Green Goods and Services Survey



O.M.B. No. 1220—xxxx Expires Month Day Year

Please return this form **within 14 days**. If you need help completing this form, contact information is listed on the last page. Thank you!

Please report for location(s) in

Using Unemployment Insurance account number



1

What is the address where your business is physically located?

Report data for the location below. If this address is no longer correct, please provide us with an updated address in the space provided.

Enter Physical Location Address Corrections

Here

XYZ ADVISORS
4TH FLOOR
1310 SILVER STREET
SOMECITY WD 12345-6789

2

Have we identified your main business activity correctly?

We have listed below a description of your main business activity at this location. If this description is incorrect, please call XXX-XXX-XXXX or email GGS@bls.gov.

| NAICS code: 541330 Engineering services | | |
|---|--|--|
| We have identified your main business activity as the following: | Does NOT include: | |
| Establishments primarily engaged in: Applying physical laws and principles of engineering in the design, development, and utilization of machines, materials, instruments, structures, processes, and systems The services may include: Providing advice Preparation of feasibility studies Preparation of preliminary and final designs Provision of technical services during the construction or installation phase Inspection and evaluation of engineering projects | Planning and designing computer systems that integrate computer hardware, software, and communication technologies Performing surveying and mapping services of the surface of the earth, including the sea floor Gathering, interpreting, and mapping geophysical data Creating and developing designs and specifications that optimize the use, value, and appearance of products Providing advice and assistance to others on environmental issues, such as the control of environmental contamination from pollutants, toxic substances, and hazardous materials Both the design and construction of buildings, highways, and other structures or in managing construction projects | |

What is your business's fiscal year?

Please provide us with your fiscal year that includes the month of June 2010.

| Start of Fiscal Year | | |
|-------------------------|----|------|
| MM | DD | YYYY |

| End | End of Fiscal Year | | |
|-----|-----------------------|-----|--|
| MM | DD | YYY | |

| | Y |
|--|---|
| | |
| | |

| 4 | |
|---|--|
| 4 | |

What is your percent revenue from specific business activities?

In Column 1, please estimate the percent of total revenue for your location listed in Item 1 that comes from the categories of green activity shown in the table below. Please base your estimate on total revenue for your fiscal year from Item 3. The sum of Column 1 should be 100%.

Note: This section may best be completed by someone at your firm with access to financial data.

Percent of revenue for fiscal year listed in Item 3

| Percent of revenue for fiscal year listed in Item 3 | | |
|---|--|--|
| 1 Percent | 2 | |
| of total revenue | Green activity | |
| | Renewable energy: research on and development, production, storage, and distribution of energy from renewable sources | |
| | Energy efficiency: research on and development and implementation of energy conservation technologies and practices | |
| | Greenhouse gas reduction: research on and development and implementation of technologies and practices to reduce greenhouse gas emissions through approaches other than renewable energy generation and conservation | |
| | Pollution reduction and clean-up: research on and development and implementation of technologies and practices to reduce the emission of pollutants and remove pollutants and hazardous waste from the environment | |
| | Recycling and waste reduction: research on and development and implementation of technologies and practices to collect and recycle materials and waste water | |
| | Other | |
| | Other | |

| 5 | _ | What is your contact information? For the persform. | son or persons who helped complete this |
|---|----|---|---|
| | 1. | 1. Contact 1's name: | |
| | | Title: | |
| | | Phone number: () | email: |
| | | Business website: | |
| | 2. | 2. Contact 2's name: | |
| | | Title: | |
| | | Phone number: () | email: |

Do you have any questions about completing this form?

Please send an email to GGS@bls.gov, or call (202)-691-XXXX.

Confidentiality Statement. The Bureau of Labor Statistics, its employees, agents, and partner statistical agencies, will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act of 2002 (Title 5 of Public Law 107-347) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent. This report is authorized

by law 29 U.S.C.2. **Paperwork Reduction Act Statement.** Your voluntary cooperation is needed to make the results of this survey comprehensive, accurate, and timely. We estimate that completing this form will take an average of 20 minutes. This estimate takes into account time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information. If you have any comments regarding this survey, including suggestions for reducing the burden, send them to the Bureau of Labor Statistics, Office of Industry Employment Statistics, Paperwork Reduction Project, 2 Massachusetts Avenue, N.E., Room 4840, Washington, DC 20212. The OMB control number for this voluntary survey is 1220-NEW and expires on month day, year. Without a currently valid number BLS would not be able to conduct this survey.