

## 2005 Residential Energy Consumption Survey

Sponsored by the Energy Information Administration U.S. Department of Energy Washington, DC 20585

Form EIA-457G (2005) – Household Fuel Oil or Kerosene Usage Form OMB No. 1905-0092, Expiring May 31, 2008

## Household Fuel Oil or Kerosene Usage Form

Service Address:

**STEP 1** If the customer account number is not shown on the label, please enter it here.

# **STEP 2** Now, please turn the page and answer the seven questions for the household identified above.

**Completed forms are due by March 4, 2006**. If you have any questions, please call (toll-free) 1-NNN-NNN-NNN. Ask for the Supplier Survey Specialist.

This report is mandatory under Public Law 93-275, as amended. See the enclosed **Answers to Frequently Asked Questions** for more details concerning confidentiality and sanctions.

### **STEP 3**

Use the enclosed self-addressed envelope and return the completed form to:

U.S. Department of Energy c/o The Contractor Contractor's Street Address Contractor's City, State, and ZIP Code

Or you may FAX the completed form to The Contractor at NNN-NNNN.

"Title 18 U.S.C. 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction."

Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding this reporting burden estimate or any other aspect of this data collection, including suggestions for reducing this burden, to the Energy Information Administration, Statistics and Method Group, EI-70, 1000 Independence Avenue, SW, Washington, DC 20585, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

#### Please provide information on all deliveries to this household from October 1, 2004, to the present date.

Delivery Number	Enter the <b>Delivery Date</b> (Month/Day/Year)	Circle the type of fuel sold to the household <b>Type of Fuel Sold</b> <sup>a</sup> 1 = Fuel Oil #1 2 = Fuel Oil #2 K = Kerosene O = Other				Enter the Number of Gallons of Fuel Delivered to the Household (Gallons)	Enter the Price per Gallon (U.S. \$0.00)	Enter the Total Dollar Amount (including taxes and other charges) for this Delivery <sup>b</sup> (US\$ 000.)
1		1	2	к	0			
2		1	2	к	0			
3		1	2	К	0			
4		1	2	К	0			
5		1	2	К	0			
6		1	2	к	0			
7		1	2	к	0			
8		1	2	к	0			
9		1	2	к	0			
10		1	2	к	0			
11		1	2	к	0			
12		1	2	к	0			
13		1	2	к	0			
14		1	2	к	0			
15		1	2	к	0			
16		1	2	к	0			

a. Fuel oil #1 is a light distillate fuel oil intended for use in vaporizing pot-type burners.
 Fuel oil #2 is a distillate fuel oil for use in atomizing type burners for domestic heating burner units.
 Kerosene includes No. 1-K and No. 2-K, and all grades of kerosene called range or stove oil.
 Other includes any oil other than fuel oil #1, fuel oil #2, or kerosene. If the oil delivered is a mixture, circle "Other" and give the types of oil and proportions of each in Question 2.

b. *Include* in the **Total Dollar Amount for this Billing Period** all state and local taxes, fuel adjustment charges and system charges (minimum bill or base charge). *Exclude* merchandise, repairs, and service charges. If the household is on the budget plan, do *not* provide the budgeted bill; instead, provide the dollar amount that is the cost of the actual consumption in the period.

For C	Office	Use	Only:											1					1
	Fuel 9	Beginning Date 11-16			te	Ending Date 17-22					CR 23	Reason 24 25 26 27 28					R/E 30		
	4																		
												1				Ì			
PP 35	DT 36	L1 37	L2 38		PRs )-41	Fi	irst Company 42-47	Pr: 48-4		FT 50	DC 51	Seco	ond Comp 52-57	any	Prs 58-59	FT 60		DC 61	#S 72-73

If some other type of fuel was delivered to the household ("Other" was circled for type of fuel in Question 1), what fuel was sold? Write in the type of fuel on the lines below. If a mixture of fuels was sold, write in the types of fuels and the propor- tion of each.	<b>5.</b> Is this household currently your customer? $\Box$ Yes $\rightarrow$ Go to Question 6. $\Box$ No
	5a. If no, what was the date when the household stopped being a custom of your company? Enter the date if the box below. If you don't know the date or the household was never a customer, check the appropriate answer below the box.
What is the capacity, in gallons, of this household's storage tank(s)? Enter the capacity for the two largest tanks (if there is more than one) in the boxes below. If the capacity is not known, write "Not Known" in the box.	/ / Mth Day Year <u>™™ Day rea</u> Don't know the date
	<ul> <li>Household was never a customer</li> </ul>
Tank #1 Tank #2 Was this household your customer as of January 1, 2001?	<ul> <li>6. What was the source of the information abd deliveries to this household? Mark all sources information that apply.</li> <li>From the company records</li> <li>An estimate made by a company representative</li> <li>Information secured from the customer</li> </ul>
□ Yes $\rightarrow$ Go to Question 5. □ No	7. Please provide the following information for the person who completed this form. Please print.
If no, what was the date this	Name:
4a. household became a customer of your company? Enter the date in the	Company:
box below. If you don't know the date or the	Telephone:
household was never a customer, check the appropriate answer below the box.	E-mail Address: Fax Number:
	Date:
/ / Mth Day Year	
Min Day Year	USE THIS SPACE FOR ANY ADDITIONAL NOTES T EXPLAIN YOUR ENTRIES ON THIS FORM
Don't know the date	
Household was never a customer	



Use the enclosed self-addressed envelope and return the completed form to:

U.S. Department of Energy c/o The Contractor Contractor's Street Address Contractor's City, State, and Zip Code Form EIA-457G (2005) – Household Fuel Oil or Kerosene Usage Form; OMB No. 1905-0092, Expiring Month DD, 20YY