



Unified Enterprise Survey - Annual

# 2005 Annual Retail Store Survey

This information is collected under the authority of the *Statistics Act, Revised Statutes of Canada, 1985, Chapter S19*. Completion of this questionnaire is a legal requirement under this Act.

This document is confidential when completed.

Si vous préférez recevoir ce questionnaire en français, veuillez nous téléphoner au numéro sans frais suivant : 1 888 881-3666.

Please correct pre-printed information, **if necessary**, using the corresponding boxes below:



0001	Legal name		0004	Address		
0002	Business name		0005	City	0006	Province/Territory or State
0003	C/O		0053	Country	0007	Postal code/ Zip code
0028	Last name of contact		0008	First name of contact		
0052	Please report for		0010	Language preference	1 <input type="checkbox"/> English      2 <input type="checkbox"/> French	

## A - Introduction

### Survey Purpose

The purpose of this survey is to collect the financial and operating/production data needed to develop national and regional economic policies and programs. For further details, please consult the enclosed booklet entitled *Statistics Canada Business Surveys*.

### Coverage

Please report for the business unit(s) identified above. Include only the operation(s) located in Canada.

### Fax or Other Electronic Transmission Disclosure

Statistics Canada advises you that there could be a risk of disclosure during the facsimile or other electronic transmission. However, upon receipt, Statistics Canada will provide the guaranteed level of protection afforded all information collected under the authority of the *Statistics Act*.

### Confidentiality

Statistics Canada is prohibited by law from publishing any statistics which would divulge information obtained from this survey that relates to any identifiable business. The data reported on this questionnaire will be treated in strict confidence. For further details, please consult the enclosed booklet entitled *Statistics Canada Business Surveys*.

### Return of Questionnaire

Please return the completed questionnaire to Statistics Canada **within 30 days** of receipt by mail, using the enclosed envelope. You can also fax it at **1 888 883-7999**. Lost the return envelope, need help to complete your questionnaire? Call us at **1 888 881-3666**.

### Data-sharing Agreements

Statistics Canada has entered into agreements with provincial and territorial statistical agencies for the sharing of data. The data are kept confidential and used for statistical purposes only. **Your responses are not shared with Canada Customs and Revenue Agency**. For further details, please consult the enclosed booklet entitled *Statistics Canada Business Surveys*.

0026	Person primarily responsible for completing this questionnaire, if different from above:			0017	Telephone number
	1 <input type="checkbox"/> Mr.    2 <input type="checkbox"/> Mrs.    3 <input type="checkbox"/> Miss    4 <input type="checkbox"/> Ms			0027	Extension number
0054	Last name			0016	Fax number
0013	First name			0020	Web site address
0014	Title			0018	E-mail address



## Reporting Instructions

1. Please print in ink.
2. Report all dollar amounts in CANADIAN DOLLARS (**CAN\$**).
3. Dollar amounts and percentages should be rounded to whole numbers.
4. A reporting guide is included with the questionnaire for your reference.
5. **When precise figures are not available, please provide your best estimates.**

## Main Business Activity

1. Is this business unit primarily a store retailer?

0840 1  **Yes** – Please go to question 2.

3  **No** – Please provide a brief description of your main activity and call **1 888 881-3666** for further instructions.

0041 \_\_\_\_\_

2. How many retail locations does this business unit cover?

0842 Number of locations , if **5 or more locations**, please call **1 888 881-3666** for further instructions.

3. Is this business unit a franchise operation?

0841 1  **Yes**

3  **No**

4. List the main lines of merchandise and services sold and the estimated percentages of total operating revenue:

		%
a) 0833	<input type="text"/>	0834 <input type="text"/>
b) 0835	<input type="text"/>	0836 <input type="text"/>
c) 0837	<input type="text"/>	0838 <input type="text"/>

## Reporting Period Information

Please report for your **fiscal year** (normal business year) ending between **April 1, 2005** and **March 31, 2006**. Indicate the period covered by this questionnaire.

1. **From** 0011    **To** 0012

2. If you did not operate this business unit for a full year, please check the reason(s) below:

0031 1  Seasonal operation    2  New business    3  Change of fiscal year    4  Change of ownership    5  Ceased operations    6  Temporarily inactive

## B - Revenue

Please exclude GST/HST, PST and TVQ.

