

# 20XX ECONOMIC CENSUS VEHICLE INVENTORY AND USE SURVEY

TC-9502	(11-05-2020) Draft	t 5		OMB No. xxxx-xxxx: Approval Expires xx/xx/20xx
DUE DATE:				
Return your completed report form in the envelope provided or mail to:				
U.S. Census Bureau 1201 East 10th Street Jeffersonville, IN 47132-0001				
Need help or have questions about filling out this form?				
<b>Visit</b> our web site: www.census.gov/econhelp/vius				
OR				
<b>Call</b> 1-800-772-7851 between 8:30 a.m. and 5:00 p.m., EST,				
Monday through Friday.		(Ple	ease correc	et any errors in this mailing address.)
this questionnaire to answer the and return the report to the U.S.	questions for th Census Bureau ty of Census Bu	he <b>VEHICLE IDE</b> . By the same la ureau informatio	w, YOUR	requires businesses, organizations, and residents that receive IN THE REGISTRATION INFORMATION SECTION below REPORT IS CONFIDENTIAL. It may be seen only by persons be used only for statistical purposes. Further, copies retained
START		<ul><li>Use blue or</li><li>Please center</li></ul>		or pencil. s in their respective boxes.
		Example:	012	3456789
		L		
A REGISTRATION INFO	ORMATION	I		
All questions on this form Vehicle make		e vehicle identi <sup>.</sup> Model year	fied by th State	e following registration information:  Vehicle Identification Number (VIN)
vernote make		vioder year	Otate	Venicle Identification (VIIV)
► CAUTION:	Pay close a When prese the next que	ent, these instri	<b>irrows ai</b> uctions w	nd bolded instructions throughout this questionnaire. ill tell you where to go next. When not present, go to
1. Is the vehicle iden	tified above	still in your p	possessi	on OR your company's possession?
☐ Yes → GO to s	section <b>C</b> A	CQUISITION		
No → GO to s	ection B DI	SPOSAL		



B	DIS	SPOSAL
	1.	Did you dispose of this vehicle prior to January 1, 2020?
		Yes → GO to section O CONTACT INFORMATION
		□ No
	•	Month Year
	2.	When did you dispose of this vehicle?  Enter 2-digit month and 4-digit year
	3.	How did you dispose of this vehicle?
		NOTE: If you disposed of this vehicle after January 1, 2020, answer all of the remaining applicable questions according to how you used the vehicle during 2020. If you disposed of this vehicle prior to January 1, 2020 go to section Contact Information.
		Mark ONE box only.
		Sold or gave it away
		☐ Traded it in
		Junked, scrapped, or otherwise destroyed it
		Returned it to leasing company
		Repossessed
G	AC	CQUISITION  Month Year
	1.	When did you originally take physical possession of this vehicle?  Enter 2-digit month and 4-digit year
	2.	Was this vehicle new when you took physical possession of it?
		□ Yes
		□ No
	3.	Do you plan to replace this vehicle with a vehicle of a different weight class or axle load within the next 5 years?
		□ Yes
		□ No

O		ASI	
			<b>TE:</b> This section pertains to ownership leasing. Rental agreements are NOT covered.
	1.	Did	you lease this vehicle FROM another person or company during 2020?
			Yes → GO to question 3 below
			No
	2.	Did	you lease this vehicle TO another person or company during 2020?
			Yes
			No → GO to section TYPE OF VEHICLE
	3.		v did you lease this vehicle? ok ONE box only.
			Vehicle only
			Vehicle with driver
	4.	Was	s the leasing agreement for 12 months or more?
			Yes
			No
	5.	<b>Whi</b> <i>Mar</i>	ich of the following did the leasing agreement include? k ALL that apply.
			Financing only
			Full maintenance
			Payment of taxes (such as state or federal highway use taxes)
			Obtaining licenses and permits
			Recordkeeping
			Fuel contract
			None of the above
<b>B</b>	TY	PE (	OF VEHICLE
	1.	ls ti	his vehicle a semi-truck (tractor/trailer truck)?
			Yes → GO to section F PHYSICAL CHARACTERISTICS
			No

<b>)</b> TY	PE C	OF VEHICLE - Continued
2.		ch body type most closely resembled this vehicle? k ONE box only.
		Armored
		Beverage or bay
		Box truck
		Concrete mixer
		Concrete pumper
		Crane
		Curtainside
		Dump (including side, belly, or bottom dump)
		Flatbed (including any with added devices), stake, platform, etc.
		Low boy (platform with depressed center)
		Pole, logging, pulpwood, or pipe
		Service, utility, (telephone line, cable, pipeline, etc.)
		Service, other (mobile workshop, "craftsman's vehicle", etc.)
		Street sweeper
		Tank, dry bulk
		Tank, liquids or gases
		Tow/Wrecker (including flatbed type)
		Trash, garbage, or recycling
		Vacuum
		Van, basic enclosed (dry cargo)
		Van, insulated non-refrigerated
		Van, insulated refrigerated
		Van, open top (including low-side grain, fruit, potatbed, etc.)
		Van, step, walk-in, or multistep (including hi-cube or cutaway)
		Van, other
		Other – please specify <sub>▼</sub>



