

# Green Technologies and Practices



OMB No. 1220-0184  
Expires xx-xx-xxxx  
BLS-0184 FAX

## Fax Response Form Send to (866) 406-2449

If you have questions please call us at 1-866-406-0165.

### Section 1: Establishment information

**105 -** Account Number (from the front of your survey form)

Company Name and Report For (from the front of your survey form)

Today's Date

Contact Name and Title (please print)

Telephone Number (ext)

Fax Number

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( ) -

A. Enter the total number of employees at this location as of September 12, 2012. →

B. Describe your main products and services.

### Section 2: Green technologies and practices

C. Which of the following green technologies and practices does your business use?

- **Column A:** Check **yes**, if this technology or practice was used during the pay period including September 12, 2012.
- **Column B:** Check **yes**, if you had employees on your payroll spend any time involved in this technology or practice or training other employees at the establishment (exclude contract employees and consultants).

Item	Type of Green Activity	Column A	Column B
		Did your business...?	Did any of your employees spend time on this?
<b>Energy from renewable sources and energy efficiency</b>			
1	Generate electricity, heat, or fuel from renewable sources primarily <u>for use within your establishment?</u> Energy sources include: <ul style="list-style-type: none"> <li>• Wind</li> <li>• Biomass</li> <li>• Geothermal</li> <li>• Solar</li> <li>• Ocean</li> <li>• Hydropower</li> <li>• Landfill gas</li> <li>• Municipal solid waste</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Does Not Apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Use technologies or practices to improve energy efficiency <u>within your establishment?</u> Practices include but are not limited to the purchase and use of: <ul style="list-style-type: none"> <li>• Energy Star rated appliances</li> <li>• A LEED certified building</li> <li>• Energy efficient lighting</li> <li>• Programmable thermostats</li> <li>• Cogeneration (combined heat and power)</li> <li>• Energy efficient manufacturing equipment</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Does Not Apply	<input type="checkbox"/> Yes <input type="checkbox"/> No

		Column A	Column B
Item	Type of Green Activity	Did your business...?	Did any of your employees spend time on this?
<b>Greenhouse gas and pollution reduction &amp; removal</b>			
3	<p>Use technologies or practices <u>in your operations</u> to reduce greenhouse gas emissions through methods other than those listed in Items 1 and 2.</p> <p>Practices include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Purchase and use of carbon offsets</li> <li>• Promotion and/or subsidy of green forms of transportation for employees such as carpools, fuel efficient vehicles, cycling, or mass transit</li> <li>• Implementation of a telework program for employees</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Does Not Apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	<p>Use practices to either reduce the creation or release of pollutants or toxic compounds <u>as a result of operations</u>, or to remove pollutants or hazardous waste from the environment?</p> <p>Pollutants include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Carbon monoxide</li> <li>• Sulfur dioxide</li> <li>• Chlorofluorocarbons(CFCs)</li> <li>• Nitrogen oxides</li> <li>• Chlorinated hydrocarbons</li> <li>• Heavy metals</li> <li>• Herbicides</li> <li>• Pesticides</li> <li>• Radioactive contamination</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Does Not Apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Recycling, reuse, and natural resource conservation</b>			
5	<p>Use technologies or practices to reduce or eliminate the creation of waste materials <u>as a result of your operations</u>?</p> <p>Practices include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Collecting and reusing or recycling waste</li> <li>• Managing wastewater</li> <li>• Composting solid waste</li> <li>• Remanufacturing</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Does Not Apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	<p>Use technologies or practices <u>in your operations</u> to conserve natural resources? Please do not include using recycled inputs in your production processes.</p> <p>Practices include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Managing land resources</li> <li>• Managing storm water</li> <li>• Conserving soil, water, or wildlife</li> <li>• Implementing organic agriculture or sustainable forestry practices</li> <li>• Implementing a paperless office or reducing paper usage and consumption</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Does Not Apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Other technologies or practices. Please explain below.</b>			
7		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No

D. How many employees spent more than **half of their time** actively using the green technologies or practices at your establishment for which you checked yes in Column B?

- If the number of employees entered is greater than zero please complete Section 3 (next page).
- Otherwise, please fax this form to **(866) 406-2449. Thank you.**

**Section 3: Occupations and wages of green employees**

**E. What are the occupations and wages of the employees who spent more than half of their time actively using green technologies or practices?**

- Complete only for employees reported in question D.
- Provide the specific job title used by your company, a brief description of duties, and the annual salary or hourly wage in the space provided.
- Report part-time employees at their hourly rate.
- If you need more space, please copy this page and fax with the completed report.

		NUMBER OF EMPLOYEES IN SELECTED WAGE RANGES (Report Part-time Workers According to an Hourly Rate)												Total
		A	B	C	D	E	F	G	H	I	J	K	L	
Hourly	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		
Annual 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		

**Example:**

<b><i>Electricians -</i></b> Install, maintain, and repair electrical wiring, equipment, and fixtures			<b>2</b>	<b>1</b>										<b>3</b>
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Job Title 1: Job Description 1:														
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Job Title 2: Job Description 2:														
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Job Title 3: Job Description 3:														
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Job Title 4: Job Description 4:														
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Job Title 5: Job Description 5:														
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**Thank you. Please fax this report to: (866) 406-2449**

**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 30 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 1220-0184 and expires on Month day, yyyy. Without a currently valid number BLS would not be able to conduct this survey.