NY - Northeastern, New Jersey
Philadelphia, PA
San Francisco - Oakland, CA
Seattle - Everett, WA
Washington, D.C.