Ð	РН	YSI	CAL CHARACTERISTICS
			<b>NOTE:</b> Axles are long steel rods that run parallel with the front and rear bumpers and have wheels attached to them.
	1.	axle	at was the total number of axles, including liftable (tag) axles, on this vehicle, excluding es on trailer(s)?  k ONE box only.
			Two
			Three
			Four
			Five or more
	2.		v many tires were on the rear axle? k ONE box only.
			Two
			Four
	3.		v many of this vehicle's axles were powered? k ONE box only.
			One
			Two
			Other – please specify
	4.		m question 1 above, how many axles are liftable axles? k ONE box only.
			None → GO to question 7 on page 6
			One
			Two
			Three or more
	5.	Tota	m question 4 above, how many of the liftable axles were located in the following locations?  If number of axles indicated for this question should equal the total number of axles indicated in stion 4 above.  Axles
		Axle	es forward of the drive axle
		Axle	es behind the drive axle - below the chassis
		Axle	es behind the drive axle - extending beyond the chassis
	6.		m question 4 above, how many liftable axles are braking axles? k ONE box only.
			None
			One
			Two
			Three or more

PH	YSI	CAL CHARACTERISTICS - Continued
7.		at type of brakes does this vehicle have? k ONE box only.
		Hydraulic (standard)
		Hydraulic with power assist
		Air
		Other – please specify
8.		at type of cab does this vehicle have?  k ONE box only.
		Day cab → GO to question 9 below
		Sleeper cab → GO to question 10 below
9.	<b>Whi</b> <i>Mar</i>	ch of the following best describes the cab of this vehicle?  k ONE box only.
		Conventional cab
		Cab over engine
		Cab forward of engine
		Cab beside engine
10.	fror Incl	that was the height of this vehicle's cabin (measured in the ground to the top of the roof)?  Sude any equipment that extends above the roof of the in such as an antenna, a fairing, or a smoke stack.
11.	Wha	at type of transmission does this vehicle have? k ONE box only.
		Automatic
		Manual
		Both
		Other – please specify
12	Hov	v many gears did this vehicle have?
12.		nber of gears
	IVUII	Tibel of geals

PH'	YSIC	CAL CHARACTERISTICS - Continued
13.		<b>020, did this vehicle have any of the following standard features?</b> <i>k ALL that apply.</i>
		Air bags
		Anti-lock brake system
		Cruise control
		Driver-facing camera
		Global Positioning System (GPS) , without navigational aid
		Internet access
		Navigation system
		Rollover protection
		None of the above
14.		<b>020, did this vehicle have any of the following driving control assistance features?</b> <i>k ALL that apply.</i>
		Adaptive cruise control – Assists with acceleration and/or braking to maintain a prescribed distance between it and a vehicle in front. Some systems can come to a stop and continue.
		Active driving assistance – Assists with vehicle acceleration, braking and steering. Some systems are limited to specific driving conditions. Driver is responsible for primary task of driving.
		Lane keeping assistance – Assists with steering to maintain vehicle within driving lane.
		None of the above
15.		<b>020, did this vehicle have any of the following collision warning features?</b> <i>k ALL that apply.</i>
		Blind spot warning – Detects vehicles to rear in adjacent lanes while driving and alerts the driver to their presence.
		Forward Collision Warning – Detects impending collision while traveling forward and alerts driver. Some systems include pedestrian or other object detection.
		Lane Departure Warning – Monitors vehicle's position within driving lane and alerts driver as the vehicle approaches or crosses lane markers.
		Parking Obstruction Warning - Detects obstructions near vehicle during parking maneuvers.
		Rear Cross Traffic Warning – Detects vehicles approaching from the side and rear of vehicle while traveling in reverse and alerts driver.
		None of the above

PH	YSIC	CAL CHARACTERISTICS - Continued
16.		<b>020, did this vehicle have any of the following collision intervention features?</b> <i>ALL that apply.</i>
		Automatic Emergency Braking – Detects potential collision while traveling forward and automatically applies the brakes to avoid or lessen the severity of impact. Some systems include pedestrian or other object detection.
		Automatic Emergency Steering – Detects potential collision and automatically controls steering to avoid or lessen the severity of impact. Some systems include pedestrian or other object detection.
		Rear Automatic Emergency Braking – Detects potential collision while traveling in reverse and automatically applies the brakes to avoid or lessen the severity of impact. Some systems include pedestrian or other object detection.
		None of the above
17.		<b>020, did this vehicle have any of the following parking assistance features?</b> <i>x ALL that apply.</i>
		Active parking Assistance – Controls steering and potentially other functions during parking. Driver may be responsible for acceleration, braking and gear position. Some systems are capable of parallel and/or perpendicular parking.
		Remote Parking – Parks vehicle without driver being physically present inside the vehicle.  Automatically controls acceleration, braking, steering and shifting.
		None of the above
18.	In 20 Mark	<b>020, did this vehicle have any of the following other driver assistance systems features?</b> <i>ALL that apply.</i>
		Automated High Beams – Switches between high and low beam headlamps automatically based on lighting, surroundings and traffic.
		Backup Camera – Provides view of area behind vehicle when in reverse. Could include trailer assistance, a system that assists drivers during backing maneuvers with a trailer attached.
		Driver Monitoring – Monitors drivers to determine if they are actively engaged in the task of driving. Some systems monitor driver's eye movement and head position.
		Head-Up Display – Projects image of vehicle data and/or navigational info into the driver's forward line of sight.
		Night Vision – Aids driver vision at night by projecting enhanced images on instrument cluster or head-up display.
		Surround-View Camera – Uses cameras located around vehicle to present view of surroundings.
		None of the above

