

2003 Survey of Service Industries: Food Services and Drinking Places

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 1 888 881-3666.



If necessary, please correct pre-printed information below.

0001	Legal name		0004	Address (number and	street)	
0002	Business name	\Diamond_{\bullet} (0005	City		
0003	C/O	[XX	0006	Province or State		
0008	First name of contact		0053	Country	0007	Postal code / Zip code
0028	Last name of contact		0010	Language preference 1 E	nglish	² French

A - General Information

Survey Purpose

This survey collects the financial and operating data needed to develop national and regional economic policies and programs.

Data-sharing Agreements

In an effort to reduce reporting burden, 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. Please see the enclosed information booklet for details of the agreements.

Confidentiality

The Statistics Act protects the confidentiality of information collected by Statistics 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*.

Reporting Instructions

- Report for all operation(s) and/or location(s) pre-printed in the above address area. If it is not possible to report for the above business unit(s), please explain the reason(s) in the Comments section at the end of the questionnaire.
- When precise figures are not available, please provide your best estimates.
- For further information about this survey and definitions, please consult the enclosed information booklet.

Return of Questionnaire

Please mail the completed questionnaire(s) in the enclosed envelope or fax it to Statistics Canada at 1 888 883-7999 within 30 days of receipt.

Lost the return envelope or need help? Call us at **1 888 881-3666** or mail to: Statistics Canada, Operations and Integration Division, 120 Parkdale Avenue, Ottawa, Ontario K1A 0T6

5-3600-174.1: 2003-07-11

STC/UES-307-75135

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Statistique Canada Statistics Canada



B - Main Business Activity		
Please describe the nature of your business.		
Please check only one of the following categorie accurately describes the principal source of ope	· — ·	t this business unit, which most
722110 0430 Full-Service Restaurant - patro	ons order while seated	
722210 0431 Limited-Service Restaurant - p	patrons order food and beverages at a cou	unter, food bar and/or order by phone
722310 0432 Food Service Contractor - sup	plies food services under contract for a sp	pecific period of time
722320 0433 Social Caterer - provides food s	services for social or business events	
722330 0434 Mobile Food Service - serves f	ood and beverages, from motorized vehic	les or non-motorized carts
722410 0435 Drinking Places (e.g., bars, nig	ht-clubs, taverns)	
0040 None of the above		
If you responded "None of the	above", please call 1 888 881-3666 for ful	rther instructions.
For further information, plea	ase refer to the enclosed informa	ation booklet.
	407	
C - Reporting Period Information		
Please report information for your <u>fiscal year</u> (A 2004. Please indicate below the period covered		April 1, 2003 and March 31,
Year Month Day	Year Month	Day
1. From	To	
2. If you did not operate this business unit for a	full year, please check the reason(s)	below:
0031 ¹ Seasonal ² New ³ Operation Business	Change of ⁴ Change of ⁵ Fiscal Year Ownership	Ceased ⁶ Temporarily Operations Inactive
3. Please indicate below, any change that may	have occurred in the organization of t	his business unit during this
fiscal year: 0047 Acquired New U	nits ² Disposed of/Solo	d Units
If you have had any other changes in	your business within the year.	please describe these
	ts section at the end of the ques	
D - Business Unit Organization		
Type of organization (please check one only):		
0024 ¹ Unincorporated sole proprietorship	² Unincorporated partnership	³ Incorporated company
⁴ Co-operative	⁵ Joint venture	⁶ Government business entity
⁷ Government	⁸ Non-profit organization	-·····y

For further information, please refer to the enclosed information booklet. E - Menu Theme Please identify your dominant menu theme(s) maximum of three (3). 9181 Baked Goods (e.g., doughnuts, muffins, pastries) 9189 Pizza 9182 Chicken Other Italian 9190 9183 Chinese 9191 Roast Beef 9184 Other Asian 9192 Sandwiches/Subs 9185 Coffee 9193 Seafood 9186 Hamburger 9194 Steak Mexican Vegetarian 9187 9195 North American (varied) Other Ethnic (please specify) 9188 9196 9201 9198 Finger Food 9197 Other Speciality (please specify) No menu theme 9199 F - Revenue \$ CDN 1414 Total alcoholic beverages (include drinks served with meals) 1415 Full table food service (customers are waited upon while seated at a table) 2. 1420 Counter service (food and beverages dispensed to customers to be eaten on the premises) 1425 Take-out service (customers pick up food and beverages to be eaten away from the premises) 4. 1430 Drive-through service (customers drive up, order and consume their purchases away from the premises) 1432 Delivery service (food ordered and delivered to customers by vehicle) 1435 Contract catering service (food prepared for institutions, government and/or industry) 7. 1440 Social catering (food prepared for events, parties and functions) 8. 1445 Mobile food service (food and beverages prepared and sold from motorized vehicles and non-motorized carts) 2028 gifts, toys, newspapers, cigarettes) 10. Sales of merchandise (e.g., 2022 11. Franchise fee and royalty revenue 2060 12. Commission revenue (e.g., net gambling commissions from video lottery terminals, lottery tickets) 2077 13. All other revenue. (Please specify major items): 2071 2072 2073 2080 14. Total operating revenue (sum of 1 to 13) 2097 15. Investment and other income (e.g., interest and dividend income, capital gains) 2098 16. Total revenue (sum of 14 and 15)

For further information, please refer to the enclosed information booklet.

