* If you need help completing this form, please send an email to xxxxxxxxx@xxx.xxx, or call (xxx)-xxx-xxxx.
* Please complete and return this form **within 15 days** in the envelope provided.

**Has the address of your establishment’s physical location changed?**  **Please provide information only for the location below.** If the address shown below is no longer correct, please provide corrections in the space provided.

**1**

**ATTN:**

**XYZ ADVISORS**

**Enter address corrections**

**here**

**4TH FLOOR**

**1310 SILVER STREET**

**SOMECITY WD 12345-6789**

**What was the total employment of this establishment as of [*month*] 12, 2010?**

**2**

|  |  |
| --- | --- |
| **Include:** | **Do Not Include:** |
| * Full- or part-time paid workers | * Owners, proprietors, and partners of unincorporated firms |
| * Workers on paid leave   **Enter total employment here** | * Unpaid family workers |
| * Workers assigned temporarily to other units | * Workers on unpaid leave |
| * Incorporated firms - paid owners, officers, and staff | * Workers not covered by unemployment insurance * Contractors and temporary agency employees not on your payroll |

**What are your main products or services?** Our records show that your main products or services are related to those listed below. If they are not, please list your main products or services in the space provided and continue with the rest of the survey.

**3**

**Renting consumer electronics equipment and appliances,**

**Enter corrections here**

**such as televisions, stereos, and refrigerators. Included in this**

**industry are appliance rental centers.**

**Confidentiality Statement.** The Bureau of Labor Statistics, its employees and agents, 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 Occupational Employment Statistics, Paperwork Reduction Project, 2 Massachusetts Avenue, N.E., Room 2135, 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.

**What are your establishment’s green technologies and practices?**

**4**

**Column A:**

Please indicate in Column A whether this establishment has actively used the type of green technology or practice listed during the pay period including {month} 12, 2010.

**Column B:**

For any green technologies or practices used during that same pay period at this establishment, please indicate whether there were any employees at this establishment who spent any of their time involved in:

* researching, developing, maintaining, using or installing technologies or practices to lessen the environmental impact of their establishment, or
* training the establishment’sworkers in these technologies or practices.

Please include employees on the establishment’s payroll. **Do not include contract employees or consultants when completing Column B**. The types of employees to include are listed in Question 2 on Page 1.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | | **Column A** | **Column B** |
| Item | Type of green activity | | Does your establishment …? | Are there any employees on your payroll who …? |
|  | **Energy from Renewable Sources and Energy Efficiency** | |  |  |
| 1 | Generate electricity, heat, or fuel from renewable sources primarily for use within your establishment?  Energy sources include: | | ⁮ Yes ⁮ No | ⁮ Yes ⁮ No |
| * Wind * Biomass * Geothermal * Solar | * Ocean * Hydropower * Landfill gas * Municipal solid waste |
| 2 | Use technologies or practices to improve energy efficiency within your establishment?  Practices include but are not limited to the purchase and use of:   * Energy Star rated appliances * Compact fluorescent lights * Motion detection lighting * Programmable thermostats * Cogeneration (combined heat and power) | | ⁮ Yes ⁮ No | ⁮ Yes ⁮ No |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | | | **Column A** | **Column B** |
| Item | Type of green activity | | | Does your establishment …? | Are there any employees on your payroll who …? |
|  | **Greenhouse Gas Reduction and Pollution Reduction & Removal** | | |  |  |
| 3 | Use technologies or practices in your operations to reduce greenhouse gas emissions through methods other than those listed in Items 1 and 2 above (renewable energy generation and energy efficiency)?  Practices include but are not limited to:   * Purchase and use of carbon offsets * Promotion and/or subsidy of green forms of transportation for employees * Implementation of a telework program for employees | | | ⁮ Yes ⁮ No | ⁮ Yes ⁮ No |
| 4 | Use practices to either reduce the creation or release of pollutants or toxic compounds as a result of operations, or to remove pollutants or hazardous waste from the environment?  Pollutants include but are not limited to: | | | ⁮ Yes ⁮ No | ⁮ Yes ⁮ No |
| * Carbon monoxide * Sulfur dioxide * Chlorofluorocarbons (CFCs) * Nitrogen oxides * Chlorinated hydrocarbons | | * Heavy metals * Herbicides * Pesticides * Radioactive contamination |
|  | **Recycling & Reuse, and Natural Resources Conservation** | | |  |  |
| 5 | Use technologies or practices to reduce or eliminate the creation of waste materials as a result of your operations?  Practices include but are not limited to: | | | ⁮ Yes ⁮ No | ⁮ Yes ⁮ No |
| * Collecting waste * Reusing * Managing wastewater | * Recycling * Composting solid waste * Remanufacturing | |
|  |  | | | **Column A** | **Column B** |
| Item | Type of green activity | | | Does your establishment …? | Are there any employees on your payroll who …? |
| 6 | Use technologies or practices in your operations to conserve natural resources? Please do not include using recycled inputs in your production processes.  Practices include, but are not limited to:   * Managing land resources * Managing storm water * Conserving soil, water, or wildlife * Implementing organic agriculture or sustainable forestry | | | ⁮ Yes ⁮ No | ⁮ Yes ⁮ No |
|  | **Other technologies or practices not included previously. Please explain.** | | |  |  |
| 7 |  | | | * Yes | ⁮ Yes ⁮ No |
| 8 |  | | | * Yes | ⁮ Yes ⁮ No |