		CAL CHARACTERISTICS - Continued  020, did this vehicle have any of the following fuel economy features?
		ALL that apply.
		Aerodynamic bumper
		Aerodynamic hood
		Aerodynamic mirrors
		Automatic engine shutoff technology
		Automatic tire inflation system
		Fuel tank covers
		Gap reducers
		Idle-reducing technologies (portable auxiliary pack, electrification, etc.)
		Low rolling resistance tires
		None of the above
20.		<b>020, did this vehicle have any of the following other features?</b> <i>c ALL that apply.</i>
		Aerial work platform/bucket
		Air compressor (except for air brakes)
		Air springs
		Christmas tree (chip box)
		Crane
		Electronic vehicle identification
		Engine retarder/brakes
		Hoist
		Lift gate
		Mounting bar for snowplow
		Multi-hazmat
		Power take-off
		Toolbox
		Winch
		None of the above
21.	Wha	t was this vehicle's towing capacity in pounds?
	Tow	Pounds ring capacity depends on the exact model and/or any aftermarket difications. Information about towing capacity can be found in the icle manual, online, or calculated from the information inside the door.

G	TIN	/IE C	PERATED
	1.	Rou	<b>020, how many months was this vehicle used?</b> nd to the nearest whole month.  k ONE box only.
			12 months → GO to section H HOME BASE
			7-11 months
			2-6 months
			1 month or less
			Vehicle not used (no miles driven)
	2.	day	<b>020, what reasons (if any) was this vehicle NOT in use for periods of 90 consecutive s or more?</b> k ALL that apply.
			Not applicable
			Seasonal
			Not needed/idle (excluding seasonal)
			Under repair
			Other – please specify <sub>▼</sub>
			If you reported "Vehicle not used (no miles driven)" to question 1 above, go to section <b>Q</b> CONTACT INFORMATION
0	но	ME	BASE
	1.		at was the primary function of the home base from which this vehicle operated?
			<b>NOTE:</b> Home base refers to the location where the vehicle was usually parked when it was not on the road.
		Mar	k ONE box only.
			Private residence
			Corporate office/headquarters
			Terminal
			Distribution center
			Manufacturing plant
			Farm/agricultural production
			Mining or other energy production site
			Truck leasing company
			Other – please specify <sub>₹</sub>
			No home base → GO to section

0	но	ME BASE - Continued
	2.	Where was the home base of this vehicle on July 1, 2020? If this vehicle was put into service after July 1, 2020, enter current home base.
		City (or city equivalent): State ZIP Code:
		County/Parish/Borough (or equivalent):
	3.	In addition to this vehicle, how many other vehicles/trailers were operated from the home base location?
		Pickups, small vans (including minivans), and sport utility vehicles:
		Semi-trucks (tractor/trailer trucks):
		Any other trucks or vans:
		Trailers (including trailer mounted equipment):
		Converter dollies:
		A dolly is an unpowered vehicle designed for connection to a tractor unit, or truck
		☐ No other vehicles at this home base
0	MI	LES Miles
	1.	How many total miles was this vehicle driven in 2020?  Round to the nearest whole mile
	2.	How was the annual mileage calculated?  Mark ALL that apply.
		Odometer readings
		Gas or fuel receipts
		Trip meter
		□ GPS
		☐ Other – please specify ⊋
	3.	How many miles-per-gallon (mpg) did this vehicle average in 2020?  If compressed natural gas (CNG) is used, give miles per gasoline gallon equivalent (GGE).  1 GGE = 123 cubic feet CNG. Report to the nearest tenth

MI	LES - Continued				
4.	How was miles-per-gallon (mpg) calculated?  Mark ALL that apply.				
	Odometer readings				
	Gas or fuel receipts				
	☐ Trip meter				
	□ GPS				
	☐ Other – please specify				
5.	What was the approximate percent of this vehicle's 2020 mileage for each of the follow jurisdictions? Round to the nearest whole percent. Total should sum to 100%.	/ing	3		
	Operated within the home base state		I		%
	Operated in states other than the home base state (or has no home base)		l		%
	Operated in Canada		I	I	%
	Operated in Mexico				%
	TOTAL	1	0	0	%
6.	What was the approximate percent of this vehicle's 2020 mileage driven within the folloranges of operation?  If this vehicle does not operate from a home base, report its average range of operation. Round to the nearest whole percent. Total should sum to 100%.	ow	ing	9	%
	50 miles or less from it's home base				1 /
	51 to 100 miles from it's home base				%
	101 to 200 miles from it's home base		L		%
					1%
	201 to 500 miles from it's home base		L		
			I	L	%



