# Vehicle Inventory and Use Survey (VIUS)

Form 9501-2018 VIUS Light Trucks

The due date for the **2018** **VIUS** is **Month dd, yyyy.**

* If you have any questions, please call us at **1‑800‑###‑####**, weekdays between 8:00 a.m. and 5:00 p.m., Eastern Time.
* **YOUR RESPONSE IS REQUIRED BY LAW**. Title 13, United States Code (U.S.C.), Sections 131 and 182 authorizes this collection. Sections 224 and 225 require your response. The U.S. Census Bureau is required by Section 9 of the same law to keep your information **CONFIDENTIAL** and can use your responses only to produce statistics. The Census Bureau is not permitted to publicly release your responses in a way that could identify your business, organization, or institution. Per the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through screening of the systems that transmit your data.
* This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB approval number is **####-####** and appears at the upper right of this screen. Without this approval we could not conduct this survey.

**A - REGISTRATION INFORMATION**

All questions on this form refer to the vehicle identified by the following registration information:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Vehicle Make | Model Year | State | License Plate | Vehicle Identification Number (VIN) |
|  |  |  |  |  |

1. Is the vehicle identified above still in your or your company’s possession?

* Yes *(Go to section C – Acquisition on page 3)*
* No *(Go to section B – Disposal on page 2)*

**B - DISPOSAL**

1. Did you dispose of this vehicle prior to January 1, 2018?

* Yes *(Go to section O – Contact Information on page 25)*
* No *(Continue with question 2 below)*

1. When did you dispose of this vehicle?

*Enter 2-digit month and 4-digit year.*

Month \_\_\_ \_\_\_ / Year \_\_\_ \_\_\_ \_\_\_ \_\_\_

1. How did you dispose of this vehicle?

*Select ONE only.*

* Sold or gave it away
* Traded it in
* Junked, scrapped, or otherwise destroyed it
* Returned it to leasing company
* Repossessed

**NOTE:** If you disposed of this vehicle after January 1, 2018, answer all of the remaining applicable questions according to how you used the vehicle during 2018. If you disposed of this vehicle prior to January 1, 2018, skip to section O – Contact Information on page 25.

**C – Acquisition**

1. When did you obtain this vehicle?

*If purchased after lease, report the date you* ***originally*** *took possession of this vehicle. Enter 2-digit month and 4-digit year.*

Month \_\_\_ \_\_\_ / Year \_\_\_ \_\_\_ \_\_\_ \_\_\_

1. Was this vehicle new when you obtained it?

*Select ONE only.*

* Yes
* No

**D – LEASING**

**NOTE:** This section pertains to ownership leasing. Rental agreements are NOT covered.

1. Was this vehicle leased during 2018?

*Select ONE only.*

* No
* Yes, leased this vehicle FROM someone else)
* Yes, leased this vehicle TO someone else)

**E – TYPE OF VEHICLE**

1. In 2018, which body type most closely resembled this vehicle?

*Select ONE only.*

* Pickup
* Minivan
* Van other than minivan
* Sport Utility
* Other not elsewhere specified: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In 2018, what was the height of this vehicle’s cabin?

Feet: \_\_\_\_\_\_\_\_\_\_\_ Inches: \_\_\_\_\_\_\_\_\_\_

**F – PHYSICAL CHARACTERISTICS**

1. In 2018, what was the total number of axles on this vehicle?

*Include front and rear axles, but do NOT include axles on any trailers pulled.*

* Two
* Three or more

1. How many tires are on the rear axle?

* Two
* Four

1. From question 1 above, how many axles were driving (powered) axles?

* One axle
* Two axles
* Other – please specify: \_\_\_\_\_\_\_\_\_

1. What type of transmission did this vehicle have?

*Select ONE only.*

* Automatic
* Manual
* Semi-automated manual (driver shifts with an electronic module)
* Automated manual (no driver shifting – done electronically

1. How many gears did this vehicle have?

Number of gears: \_\_\_\_\_\_\_\_

1. Did this vehicle have any of the following permanent equipment?

*Mark ALL that apply.*

* Aerial work platform/bucket
* Air bag(s) (safety device only)
* Air-conditioning
* Anti-lock brake system
* Automatic engine shutoff technology
* Automatic tire inflation system
* Computerized drive train control unit
* Front-wheel drive
* Low rolling resistance tires on the drive wheels
* Low rolling resistance tires on the steering wheels
* Mounting bar for snowplow
* Radial tires
* Route guidance technology
* Single-wide tires
* Tire pressure monitoring system
* Toolbox
* Trip recorder or on-board computer WITH remote communication capabilities
* Trip recorder or on-board computer WITHOUT remote communication capabilities
* Vehicle control aids for handicapped drivers
* Wheelchair lift
* Winch

