



2014 NATIONAL CENSUS OF FERRY OPERATORS



 United States Department of Transportation
Bureau of Transportation Statistics

WHO IS INCLUDED IN THE 2014 CENSUS OF FERRY OPERATORS?

The geographic scope of the 2014 National Census of Ferry Operators includes the U.S. and its possessions (i.e., the 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, and the remaining territories, commonwealths and other political units of the U. S.). This includes political units that are an unincorporated territory of the U.S., maintain a Compact of Free Association with the U.S., or are a commonwealth associated with or in political union with the U.S. This currently includes the Marshall Islands, Northern Mariana Islands, the Republic of Palau, the Federated States of Micronesia, American Samoa, and the United States Minor Outlying Islands including Baker Island, Howland Island, Jarvis Island, Johnston Atoll, Kingman Reef, Midway Islands, Navassa Island, Palmyra Atoll, and Wake Island. In addition to ferry operators providing domestic service within the U.S. and its possessions, operators providing services from locations in the U.S. and its possessions to and from a foreign country are also to be included.

WHO SHOULD COMPLETE THIS CENSUS QUESTIONNAIRE

The specific types of ferry operations to be included within the scope of this census are those providing itinerant, fixed route, common carrier passenger and/or vehicle roll-on, roll-off (RoRo) ferry service as well as railroad car float operations. More specifically, the following types of operations should complete the census questionnaire:

- Ferry or water taxi operations that have fixed routes between two or more different ports of call.
- Ferry or water taxi operations that provide service on a fixed schedule or on demand within a fixed window of time.
- Common Carriers (e.g. for-hire carriers) who serve the general public at reasonable rates and without discrimination.
- Railroad car float operations that utilize a tug and barge combination having two to three parallel tracks, onto which rail cars are rolled for transit across a body of water.

WHO SHOULD NOT COMPLETE THIS CENSUS QUESTIONNAIRE

The following types of operations will not be included in the National Census of Ferry Operators:

- Non-itinerant ferry operations (e.g., “cruise-to-nowhere” services).
- Excursion services (e.g., whale watches, casino boats, day/dinner cruises, etc.).
- Passenger only water taxi services not operating on a fixed route.
- LoLo (Lift-on/Lift-off) freight/auto carrier services.
- Long distance passenger only cruise ship services.

If you are not sure whether your operation should not be included in the census, please contact the U.S. Department of Transportation, Bureau of Transportation Statistics, at 1-800-853-1351 or email Ferry@dot.gov.

The Bureau of Transportation Statistics is conducting a nationwide survey of ferry boat operators for the US Department of Transportation. This census is authorized by law [Moving Ahead for Progress in the 21st Century Act (P.L. 112-141, section 1121(b))] that requires BTS to maintain a database of existing ferry operations across the United States. The Federal Highway Administration also uses the data collected on passengers, vehicles, and route miles to set the specific formula for allocating federal ferry funds (23 USC 147(d)). Your company’s participation in this census is strictly voluntary. By law (5 United States Code 552(b)(4)), any confidential business information we may collect will be kept confidential and will not be made public or shared outside of the U.S. Department of Transportation. Under federal law (18 United States Code 1905), employees and contractors working on this census are subject to penalties if they make public ANY information that could reveal confidential business information. At the end of this census questionnaire, we ask that you identify any information that you consider confidential business information. Please note that information which your business releases to the public on a routine basis or is in the public domain, generally, does not qualify as confidential business information. The Paperwork Reduction Act of 1995 states that no persons are required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) control number. The OMB control number for this survey is 2139-0009 (Expires November 30, 2016). If you have questions or comments about this survey, please call 1-800-853-1351 or email Ferry@dot.gov.

IMPORTANT: CHANGES TO THE CENSUS QUESTIONNAIRE

Please add information as appropriate to reflect your ferry operation in calendar year 2013.

Only paper questionnaires are being utilized for the 2014 census. Blank pages may be photocopied as needed to include information for larger fleets, etc.

Preprinted brochures, schedules, etc., may NOT be substituted for responses to the items on this census form.

Information provided on passengers, vehicles, and route miles will be used by the United States Department of Transportation's Federal Highway Administration (FHWA) for funding allocation purposes as outlined by the funding formula described in 23 USC 147(d).

1. Please ensure that the information below is complete and correct. If the information on a line is correct, simply check the box and move to the next line. If not, please use the space at right to add or correct the information.