8. How many miles has this vehicle been driven since it was manufactured?  If the odometer has turned over, please enter the figure for the total amount.  If the vehicle is no longer in your possession, enter the figure when you last operated the vehicle.  Round to the nearest whole mile.  Miles.  9. In 2020, what was the approximate percent of this vehicle's operating time spent idling (stationary)?	0	MII	ES - Continued	
Round to the nearest whole percent.  Percent of miles off road		7.		
8. How many miles has this vehicle been driven since it was manufactured?  If the vehicle is no longer in your possession, enter the figure for the total amount.  If the vehicle is no longer in your possession, enter the figure when you last operated the vehicle.  Round to the nearest whole mile.  Miles.  9. In 2020, what was the approximate percent of this vehicle's operating time spent idling (stationary)?.  10. In 2020, what was the approximate percent of this vehicle's operating time spent using an auxiliary power unit?.  9. FUEL AND MAINTENANCE  1. In 2020, what type of fuel or fuel combination was most often used in this vehicle?  If a fuel combination was used, select ALL that make up the combination. Otherwise, mark ONE box only.  Gasoline (including gasohol)  Diesel (including biodiesel)  Natural gas (compressed or liquid)  Propane (liquefied petroleum gas)  Alcohol fuels (ethanol or methanol)  Electricity  Other – please specify z  2. In 2020, at what type of location was this vehicle typically refueled?  Mark ONE box only.  Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public			Round to the nearest whole percent.	
If the odometer has turned over, please enter the figure for the total amount.  If the vehicle is no longer in your possession, enter the figure when you last operated the vehicle.  Miles.  9. In 2020, what was the approximate percent of this vehicle's operating time spent idling (stationary)?.  10. In 2020, what was the approximate percent of this vehicle's operating time spent using an auxiliary power unit?.  9. FUEL AND MAINTENANCE  1. In 2020, what type of fuel or fuel combination was most often used in this vehicle? If a fuel combination was used, select ALL that make up the combination. Otherwise, mark ONE box only.  Gasoline (including gasohol)  Diesel (including biodiesel)  Natural gas (compressed or liquid)  Propane (liquefied petroleum gas)  Alcohol fuels (ethanol or methanol)  Electricity  Other – please specify   Mark ONE box only.  Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public			Percent of miles off road	
## Sound to the nearest whole mile.    Miles.   Miles   Miles		8.		
9. In 2020, what was the approximate percent of this vehicle's operating time spent idling (stationary)?.  10. In 2020, what was the approximate percent of this vehicle's operating time spent using an auxiliary power unit?.  9. FUEL AND MAINTENANCE 1. In 2020, what type of fuel or fuel combination was most often used in this vehicle? If a fuel combination was used, select ALL that make up the combination. Otherwise, mark ONE box only.    Gasoline (including gasohol)   Diesel (including biodiesel)   Natural gas (compressed or liquid)   Propane (liquefied petroleum gas)   Alcohol fuels (ethanol or methanol)   Electricity   Other - please specify     Other - please specify     Gas station   Truck stop   Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)   Other company's/contractor's facility not open to the public				
10. In 2020, what was the approximate percent of this vehicle's operating time spent using an auxiliary power unit?			Miles	
PUEL AND MAINTENANCE  1. In 2020, what type of fuel or fuel combination was most often used in this vehicle? If a fuel combination was used, select ALL that make up the combination. Otherwise, mark ONE box only.  Gasoline (including gasohol)  Diesel (including biodiesel)  Natural gas (compressed or liquid)  Propane (liquefied petroleum gas)  Alcohol fuels (ethanol or methanol)  Electricity  Other − please specify ▼  Casoline (including biodiesel)  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public		9.	In 2020, what was the approximate percent of this vehicle's operating time spent idling (stationary)?	
1. In 2020, what type of fuel or fuel combination was most often used in this vehicle?  If a fuel combination was used, select ALL that make up the combination. Otherwise, mark ONE box only.  Gasoline (including gasohol)  Diesel (including biodiesel)  Natural gas (compressed or liquid)  Propane (liquefied petroleum gas)  Alcohol fuels (ethanol or methanol)  Electricity  Other − please specify   Mark ONE box only.  Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public		10.		
If a fuel combination was used, select ALL that make up the combination. Otherwise, mark ONE box only.  Gasoline (including gasohol)  Diesel (including biodiesel)  Natural gas (compressed or liquid)  Propane (liquefied petroleum gas)  Alcohol fuels (ethanol or methanol)  Electricity  Other – please specify   Other – please specify   Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public	0	FU	L AND MAINTENANCE	
<ul> <li>□ Diesel (including biodiesel)</li> <li>□ Natural gas (compressed or liquid)</li> <li>□ Propane (liquefied petroleum gas)</li> <li>□ Alcohol fuels (ethanol or methanol)</li> <li>□ Electricity</li> <li>□ Other - please specify  □</li> <li>□ Other - please specify  □</li> <li>□ Gas station</li> <li>□ Truck stop</li> <li>□ Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)</li> <li>□ Other company's/contractor's facility not open to the public</li> </ul>		1.		
<ul> <li>Natural gas (compressed or liquid)</li> <li>Propane (liquefied petroleum gas)</li> <li>Alcohol fuels (ethanol or methanol)</li> <li>Electricity</li> <li>Other − please specify √</li> </ul> 2. In 2020, at what type of location was this vehicle typically refueled? Mark ONE box only. <ul> <li>Gas station</li> <li>Truck stop</li> <li>Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)</li> <li>Other company's/contractor's facility not open to the public</li> </ul>			Gasoline (including gasohol)	
<ul> <li>□ Propane (liquefied petroleum gas)</li> <li>□ Alcohol fuels (ethanol or methanol)</li> <li>□ Electricity</li> <li>□ Other – please specify  □</li> <li>2. In 2020, at what type of location was this vehicle typically refueled?</li> <li>Mark ONE box only.</li> <li>□ Gas station</li> <li>□ Truck stop</li> <li>□ Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)</li> <li>□ Other company's/contractor's facility not open to the public</li> </ul>			☐ Diesel (including biodiesel)	
<ul> <li>□ Alcohol fuels (ethanol or methanol)</li> <li>□ Electricity</li> <li>□ Other – please specify  </li> <li>■ In 2020, at what type of location was this vehicle typically refueled? Mark ONE box only.</li> <li>□ Gas station</li> <li>□ Truck stop</li> <li>□ Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)</li> <li>□ Other company's/contractor's facility not open to the public</li> </ul>			☐ Natural gas (compressed or liquid)	
<ul> <li>□ Electricity</li> <li>□ Other – please specify  </li> <li>2. In 2020, at what type of location was this vehicle typically refueled? Mark ONE box only.</li> <li>□ Gas station</li> <li>□ Truck stop</li> <li>□ Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)</li> <li>□ Other company's/contractor's facility not open to the public</li> </ul>			Propane (liquefied petroleum gas)	
<ul> <li>Other − please specify  </li> <li>In 2020, at what type of location was this vehicle typically refueled?   Mark ONE box only.  Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public</li> </ul>			Alcohol fuels (ethanol or methanol)	
2. In 2020, at what type of location was this vehicle typically refueled?  Mark ONE box only.  Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public			Electricity	
Mark ONE box only.  Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public			Other – please specify 🖟	
Mark ONE box only.  Gas station  Truck stop  Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public				
<ul> <li>Truck stop</li> <li>Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)</li> <li>Other company's/contractor's facility not open to the public</li> </ul>		2.		
Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)  Other company's/contractor's facility not open to the public			Gas station	
Other company's/contractor's facility not open to the public			☐ Truck stop	
			Your own facility (including home, farm, ranch, on-site by mobile supplier, etc.)	
☐ Other – please specify			Other company's/contractor's facility not open to the public	
			☐ Other – please specify ⊋	