	CAN\$
1. Sales of all goods purchased for resale, net of returns and discounts <b>Include</b> parts used in generating repair and maintenance revenue (report the labour portion of repair and maintenance at question 5 below).	2020
2. Commission revenue and fees earned from selling merchandise on behalf of others	2060
3. Commission revenue and fees earned from selling services on behalf of others (e.g., from selling lottery and bus tickets, phone cards)	2038
4. Sales of goods manufactured as a secondary activity by this retailing business unit	2299
5. Labour revenue from repair and maintenance (report parts at question 1 above)	2041
6. Revenue from rental and leasing of goods and equipment	2037
7. All other operating revenue (e.g., rental of real estate, placement fees) <b>Exclude</b> interest and dividend income; report these amounts at question 9 below.	2077
8. <b>Total operating revenue</b> (add amounts reported at questions 1 to 7 above)	2080
9. Non-operating revenue (e.g., interest and dividend income)	2097
10. <b>Total revenue</b> (add amounts reported at questions 8 and 9 above)	2098

### C - Cost of Goods Sold

		CAN\$
1. Opening inventory	5560	
2. Purchases	4019	
3. Direct labour costs (please refer to the guide)	3006	
4. Other direct costs (please refer to the guide)	4301	
5. Closing inventory	5565	
6. <b>Cost of goods sold</b> (sum of questions 1 to 4 minus 5 above)	5720	

### D - Expenses

		CAN\$	CAN\$
1. Salaries and wages of employees	3010		
2. Employer portion of employee benefits	3040		
3. <b>Total labour remuneration</b> (add amounts reported at questions 1 and 2 above)		3041	
4. Rental and leasing expenses. <b>Include</b> office space or other real estate, motor vehicles, computers and peripherals, other machinery and equipment, and other goods.		4115	
5. Advertising and promotion		4365	
6. Amortization and depreciation expenses (e.g., buildings, vehicles, machinery and equipment)		4520	
7. All other operating expenses (please refer to the guide) <b>Exclude</b> interest expenses; report these amounts at question 9 below.		4569	
8. <b>Total operating expenses</b> (add amounts reported at questions 3 to 7 above)		4598	
9. Other expenses (e.g., interest expenses)		4630	
10. <b>Total expenses</b> (add amounts reported at questions 8 and 9 above)		4698	

### E - Distribution of Operating Revenue by Type of Customer

Please indicate the percentage of total operating revenue (reported in **Section B**, at question 8), by type of customer to whom the goods or services were delivered.

		%
1. Individuals and households	8100	
2. All other customers (e.g., private businesses, public institutions, government)	8113	
<b>Total</b>		<b>100%</b>

### F - Events that may have affected your business unit

1. Compared to **last fiscal year**, were there any events that may have **significantly affected the reported values** for this business unit? (please specify):

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9969 \_\_\_\_\_

## G - Location Details

1. Please report the following information for **each** of the retail locations covered by this questionnaire:

Name and address of retail location		Total operating revenue CAN\$	Gross leasable area	Is this retail location
0843	<b>a) Business name:</b>	0858	0848	0859
0844	Address	<input type="text"/>	<b>Area:</b> <input type="text"/>	1 <input type="checkbox"/> on a street?
0845	City		Indicate units	2 <input type="checkbox"/> in a shopping centre?
0846	Province or Territory	0870	0847	3 <input type="checkbox"/> Other (please specify):
	Postal Code		1 <input type="checkbox"/> Square feet	0849
			2 <input type="checkbox"/> Square metres	<input type="text"/>
0860	<b>b) Business name:</b>	0874	0865	0828
0861	Address	<input type="text"/>	<b>Area:</b> <input type="text"/>	1 <input type="checkbox"/> on a street?
0862	City		Indicate units	2 <input type="checkbox"/> in a shopping centre?
0863	Province or Territory	0893	0864	3 <input type="checkbox"/> Other (please specify):
	Postal Code		1 <input type="checkbox"/> Square feet	0899
			2 <input type="checkbox"/> Square metres	<input type="text"/>
0826	<b>c) Business name:</b>	0891	0881	0892
0827	Address	<input type="text"/>	<b>Area:</b> <input type="text"/>	1 <input type="checkbox"/> on a street?
0878	City		Indicate units	2 <input type="checkbox"/> in a shopping centre?
0879	Province or Territory	0882	0880	3 <input type="checkbox"/> Other (please specify):
	Postal Code		1 <input type="checkbox"/> Square feet	0830
			2 <input type="checkbox"/> Square metres	<input type="text"/>
0912	<b>d) Business name:</b>	0919	0921	0917
0913	Address	<input type="text"/>	<b>Area:</b> <input type="text"/>	1 <input type="checkbox"/> on a street?
0914	City		Indicate units	2 <input type="checkbox"/> in a shopping centre?
0915	Province or Territory	0916	0920	3 <input type="checkbox"/> Other (please specify):
	Postal Code		1 <input type="checkbox"/> Square feet	0918
			2 <input type="checkbox"/> Square metres	<input type="text"/>

## H - Comments

1. How long did you spend collecting the data and completing this questionnaire? Hour(s) Minutes  
9910  9909

2. We invite your comments below. Statistics Canada reviews all comments with the intent of improving the survey.

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Signature:

YYYY MM DD  
0015

I certify that the information contained herein is complete and correct to the best of my knowledge.

**Thank you for completing this questionnaire. Please retain a copy for your records.**