Information	Correct	Additions / Corrections
Company Name:	<input type="checkbox"/>	<input type="text"/>
Address 1:	<input type="checkbox"/>	<input type="text"/>
Address 2:	<input type="checkbox"/>	<input type="text"/>
City, State, ZIP:	<input type="checkbox"/>	<input type="text"/>
Company Web Site:	<input type="checkbox"/>	<input type="text"/>
Contact Person #1:	<input type="checkbox"/>	<input type="text"/>
Telephone #1:	<input type="checkbox"/>	<input type="text"/>
Fax #1:	<input type="checkbox"/>	<input type="text"/>
E-mail Address #1:	<input type="checkbox"/>	<input type="text"/>

1. (Continued) Please ensure that the information below is complete and correct. If the information on a line is correct, simply check the box and move to the next line. If not, please use the space at right to add or correct the information.

Information	Correct	Additions / Corrections
Contact Person #2:	<input type="checkbox"/>	
Telephone #2:	<input type="checkbox"/>	
Fax #2:	<input type="checkbox"/>	
E-mail Address #2:	<input type="checkbox"/>	

2. Are you completing this census on behalf of a federal, state or local government agency?

No

Yes

3. Please indicate the percentage of your operation's annual revenues for calendar year 2013 that came from each of the following sources? (*Allocations must add up to 100%*).

Individually purchased tickets or fares (including fare cards)	<input type="text"/>	%
Payments from private contracts (charters, concessions, etc.)	<input type="text"/>	%
Payments from advertising contracts	<input type="text"/>	%
Payments from contracts with public agencies	<input type="text"/>	%
Public Funding (grants, etc.): Federal	<input type="text"/>	%
Public funding (grants, etc.): State	<input type="text"/>	%
Public funding (grants, etc.): Local	<input type="text"/>	%

4. Please list each vessel in your fleet during calendar year 2013 (include unpowered barges and powered tugs used for ferry service). For each vessel, please include the vessel number, whether or not it was in service, cargo type, and passenger (not including crew), and vehicle carrying capacity. Vehicle capacity is the number of cars that each vessel can carry, assuming all cars are 20 feet long.

Vessel Name	USCG Vessel Number	Vessel in service in 2013	Vessel Cargo Type <i>(Please check all that apply)</i>			Vessel Capacity	
			Passengers	Vehicles	Freight	Passengers	Vehicles
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Passengers	<input type="checkbox"/> Vehicles	<input type="checkbox"/> Freight	<input type="text"/>	<input type="text"/>

6. For each vessel in your fleet during calendar year 2013, please list the fuel type and the typical fuel mileage (miles per gallon (US)). If you had any ferry vessels in calendar year 2013 that are not listed, please enter the information for those ferry vessels in the blank lines below. Please attach additional sheets, if needed.

Vessel Name	Fuel Type <i>(please mark only one – CNG = Compressed Natural Gas)</i>						Fuel Mileage					
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	Diesel	<input type="checkbox"/>	Gas	<input type="checkbox"/>	CNG	<input type="checkbox"/>	Electric	<input type="checkbox"/>	Other:	<input type="text"/>	<input type="text"/>

7. For each vessel in your fleet during calendar year 2013, place an X in the box below if it is ADA accessible. Please also indicate the expected lifespan (in hours) since last rebuilt, the number of hours the vessel has been run since last rebuilt, the number of nautical miles the vessel traveled in 2013, and the typical operating speed of the vessel.

Vessel Name	ADA Accessible *	Lifespan	Hours	2013 Miles	Typical Operating Speed
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (knots)

* Please state whether or not the vessel complies with 49 CFR 39 – transportation for individuals with disabilities: passenger vessels. The rule may be found online here: <http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&rgn=div5&view=text&node=49:1.0.1.1.29&idno=49> .

9. For each terminal served by your fleet during calendar year 2013, please indicate whether the terminal was publicly or privately owned and/or operated. For terminals that are both publicly and privately owned, please mark both boxes. If publicly owned or operated (in whole or in part), please list the name of the public owner and/or operator.

Terminal Name	Ownership		Operation	
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>
<input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>	<input type="checkbox"/> Private	<input type="checkbox"/> Public: <input type="text"/>

15. Please list the source of any public funding received in calendar year 2013. Indicate the type of agency from which the funding was received (federal, state or local), the name of the agency and the funding program.

Agency Type			Agency Name	Program Name
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		
<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Local		

16. Please indicate whether either of the following census items required you to provide business-sensitive information? If an item is marked as being business sensitive, please give a brief description as to the nature of the sensitivity. (Please note: Information that you release to the public on a routine basis generally does not qualify as business-sensitive information).

Item 13 Description:

Item 14 Description:

17. Please give a brief description of the type of electronic ticketing systems you use to track passenger and vehicle boardings. If you don't use electronic ticketing, please mark none and indicate whether you would use ticketing software if it was made available to you.

None Would use it if it were available Description:

Thank you for completing the 2014 NCFO questionnaire!