0	FUI	EL A	ND MAINTENANCE - Continued
;		repla	020, who performed any GENERAL maintenance (oil change, brake change, headlight acement, etc.) on this vehicle?
			General repair business or private mechanic (includes gas stations, truck stops, parts store, etc.)
			Dealership service department
			Leasing company
			Yourself, spouse, friend, etc. while not employed/paid by any maintenance type facility
			Company-owned maintenance facility
			None performed → GO to question 5 below
			Other – please specify
4	4.	<b>Wha</b> <i>Rour</i>	t was the total cost of all GENERAL maintenance in 2020?  and to the nearest whole dollar
į	5.	In 20	020, were any EXTENSIVE repairs over \$500 performed on this vehicle?
			Yes → GO to question 6 below
			No → GO to question 8 below
•			performed these EXTENSIVE repairs?  A ALL that apply.
			General repair business or private mechanic (includes gas stations, truck stops, parts store, etc.)
			Dealership service department
			Leasing company
			Yourself, spouse, friend, etc. while not employed/paid by any maintenance type facility
			Company-owned maintenance facility
			Other – please specify
;	7.	Wha	t was the total cost of all EXTENSIVE repairs in 2020?
	0		this vehicle's engine EVER been rebuilt or overhauled?
•			ONE box only.
			Yes → GO to question 9 below
			No → GO to section (K) VEHICLE CONFIGURATION
			Don't know → GO to section <b>(K)</b> VEHICLE CONFIGURATION
			hat year was this vehicle's engine LAST rebuilt or overhauled?  (4 digit)

K	VE	HICLE CONFIGURATION
	1.	In 2020, was this vehicle used to pull a trailer?  Trailer mounted equipment should be treated as a trailer.
		☐ Yes
		No → GO to question 18 on page 19
	2.	In 2020, did this vehicle pull a trailer for at least half of all miles driven?  Trailer mounted equipment should be treated as a trailer.
		Yes, this vehicle pulled a trailer for 50% or more of all miles driven
		No, this vehicle pulled a trailer for less than 50% of all miles driven → GO to question 18 on page 19
	3.	In 2020, which of the following did this vehicle pull most often?  Trailer mounted equipment should be treated as a trailer.  Mark ONE box only.
		Single trailer → GO to Question 4 below
		□ Double trailer → GO to Question 7 on page 16
		☐ Triple trailer → GO to Question 11 on page 17
	SIN	IGLE TRAILER
		How many axles were on this single trailer configuration?
		Mark ONE box only.
		One .
		Two
		Three or more  Feet
	5.	What was the length, in feet, of this trailer? Round to the nearest whole number.
	6.	What was the exterior width of this trailer?  Mark ONE box only.
		96 inches
		102 inches
		Other – please specify inches
	<b></b>	GO to question 16 on page 18