If you answered **‘no’** for all items in Column B, please enter a zero in Question 5.

**How many employees spent more than half of their time engaged in green activities at your establishment?**

**5**

* Please provide the total number of employees that spent more than half of their time in green activities in the pay period including {month} 12, 2010.

Enter number of green employees

* **Please count employees only once**, even if they are included in Column B more than once.
* Please do not include contractors or consultants working at your establishment that are not on your establishment’s payroll.
* **If no employees spent more than half of their time on green activities enter zero.**

**What are the occupations and wages of employees engaged in green activities at your establishment?**

**6**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| * Complete for employees who spent more than half of their time in green activities in Question 5. * Please provide a job title, brief description of duties, and the number of workers by wage category in the space provided. * Report part-time employees at their hourly rate. | | | | | | | | | | | | | | | | | | | A | | | | | | | | | B | | | | | | | | C | | | | | | | | | D | | | | | | | | | | | | | E | | | | | | | | | | | | | F | | | | | | | G | | | | | H | | | | | | | I | | | | | | | | J | | | | | | | | | K | | | | | | | L | | | | | | | Total | | | | | | | | | |
| *Job Title* | | | | | | | | | | | | | | | | | | | under 9.25 | | | | | | | | | $9.25  - 11.49 | | | | | | | | $11.50 - 14.49 | | | | | | | | | $14.50 - 18.24 | | | | | | | | | | | | | $18.25 - 22.74 | | | | | | | | | | | | | $22.75 - 28.74 | | | | | | | $28.75 - 35.99 | | | | | $36.00 - 45.24 | | | | | | | $45.25  - 56.99 | | | | | | | | $57.00  - 71.49 | | | | | | | | | $71.50  - 89.99 | | | | | | | $90.00 and over | | | | | | |  | | | | | | | | | |
| Hourly  Brief description of job duties | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | |  | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | |
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| ***Sustainability Officer*** | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | |  | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | |
| *Implements and monitors corporate sustainability program.* | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | |  | | | | | 1 | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | | | 1 | | | | | | |
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| *Job Title* | | | | | | | | | | | | | | | | | | under 9.25 | | | | | | | $9.25  - 11.49 | | | | | | | | | $11.50 - 14.49 | | | | | | | | | $14.50 - 18.24 | | | | | | | | | | | | $18.25 - 22.74 | | | | | | | | | | | | $22.75 - 28.74 | | | | | | | | $28.75 - 35.99 | | | | | | $36.00 - 45.24 | | | | | | | $45.25  - 56.99 | | | | | | | $57.00  - 71.49 | | | | | | | | | | | $71.50  - 89.99 | | | | | | | $90.00 and over | | | | | |  | | | | | | | |
| Hourly  Brief description of job duties | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | |  | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | | |  | | | | | | |  | | | | | |  | | | | | | | |
| Salary | | | | | | | | | | | | | | | | | | under $19,240 | | | | | | | $19,240 - 23,919 | | | | | | | | | $23,920 - 30,159 | | | | | | | | | $30,160 - 37,959 | | | | | | | | | | | | $37,960 - 47,319 | | | | | | | | | | | | $47,320 - 59,799 | | | | | | | | $59,800 - 74,879 | | | | | | $74,880 - 94,119 | | | | | | | $94,120 - 118,559 | | | | | | | $118,560 –  148,719 | | | | | | | | | | | $148,720 –  187,199 | | | | | | | $187,200 and over | | | | | |  | | | | | | | |
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**What is your contact information?** For the person or persons who completed this form.

**7**

**Check if contact information is the same**

**For Occupation and Wage Information: For Green Activity Information:**

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for completing this survey.**

**Please return this form in the enclosed envelope to:**

**Strategic Research Group**

**995 Goodale Blvd.**

**Columbus, OH 43212**

