## SHIPPER SURVEY

(Personal Interview)

OMB 0710-0001

Expires: 30 September 2012

The public report burden for this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this data collection, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, and the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503, Attn.: Desk Officer for U.S. Army Corps of Engineers. Respondents should be aware that notwithstanding any other provision of law, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Please DO NOT RETURN your completed form to either of these offices.

## SHIPPER SURVEY

Name of Firm:	
Nature of Business:	
Name of Parent Firm:	
Mailing Address:	
State: Zip:	
Name of Interviewee:	
Job Title of Interviewee:	
Mailing Address:	
State: Zip:	
Phone Number: ()	
FAX Number: ()	
E-Mail Address:	
1. Please list the names and addresses of all terminals and docks owned by this company, their waterway location, and this port-dock codes.	
a. <u>Dock/Terminal Name:</u>	
Address:	
State: Zip:	
Phone Number:	
Waterway:	
River Mile Location:	
Port/Dock Code:	

## b. <u>Dock/Terminal Name:</u>

Address:	
State:	_ Zip:
Phone Number:	
Waterway:	
River Mile Location:	
Port/Dock Code:	

2. Are the commodities you ship regulated, unregulated or both regulated and unregulated? (CIRCLE)

- 1. REGULATED ONLY
- 2. UNREGULATED ONLY
- 3. BOTH REGULATED AND UNREGULATED

3. Please give the following information for the primary commodities shipped during the last full calendar year (Year):

Commodities Shipped:	Tons/ <u>% Tons by Season</u>	Modes of Terminals
(Description) Code	Year Spring Summer Fall Winter	er <u>Transport</u> Used
1		
2		
Etc.		

4. Please give the following information for the primary commodities received during the last full calendar year (Year):

Commodities Ship	pped: Tons/ <u>% Tons by Season</u>	Modes of Terminals
(Description) Co	ode Year Spring Summer Fall Wint	<u>ter Transport Used</u>
1		
2		Etc.

5. Please list both the primary commodities (as measured by tons, dollar value) that you <u>shipped</u> during the last full calendar year and the primary commodities <u>received</u> in that year:

Primary Commodities SHIPPED	Primary Commodities RECEIVED
1	1
2	2
3	3
4	4
5	5

6. Please list both the primary commodities (as measured by tons, dollar value) that you <u>ship</u> during a typical year, and the primary commodities that you <u>receive</u> in such a year:

Primary Commodities SHIPPED	Primary Commodities RECEIVED
1	1
2	2
3	3
4	4
5	5

7. In the left column, please list the major commodities that your firm ships by water. Then for each commodity, please list the origin, destination, typical annual tonnage, and rate per ton.

COMMODITY	MOST FREQUENT ORIGIN	MOST FREQUENT DESTINATION	ANNUAL TONNAGE	RATE/TON
1.				
2.				
3.				
4.				
5.				
6.				
7.				