VE	HICLE CONFIGURATION - Continued
DC	DUBLE TRAILER
7.	How many axles were on this trailer configuration, including any converter dollies?  Do NOT include any axles on the power unit.  Mark ONE box only.
	☐ Three
	Four
	☐ Five
	☐ Six or more
8.	What was the length, in feet, of each trailer? Round to the nearest whole number.
	First trailer
	Second trailer
9.	What was the exterior width of the first trailer?  Mark ONE box only.
	96 inches
	102 inches
	Other - please specify inches
10.	. What was the exterior width of the second trailer?
	Mark ONE box only.
	96 inches
	□ 102 inches
	Other – please specify inches
	GO to question 16 on page 18

K	VEHICLE CONFIGURATION - Continued			
	TRI	PLE	TRAILER	
	11.	Do I	w many axles were on this trailer configuration, including any converter dollies? NOT include any axles on the power unit. k ONE box only.	
			Five	
			Six	
			Seven	
			Eight or more	
	12.	<b>Wha</b> Rou	At was the length, in feet, of each trailer?  Indeed, to the nearest whole number.	
		First	trailer	
		Seco	ond trailer	
		Thir	d trailer	
	13.		at was the exterior width of the first trailer? k ONE box only.	
			96 inches	
			102 inches	
			Other – please specify inches	
	14.		at was the exterior width of the second trailer?  k ONE box only.	
			96 inches	
			102 inches	
			Other – please specify inches	
	15.		at was the exterior width of the third trailer?  k ONE box only.	
			96 inches	
			102 inches	
			Other – please specify inches	

K '	VEHICLE CONFIGURATION - Continued			
	16. Which type of trailer resembles that most often attached to this vehicle?  Mark ONE box only.			
		Automobile carrier (stinger-steered)		
		Automobile carrier (conventional – rack above cab)		
		Automobile carrier (high mount – no rack above cab, excluding curtain, van, or flatbed)		
		Beverage or bay		
		Curtainside		
		Dump (including side, belly, or bottom dump)		
		Flatbed, platform, chassis, etc.		
		Livestock (including livestock drop frame)		
		Low boy (platform with depressed center)		
		Mobile home toter		
		Open top (including vans, low-side grain, fruit, etc.)		
		Pole, logging, pulpwood, or pipe		
		Tank, dry bulk		
		Tank, liquids or gases		
		Trailer mounted equipment		
		Van, basic enclosed (dry cargo)		
		Van, drop frame (excluding livestock)		
		Van, insulated non-refrigerated		
		Van, insulated refrigerated		
		Other – please specify		

K	VE	HICL	E CONFIGURATION - Continued
			s the trailer have any of the following add-on equipment?
			Aluminum wheels
			Front fairing
			Lightweight landing gear
			Rear fairing
			Side skirts
			Undercarriage aerodynamic devices
			None of the above
			Other – please specify 🔀
		wha	erring to the most common configuration indicated in question 1 (no trailer or trailer pulled), twas the total length of this vehicle or vehicle/trailer combination?
		Repo Mark	ort distance, in feet, from front bumper to rear of vehicle or trailer(s). A ONE box only.
			Less than 16.0 feet
			16.0 to 19.9 feet
			20.0 to 27.9 feet
			28.0 to 35.9 feet
			36.0 to 40.9 feet
			41.0 to 44.9 feet
			45.0 to 49.9 feet
			50.0 to 54.9 feet
			55.0 to 59.9 feet
			60.0 to 64.9 feet
			65.0 to 69.9 feet
			70.0 to 74.9 feet
			75.0 to 79.9 feet
			80.0 feet or more

0	WEIGHT				
	1.	Referring to the most common configuration Question K-1 (no trailer, single trailer, double trailers, or triple trailers pulled), what was the empty weight of this vehicle or vehicle/trailer combination?  Round to the nearest whole pound.			
	2.	What was the average payload, in pounds, transported by this vehicle or vehicle/trailer combination during 2020?  Do not include passenger weight. Round to the nearest whole pound			
	3.	In 2020, how many annual overweight permits did you purchase for this vehicle? Trips			
	4.	In 2020, how many trips were taken with this vehicle that required the purchase of single trip overweight permits?			
M	KII	ND OF BUSINESS			
	1.	In 2020, was this vehicle used, at least partially, for any commercial or business-related activities?			
		Yes, this vehicle was used at least part time for commercial activities → GO to question 2 on page 21			
		No, this vehicle was strictly used for personal transportation → GO to section O CONTACT INFORMATION			

M	KIND OF BUSINESS - Continued			
W				
	2.	ofte	ch of the following best described the business activity in which this vehicle was most in used in 2020?	
			chicle was leased, indicate business of lessee. k ONE box only.	
			Accommodation or food services (for immediate consumption)	
			Agriculture, forestry, fishing, or hunting	
			Arts, entertainment, or recreation services	
			Construction (includes land subdivision and development, as well as construction activity by special trade contractors)	
			For-hire transportation (of goods or people)	
			Fuel wholesale or distribution	
			HVAC, plumbing, electrician	
			Information services (includes telephone and television)	
			Manufacturing	
			Mining (includes quarrying, well operations, and beneficiating)	
			Retail trade	
			Utilities (includes electric power, natural gas, steam supply, water supply, and sewage removal)	
			Vehicle leasing or rental (includes short-term rentals)	
			Warehousing	
			Waste management, landscaping, or administrative/support services	
			Wholesale trade	
			Other services, including advertising, real estate, nonvehicle leasing or rental, educational, health care, social assistance, finance, insurance, professional, scientific, or technical services	
			Other – please specify	
	3.		020, was this vehicle used for any of the following commercial activities?  k ALL that apply.	
			Transporting goods belonging to you or your company	
			Transporting goods belonging to another person or company	
			Transporting tools related to your business	
			Transporting paying passengers	
			Used as a daily or short term rental	
			Other – please specify <sub>₹</sub>	