1. What was this vehicle’s towing capacity in pounds?

\_\_\_\_\_\_\_\_\_\_ pounds

**G – TIME OPERATED**

1. During 2018, what reasons (if any) was this vehicle NOT in use for periods of 90 consecutive days or more?

*Select ALL that apply.*

* Not applicable
* Seasonal
* Not needed/idle (excluding seasonal)
* Under repair
* Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. During 2018, how many months was this vehicle used?

*Round to the nearest whole month. Select ONE only.*

* 12 months
* 7-11 months
* 2-6 months
* 1 month or less
* Vehicle not used (no miles driven) *(Go to section O – CONTACT INFORMATION on page 25)*

**H – HOME BASE**

1. Did this vehicle operate from a home base location during 2018?

*Home base refers to the location where the vehicle was usually parked when it was not on the road, such as a home, farm, terminal, etc. Vehicles that might NOT operate from a home base are typically consumer one-way rentals or some over-the-road truck tractors. If this vehicle is on lease to someone else, answer ALL home base questions as they pertain to the lessee. Select ONE only.*

* Yes *(Continue with question 2 below)*
* No *(Go to section I – MILES on page 11)*

1. Where was the home base of this vehicle on July 1, 2018?

*If this vehicle was put into service after July 1, 2018, enter current home base.*

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County/Parish/Borough (or equivalent): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ZIP Code: \_\_\_\_\_\_\_\_\_\_\_\_

1. What was the type of home base from which this vehicle operated?

*Select ONE only.*

* Private residence (home, farm, etc.)
* Company office/headquarters
* Terminal
* Distribution center
* Manufacturing plant
* Fuel distributor
* Liquefaction plant
* Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Of the following, how many trucks/trailers do you or your company operate from the home base location indicated above?

Pickups, small vans (including minivans), and sport utility vehicles: \_\_\_\_\_\_\_\_

Tractors (power units only): \_\_\_\_\_\_\_\_

All other trucks: \_\_\_\_\_\_\_\_

Trailers (including trailer mounted equipment): \_\_\_\_\_\_\_\_

Converter dollies: \_\_\_\_\_\_\_\_

**I – MILES**

1. How many miles was this vehicle driven in 2018?

*Round to the nearest whole mile.*

Miles: \_\_\_\_\_\_\_\_\_\_\_

1. What was the approximate percent of this vehicle’s 2018 mileage for each of the following jurisdictions?

*Round to the nearest whole percent.*

Operated in Canada: \_\_\_\_\_%

Operated in Mexico: \_\_\_\_\_%

Operated within the home base state: \_\_\_\_\_%

Operated in states other than the home base state (or has no home base): \_\_\_\_\_%

1. How was the annual mileage calculated?

* Odometer readings
* Gas receipts
* Trip meter
* GPS
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. 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: \_\_\_\_\_\_\_\_\_\_\_\_\_

1. How many miles-per-gallon (mpg) did this vehicle average during 2018?

*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.*

MPG: \_\_\_\_\_\_\_

1. How was miles-per-gallon (mpg) calculated?

* Odometer readings
* Gas receipts
* Trip meter
* GPS
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What was the approximate percent of this vehicle’s 2018 mileage accounted for by the type of trips listed below?

*If this vehicle does not operate from a home base, report the average range of operation. Round to the nearest whole percent.*

Trips off-the-road: \_\_\_\_\_\_\_\_\_

Trips on public/private roads within

* 50 miles or less from vehicle’s home base: \_\_\_\_\_\_\_\_\_
* 51 to 100 miles from vehicle’s home base: \_\_\_\_\_\_\_\_\_
* 101 to 200 miles from vehicle’s home base: \_\_\_\_\_\_\_\_\_
* 201 to 500 miles from vehicle’s home base: \_\_\_\_\_\_\_\_\_
* 501 miles or more from vehicle’s home base: \_\_\_\_\_\_\_\_\_