G -	Expenses	\$ CDN	
1.	Cost of alcoholic beverages	5533	
2.	Cost of food and non-alcoholic beverages	5532	
3.	Cost of merchandise (for resale)	5531	¢ CDN
4.	Total cost of goods sold (sum of 1 to 3)		\$ CDN 5721
7 . 5.	Total salaries and wages of employees (include	3010	
	management salaries)		
6.	Employer portion of employee benefits	3040	
7.	Total labour remuneration (sum of 5 and 6)	3041	
8.	Supplies and materials used in the business (e.g., plastic to food containers)	3420	
9.	Office supplies (include paper and supplies, computers, p	printers, photocopiers)	3301
10.	Heat, light, power and water (e.g., electricity, gas, propane		4066
11.	Purchased delivery service (delivery of food and beverage contractor)	es to customers by private	3440
12.	Telephone and other telecommunication expenses (<i>includaccess, cable and satelite fees</i>)	de cell phone, Internet	4101
13.	Rental of linens and uniforms (include laundry)		3430
14.	Legal, accounting and other professional fees		4230
15.	Rent	4120	
16.	Rental and/or lease of computers, motor vehicles, machine	4140	
17.	Repair and maintenance to buildings, motor vehicles, mac (include janitorial service, snow removal)	4175	
	Financial service fees and other banking charges (include	4325	
19.	Insurance premiums (include liability, business interruptio insurance)	n insurance, motor vehicle	4350
20.	Advertising and promotion expenses		4365
21.	Travel, meal and entertainment expenses		4370
22.	Property and business taxes, licences and permits		4410
23.	Royalties and franchise fees		4440
24.	Depreciation and amortization		4520
25.	Management fees paid to head office and other business s management salaries)	support units (exclude	4555
26.	Interest expenses (e.g., interest on loans/mortgages)	4630	
27.	Write-offs, valuations, adjustments, capital losses		4349
28.	All other expenses. (Please specify major items):	4569	
	4561		
	4562		
_	4563		4699
29.	Total expenses (sum of 4, 7 and 8 to 28)		

ГI	ease report the avera	Number					
	Full-time (usually 30 hours or more per week)					6073	
	Part-time (usually les	6076					
	Number of working o	6079					
L	Number of working owners or partners of unincorporated businesses (non-salaried)						
_	Provincial Distrib	oution				\wedge	
. Are you reporting for food service and drinking place operations located in more than one province? No → If no, please go to Section J. If yes, report the following items by province of operation.							
	Please indicate if you a	re reporting in:	9967 1	\$ or ² \(\square\$	% () \rightarrow		
	Province/Territory	Total Operating Revenue (Section F, question 14)	Total Cost of Goods Sold (Section G, question 4)	Total Labour Remuneration (Section G, question 7)	Depreciation and Amortization (Section G, question 24)	Total Expenses (Section G, question 29)	
	Newfoundland and Labrador	4824	4825	4826	4827	4927	
	Prince Edward Island	4829	4830	4831	4832	4932	
	Nova Scotia	4834	4835	4836	4837	4937	
	New Brunswick	4839	4840	, 4841	4842	4942	
	Quebec	4844	4845	4846	4847	4947	
	Ontario	4849	4850	4851	4852	4952	
	Manitoba	4854	4855	4856	4857	4957	
	Saskatchewan	4859	4860	4861	4862	4962	
	Alberta	4864	4865	4866	4867	4967	
	British Columbia	4869	4870	4871	4872	4972	
	Yukon	4874	4875	4876	4877	4977	
	Northwest Territories	4879	4880	4881	4882	4982	
	Nunavut	4884	4885	4886	4887	4987	
	Canada Totals	4889	4890	4891	4892	4992	

J - Certification							
I certify that the information contained herein is o	omplete and co	rrect to th	ne best of my knowledge.				
Signature of authorized person	Title			0015 Date			
	0014			Year Month Day			
Name of person to contact for further 0013 information		1 1 1 1					
	t name						
$1 \bigcirc Mr.$ $2 \bigcirc Mrs.$ $3 \bigcirc Miss$ $4 \bigcirc Ms.$ 0054		1 1 1 1					
<u> </u>	t name						
E-mail address:		Web site	address:				
0018		0020	\wedge				
Telephone number:	Extension:		Fax number:				
0017 ()	0027		0016 ()	$\searrow \lor$			
			0040 1-1112	int			
			9910 hour(s) 9909	minutes			
How long did you spend collecting the data and comp	leting this questi	onnaire?					
K - Comments		^ (
We invite your comments below. If necessary comments with the intent to improve the surve		a separa	te page. Please be assu	red that we review all			
comments with the intent to improve the surve	y.						
9920		0/					
	\mathcal{A}						
9913							
(L)							
9914							
9915							
9916							
Thank you for completing this qu	uestionnaire	. Pleas	se retain a copy for	vour records.			
Statistics Cana	ada's publicatio						

Statistics Canada's publications are available for use in Statistics Canada's regional offices and all major libraries. As well, please visit our Web site at www.statcan.ca

If you need help, please contact us at 1 888 881-3666.