<b>(</b>	KI	ND OF BUSINESS - Continued	
	4.	What was the approximate percent of this vehicle's 2020 mileage for each of the following activities?	
		Follow the instruction for the category with the highest reported percentage. If your highest percent occurs for more than one category, choose the category that you most identify with.	
		Transporting goods belonging to you or your company → GO to section O PRODUCTS, EQUIPMENT, OR MATERIAL	%
		Transporting goods belonging to another person or company → GO to section N FOR HIRE	%
		Transporting tools related to your business → GO to section <b>②</b> CONTACT INFORMATION	%
		Transporting paying passengers → GO to section <b>②</b> CONTACT INFORMATION	%
		Used as a daily or short term rental → GO to section <b>©</b> CONTACT INFORMATION	%
		Personal transportation (non-commercial use) → GO to section O CONTACT INFORMATION	%
		Other – please specify   → GO to section   CONTACT INFORMATION	%
0	FO	R-HIRE	
	1.	What was the approximate percent of this vehicle or vehicle/trailer combination's 2020 for each of the following kinds of service?  Round to the nearest whole percent.	mileage
		Single shipment carried at one time (Truckload):	%
		Multiple shipments carried at one time (Less-than-truckload):	%
	2.	In 2020, how many loads and/or runs did this vehicle or vehicle/trailer combination average in a week? Round to the nearest number, including zero.	
		Loads and/or runs per week	
0	PR	ODUCTS, EQUIPMENT, OR MATERIALS	
	1.	What was the approximate percent of this vehicle's 2020 mileage for each of the following categories?  Round to the nearest whole percent. Total should sum to 100%	
		Empty - NOT CARRYING any products, tools, equipment, or materials If you report 100% empty → GO to section ○ CONTACT INFORMATION	%
		Loaded - CARRYING products, tools, equipment, or materials	<b>1000%</b>
		TOTAL	100%

0	PR	ODUCTS, EQUIPMENT, OR MATERIALS - Continued	
	2.	What was the approximate percent of this vehicle's 2020 mileage that this vehicle was filled to physical capacity (cubed out)?  Round to the nearest whole percent.	
		Vehicle was filled to physical capacity (cubed out):	%
	3.	What was the approximate percent of this vehicle's 2020 mileage that this vehicle was filled to weight limit (weighed out)?  Round to the nearest whole percent.	
		Vehicle was filled to weight limit (weighed out):	%
	4.	What was the approximate percentage of this vehicle's 2020 mileage driven to reposition the empty vehicle to a new location for the next load?	%
	5.	What was the approximate percentage of the vehicle's 2020 mileage driven empty or deadhead directly back to home base?	8
	6.	In 2020, did you EVER take less efficient routes due to:	
		Low height on a bridge or a tunnel	
		☐ Weight restriction on a bridge	
		None of the above	
	7.	In 2020, for the miles driven while carrying a load, what percent of those "LOADED where driven while carry the following products, tools, equipment, or materials?  Round to the nearest whole percent. Percentages can add to more than 100% if more than on product was carried at the same time.	
		Products	Percent of loaded miles
Agr	icul	Products tural and animal products	
Agr			
Agr	Ani	tural and animal products	loaded miles
Agr	Ani Ani	tural and animal products  mals and fish, live	loaded miles
	Ani Ani Gra	mals and fish, live	loaded miles  %
	Ani Ani Gra	mals and fish, live	loaded miles  %  %
	Ani Ani Gra	mals and fish, live	loaded miles  %  %
	Ani Ani Gra All Bas	mals and fish, live	loaded miles  %  %  %
	Ani Ani Gra All mic Bass	tural and animal products  mals and fish, live	loaded miles  %  %  %  %  %
	Ani Ani Gra All mic Bass Ferri	tural and animal products  mals and fish, live	loaded miles  %  %  %  %  %  %  %  %  %  %  %  %  %

PRODUCTS, EQUIPMENT, OR MATERIALS - Continued				
Products	Percent of loaded miles			
Food products, alcohol, and tobacco				
Alcoholic beverages	%			
Bakery and milled grain products (baked snack goods, pasta, cereal, etc.)	%			
Meat, seafood, and their preparations	%			
Tobacco products (cigarettes, cigars, chewing tobacco, etc.)	%			
All other prepared foodstuffs (dairy products, fats, food oils, sauces, spices, etc.)	%			
Forestry, wood, and paper products				
Logs and other wood in the rough (logs for lumber, pulping, fuel, etc.)	%			
Paper or paperboard articles (toilet paper, paper towels, wallpaper, envelopes, etc.)	%			
Printed products (books, brochures, newspapers, etc.)	%			
Pulp, newsprint, paper, and paperboard (newsprint in large rolls, napkin stock, etc.)	%			
Wood products (wood chips, plywood, doors, windows, etc.)	%			
Manufactured metal and mineral products				
Articles of base metal (pipes, nails, screws, tubes, fittings, locks, etc.)	%			
Base metal in primary or semifinished forms (bars and rods of steel or iron, etc.)	%			
Nonmetallic mineral products (cement, bricks, glass, concrete products, mirrors, etc.)	%			
Other manufactured products or equipment				
Tools, non-powered	%			
Tools, powered	%			
Electronic and other electrical equipment (telephones, computer equipment, etc.)	%			
Furniture, mattresses, lamps, etc	%			
QUESTION CONTINUES ON PAGE 25				