1. What was the approximate percent of this vehicle’s 2018 mileage accounted for by the type of trips listed below?

*Round to the nearest whole percent.*

Vehicle was cubed out: \_\_\_\_\_%

Vehicle was weighed out: \_\_\_\_\_%

Vehicle was empty: \_\_\_\_\_%

1. On average, in 2018, how many hours per week did this vehicle spend:

*Round to the nearest hour.*

Operating: \_\_\_\_\_\_\_\_\_\_hours

Idling: \_\_\_\_\_\_\_\_\_\_hours

Using auxiliary power: \_\_\_\_\_\_\_\_\_\_hours

**J – FUEL AND MAINTAINANCE**

1. During 2018, what type of fuel or fuel combination was most often used in this vehicle?

*Select ALL that apply.*

* Gasoline (including gasohol)
* Diesel (including biodiesel)
* Natural gas (compressed or liquid)
* Propane (liquefied petroleum gas)
* Alcohol fuels (ethanol or methanol)
* Electricity
* Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. During 2018, at what type of location was this vehicle typically refueled or recharged?

*Select ONE 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. During 2018, who performed any GENERAL maintenance (oil change, brake change, headlight replacement, etc.) on this vehicle?

*Select ALL that apply.*

* None performed *(Skip question 4, proceed to question 5)*
* Company-owned maintenance facility
* General repair business or private mechanic (includes gas stations, truck stops, parts stores, etc.)
* Dealership service department
* Leasing company
* Yourself, spouse, friend, etc. while not employed/paid by any maintenance type facility
* Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What was the total cost of all GENERAL maintenance in 2018?

*Round to the nearest whole dollar.*

$\_\_\_\_\_\_\_\_\_\_\_\_.00

1. During 2018, were any EXTENSIVE repairs (driveline repair, engine repair/rebuild, transmission repair/rebuild, differential repair/rebuild, etc.) performed on this vehicle?

*Select ONE only.*

* Yes *(Continue with question 6 below)*
* No *(Skip questions 6 and 7, proceed to question 8 on page 16)*

1. What was the total cost of all EXTENSIVE repairs in 2018?

*Round to the nearest whole dollar.*

$\_\_\_\_\_\_\_\_\_\_\_\_.00

1. Who performed these EXTENSIVE repairs?

*Select ALL that apply.*

* Company-owned maintenance facility
* General repair business or private mechanic (includes gas stations, truck stops, parts stores, etc.)
* Dealership service department
* Leasing company
* Yourself, spouse, friend, etc. while not employed/paid by any maintenance type facility
* Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Has this vehicle’s engine EVER been rebuilt?

*Select ONE only.*

* Yes *(Continue with question 9 below)*
* No *(Go to section K – Vehicle Configuration on page 17)*

1. In what year was this vehicle’s engine LAST rebuilt?

Year (4 digit): \_\_\_ \_\_\_ \_\_\_ \_\_\_

**K – VEHICLE CONFIGURATION**

1. In 2018, what percent of the miles driven by this vehicle were in each of the following configurations?

*Trailer mounted equipment should be treated as a trailer.*

No trailer pulled: \_\_\_\_\_%

Trailer pulled: \_\_\_\_\_%

1. Referring to the most common configuration indicated in question 1 (no trailer or trailer pulled), what was the total length of this vehicle or vehicle/trailer combination?

*Report distance, in feet, from front bumper to rear of vehicle or trailer(s). Select ONE only.*

* Less than 16.0 feet *(Go to section L – WEIGHT on page 20)*
* 16.0 to 19.9 feet *(Go to section L – WEIGHT on page 20)*
* 20.0 to 27.9 feet *(Go to section L – WEIGHT on page 20)*
* 28.0 to 35.9 feet *(Go to section L – WEIGHT on page 20)*
* 36.0 to 40.9 feet *(Go to section L – WEIGHT on page 20)*
* 41.0 to 44.9 feet *(Go to section L – WEIGHT on page 20)*
* 45.0 to 49.9 feet *(Go to section L – WEIGHT on page 20)*
* More than 50 feet *(Continue with question 3 on page 18)*

1. Which type of trailer resembles that most often attached to this vehicle?

*Select ONE only.*

* Automobile carrier (excluding curtain, van, or flatbed)
* Beverage
* Curtainside
* Dump (including belly or bottom dump)
* Flatbed, platform, 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
* Refrigerated trailer
* 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 not elsewhere classified – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What was the length, in feet, of the trailer unit most often pulled by this vehicle?

*Round to the nearest whole number.*

\_\_\_\_\_\_\_\_ feet

1. How many axles were on the trailer unit most often pulled by this vehicle?

*Select ONE only.*

* One axle on trailer
* Two axles on trailer
* Three or more axles on trailer

1. Does the trailer have any of the following add-on equipment?

*Select ALL that apply.*

* Aluminum wheels
* Front faring
* Lightweight landing gear
* Rear faring
* Side skirts
* Undercarriage aerodynamic devices
* None of the above

**L – WEIGHT**

1. What was the empty weight of this vehicle or vehicle/trailer combination?

*Select ONE only.*

* Less than 6,001 pounds
* 6,001 to 8,500 pounds
* 8,501 to 10,000 pounds
* More than 10,000 pounds

1. What was the average weight (vehicle weight plus cargo weight) of this vehicle or vehicle/trailer combination as it was most often operated when carrying a typical payload during 2018?

*Select ONE only.*

* Less than 6,001 pounds
* 6,001 to 8,500 pounds
* 8,501 to 10,000 pounds
* 10,001 to 14,000 pounds
* 14,001 to 16,000 pounds
* 16,001 to 19,500 pounds
* More than 19,500 pounds

1. What was the average payload, in pounds, transported by this vehicle or vehicle/trailer combination during 2018?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ pounds

1. What was the average weight, in pounds, of non-trailer cargo?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ pounds

1. What were the average hours per week that the trailer(s) was permitted over weight?

\_\_\_\_\_\_\_ hours

**M – KIND OF BUSINESS**

1. Approximately, what percent of this vehicle’s 2018 mileage was from each of the following operator classifications?

*Round to the nearest whole percent.*

Personal transportation (operated as a personal-use vehicle for travel to work, carpooling, pleasure driving, etc.): \_\_\_\_\_%

Rental (daily and other short term): \_\_\_\_\_%

Business use: Private (carry own goods, or use truck for internal company business only): \_\_\_\_\_%

Business use: Motor carrier (company owned trucks hired to carry other people’s goods): \_\_\_\_\_%

Business use: Owner operator (independent truckers hired to carry other people’s goods): \_\_\_\_\_%

**NOTE:** If your highest percentage occurs for personal transportation or rental, go to section O - CONTACT INFORMATION on page 25. Otherwise, continue to question 2 on page 22.

1. Which of the following best describes your business (or part of your business) in which this vehicle was most often used during 2018?

*If vehicle was leased, indicate business of lessee. Select ONE only.*

* Vehicle leasing or rental (includes short-term rentals)
* Agriculture, forestry, fishing, or hunting
* Mining (includes quarrying, well operations, and beneficiating)
* Utilities (includes electric power, natural gas, steam supply, water supply, and sewage removal)
* Fuel wholesale or distribution
* Construction (includes land subdivision and development, as well as construction activity by special trade contractors)
* Manufacturing
* Wholesale trade
* Retail Trade
* Information services (includes telephone and television)
* Waste management, landscaping, or administrative/support services
* Arts, entertainment, or recreation services
* Accommodation or food services (for immediate consumption)
* Other services, including real estate, nonvehicle leasing or rental, educational, health care, social assistance, finance, insurance, professional, scientific, or technical services
* For-hire transportation or warehousing
* Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**N – PRODUCT, EQUIPMENT, OR MATERIALS**

1. What was the approximate percent of this vehicle’s 2018 mileage for each of the following categories?

Empty – NOT CARRYING any products, tools, equipment, or materials): \_\_\_\_\_\_%

Loaded – CARRYING products, tools, equipment, or materials): \_\_\_\_\_\_%

**NOTE:** If you reported 100% for empty mileage, go to section O - CONTACT INFORMATION on page 25. Otherwise, continue to question 2 on page 24.

1. During 2018, what products, tools, equipment, or materials did this vehicle carry, and what approximate percent of LOADED mileage were they carried?

*Categorize your products, tools, equipment, or materials carried into the groupings provided on pages 26 - 27. Each applicable grouping code should be entered only once. Each item carried should be categorized into ONLY ONE GROUP. Include any backhauls, trip leasing, etc. Round to the nearest whole percent.*