O PRODUCTS, EQUIPMENT, OR MATERIALS - Continued	
Products	Percent of loaded miles
Other manufactured products or equipment – continued	
Machinery (motors, turbines, air conditioning equipment, fans, dishwashers, etc.)	%
Miscellaneous manufactured products (toys, sports equipment, jewelry, clocks, etc.)	%
Precision instruments and apparatus (cameras, eyewear, measuring instruments, etc.)	%
Textile, leather, and related articles (footwear, yarns, threads, comforters, etc.)	%
Vehicles, including parts (cars, motorcycles, trailers, etc.)	%
All other transportation equipment (aircraft, boats, locomotives, etc.)	%
Mining materials (raw form)	I
Coal (non-agglomerated and agglomerated)	%
Crude petroleum	<b>8</b>
Gravel or crushed stone	<b>8</b>
Metallic ores and concentrates	%
Monumental or building stone (marble, limestone, granite, sandstone, etc.)	%
Natural sands	%
All other nonmetallic minerals (salt, table salt, clays, asbestos, dolomite, etc.)	%
Petroleum products (refined)	I
Fuel oils (diesel, Bunker C, etc.)	%
Gasoline and aviation turbine fuel	<b>8</b>
Plastics and rubber (tires, blinds, articles made of plastics or rubber, mud flaps, etc.)	%
Natural gas	%
All other coal and refined petroleum products (greases, propane, etc.)	%
QUESTION CONTINUES ON PAGE 26	

	D
Products	Percent of loaded mile
ste, refuse, and recycling	
Hazardous waste (EPA manifest)	%
All other waste and scrap (including trash, yard waste, biosludge, non-EPA manifested hazardous materials, etc.)	%
Recyclable products	%
cellaneous	
Mail and courier parcels	%
Empty shipping containers	%
Passengers	%
Mixed freight (for-hire carriers that haul multiple commodities on the same load)	%
Products, equipment, or materials not elsewhere classified – <i>please specify</i>	
	%
Mixed freight (for-hire carriers that haul multiple commodities on the same load)	

P	HA	ZAF	RDOUS MATERIALS
	1.	larg	nny time during 2020, was this vehicle used to transport hazardous materials in quantities e enough to have a hazmat placard on the vehicle as required by 49 CFR Part 172 Subpart F? & ONE box only.
			Yes → GO to question 2 below
			No → GO to section ② CONTACT INFORMATION
	2.	tran plac	at was the approximate percentage of this vehicle's 2020 mileage used to asport hazardous materials in quantities large enough to have a hazmat card on the vehicle as required by 49 CFR Part 172 Subpart F?

3. What was the approximate percentage of this vehicle's 2020 mileage for which this vehicle carried each of the following types of hazardous material(s)?

Only report percentages for those hazardous materials carried in quantities large enough to have a hazmat placard on the vehicle.

Percentages can add to more than 100% if more than one hazardous material was carried at the same time. Round to the nearest whole percent.

Class or Division	Placard Name	Percent	Class or Division	Placard Name	Percent
Division 1.1	Explosives 1.1	%	Oxygen 2	Oxygen	%
Division 1.2	Explosives 1.2	%	Division 4.1	Flammable solid	%
Division 1.3	Explosives 1.3	%	Division 4.2	Spontaneously combustible	%
Division 1.4	Explosives 1.4	%	Division 4.3	Dangerous when wet	%
Division 1.5	Explosives 1.5	%	Division 5.1	Oxidizer	%
Division 1.6	Explosives 1.6	%	Division 5.2	Organic peroxide	%
Division 2.1	Flammable gas	%	Division 6.1	Poison inhalation hazard	%
Division 2.2	Nonflammable gas	%	Division 6.1	Poison	%
Division 2.3	Poison gas	%	Class 7	Radioactive	%
Class 3	Flammable	%	Class 8	Corrosive	%
Combustible liquid	Combustible	%	Class 9	Class 9	%

CONTACT INFORMATION  ast Name	First Name		М
Street Address			
City (or city equivalent):		State	ZIP Code:
on the equivalent.			
Area Code Phone number Extens	sion		
Email			
Signature			Month Day Year
Please use the space below for any commen	ts or explanation pert	aining to your	responses.

# **THANK YOU** for completing your 2020 Vehicle Inventory and Use Survey.

Please photocopy this form for your records and return the original to the Census Bureau in the envelope provided.

#### **NOTICE**

Respondents are not required to respond to any information collection unless it displays a valid approval number form the Office of Management and Budget (OMB). The OMB 8-digit number appears in the upper right corner of this questionnaire. Public reporting burden for this collection of information is estimated to average between 20 and 50 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Associate Director for Administration, Attn: Paperwork Reduction Project xxxx-xxxx, Room 3104, Federal Building 3, Census Bureau, Washington, DC 20233-0001.