*Example: If the vehicle carried landscaping tools and hauled debris away, your response might be similar to this:*

|  |  |
| --- | --- |
| **Product Code** *(with example description)* | **Percent of Loaded Miles** *(with example scenarios)* |
| **22** *(For items such as rakes, shovels, handsaws, etc.)* | **100%** *(When carried for all of the loaded miles)* |
| **23** *(For items such as leaf blowers, chainsaws, etc.)* | **100%** *(When carried for all of the loaded miles)* |
| **18** *(For tree limbs, wood chips, etc.)* | **50%** *(When carried for half of the loaded miles)* |
| **44** *(For grass clippings or other waste)* | **25%** *(When carried for one quarter of the loaded)* |

|  |  |
| --- | --- |
| Product Code | Percent of Loaded Miles |
|  | % |
|  | % |
|  | % |
|  | % |
|  | % |

**O – CONTACT INFORMATION**

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Middle Initial: \_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City (or city equivalent): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number (10 digit): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extension: \_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Filing (MM/DD): \_\_\_ \_\_\_/ \_\_\_ \_\_\_

**Product Codes**

**Agricultural and animal products**

Animals and fish, live (01)

Animal feed and products of animal origin (eggs, hides, etc.) (02)

Grains, cereal (wheat, corn, rye, etc.) (03)

All other agricultural products (crops, live plants, bulbs, flowers, etc.) (04)

**Chemicals and chemical products**

Basic chemicals (hydrogen, oxygen, hydrochloric acid, chlorine, sodium hydroxide etc.) (05)

Fertilizers and fertilizer materials (06)

Pharmaceutical products (including blood, organ, gauze, etc. (07)

All other chemical products and

preparations (08)

**Food products, alcohol, and tobacco**

Alcoholic beverages (09)

Bakery and milled grain products (baked snack good, pasta, cereal, etc.) (10)

Meat, seafood, and their preparations (11)

Tobacco products (cigarettes, cigars, chewing tobacco, etc.) (12)

All other prepared foodstuffs (dairy products, fats, food oils, sauces, spices, etc.) (13)

**Forestry, wood, and paper products**

Logs and other wood in the rough (logs for lumber, pulping, fuel, etc.) (14)

Paper or paperboard articles (toilet paper, paper towels, wallpaper, envelopes, etc.) (15)

Printed products (books, brochures, newspapers, etc.) (16)

Pulp, newsprint, paper, and paperboard (newsprint in large rolls, napkin stock, etc.) (17)

Wood products (wood chips, plywood, doors, windows, etc.) (18)

**Manufactured metal and mineral products**

Articles of base metal (pipes, nails, screws, tubes, fittings, locks, etc.) (19)

Base metal in primary or semifinished forms (bars and rods of steel or iron, etc.) (20)

Nonmetallic mineral products (cement, bricks, glass, concrete products, mirrors, etc.) (21)

**Other manufactured products or equipment**

Tools, non-powered (22)

Tools, powered (23)

*(Continued on next page)*

Electronic and other electrical equipment (telephones, VCRs, computer equipment,

etc.) (24)

Furniture, mattresses, lamps, etc. (25)

Machinery (motors, turbines, air conditioning equipment, fans, dishwashers, etc.) (26)

Miscellaneous manufactured products (toys, sports equipment, jewelry, clocks, etc.) (27)

Precision instruments and apparatus (cameras, eyewear, measuring instruments, etc.) (28)

Textile, leather, and related articles (footwear, yarns, threads, comforters, etc.) (29)

Vehicles, including parts (cars, motorcycles, trailers, etc.) (30)

All other transportation equipment (aircraft, boats, locomotives, etc.) (31)

**Mining materials (raw form)**

Coal (non-agglomerated and agglomerated) (32)

Crude petroleum (33)

Gravel or crushed stone (34)

Metallic ores and concentrates (35)

Monumental or building stone (marble, limestone, granite, sandstone, etc.) (36)

Natural sands (37)

All other nonmetallic minerals (salt, table salt, clays, asbestos, dolomite, etc.) (38)

**Petroleum products (refined)**

Fuel oils (diesel, Bunker C, etc.) (39)

Gasoline and aviation turbine fuel (40)

Plastics and rubber (tires, blinds, articles made of plastics or rubber, mud flaps, etc.) (41)

Natural Gas (42)

All other coal and refined petroleum products (greases, propane, etc.) (43)

**Waste, refuse, and recycling**

Hazardous waste (EPA manifest) (44)

All other waste and scrap (including trash, yard waste, biosludge, non-EPA manifested hazardous materials, etc.) (45)

Recyclable products (46)

**Miscellaneous**

Mail and courier parcels (47)

Empty shipping containers (48)

Passengers (49)

Mixed freight (for-hire carriers that haul multiple commodities on the same load) (50)

Products, equipment, or materials not elsewhere classified (99)