



Unified Enterprise Survey - Annual

2000 Survey of the Food Services and Drinking Places Industry

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 appeler sans frais au numéro de téléphone suivant : 1 888 881-3666.

For Information Only

Correct pre-printed information if necessary using the corresponding boxes below:

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

A - Introduction

Survey Purpose

This survey collects the financial and operating data needed to produce statistics concerning your industry. For more information on survey purpose, please consult the enclosed booklet entitled "Statistics Canada Business Surveys".

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**, used for statistical purposes and published in aggregate form only. The confidentiality provisions of the *Statistics Act* are not affected by either the *Access to Information Act* or any other legislation.

Please return the completed questionnaire(s) in the enclosed envelope **within 30 days** of receipt. The questionnaire(s) can also be faxed back to Statistics Canada at **1 888 883-7999**. Thank you.

If you need further information or help, please call 1 888 881-3666.

Name of the primary person completing this questionnaire:		0013	[Grid for name]		
0026	<input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Miss <input type="radio"/> Ms.	0054	[Grid for name]		
Title:		0014	E-mail address:		0018
Telephone number:		0017	Extension:		0027
Fax number:		0016	Date completed:		0015
Signature:		I certify that the information contained herein is complete and correct to the best of my knowledge.			

Business Unit Organization

1. 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

Main Business Activity

Please check the **main** activity, at this business unit, which most accurately describes the **principal** source of operating revenue.

Please check **one** only.

1. 0430 **Full-Service Restaurant**

An establishment where patrons order while seated (e.g., fine dining).

0431 **Limited Service Eating Place**

An establishment where patrons order or select food or beverages at a counter, food bar, public cafeteria and/or order by phone.

0432 **Food Service Contractor**

An establishment primarily engaged in supplying food services under contract for a specific period of time (e.g., to airlines, institutions and government).

0433 **Caterer**

An establishment primarily engaged in providing food services for social events such as parties, weddings or receptions and business events.

0434 **Mobile Food Service**

An establishment primarily engaged in preparing and serving food and beverages for immediate consumption from motorized vehicles or non-motorized carts.

0435 **Drinking Places**

An establishment engaged in preparing and serving alcoholic beverages and limited food services for immediate consumption (e.g., bars, taverns, pubs, night-clubs). Also includes bars operating video gaming or other gambling machines.

2. 0040 **None of the above**

Please list the main activities of this business unit and indicate the estimated percentage of total operating revenue associated with each one:

0041

Note:

If you responded "None of the above", please call 1 888 881-3666 for further instructions.

B - Revenue

Please include:

- all Canadian revenue (including electronic commerce) recorded in your accounts for sales or transfers to other businesses and to other units of your business;
- all revenue (including electronic commerce) received from outside Canada by this business unit.

Please exclude:

- federal or provincial sales taxes collected for remittance to a government agency.

		\$ CDN
		1414
1. Total alcoholic beverages (include drinks served with meals)		1446
2. Total food and non-alcoholic beverage service (exclude alcohol and report it at question 1 above)		2028
3. Total sales of all merchandise (e.g., gifts, newspapers, cigarettes)		2077
4. All other operating revenue (e.g., cover charges, hall rentals, net gambling commissions from Video Lottery Terminals)		
Please name major items:	2071	
	2072	
	2073	
		2080
5. Total operating revenue (add amounts reported at questions 1 to 4 above)		

C - Cost of Goods Sold

		\$ CDN
1. Cost of goods sold		5721
(Value of total purchases plus total opening inventories minus total closing inventory)		

D - Expenses

Please include: • all expenses (including electronic commerce) within or outside Canada recorded by this business unit.

Please exclude: • GST/HST and TVQ (Quebec).

Labour Remuneration

	\$ CDN
1. Wages and salaries paid to employees for whom you issued a T4 - Statement of Remuneration Paid form, (include vacation pay, bonuses and commissions).	3010
2. Employer portion of employee benefits paid for all employees for whom you issued a T4 - Statement of Remuneration Paid form, (include employer contributions to pension, medical/life insurance plans, employment insurance and workers' compensation).	3040
3. Total labour remuneration (add amounts reported at questions 1 and 2 above)	3041

Other Operating Expenses

	\$ CDN
4. Materials and supply expenses (e.g., bar supplies, cleaning supplies, plastic utensils, food containers) Exclude: • the cost of food, alcoholic and non-alcoholic beverages, and merchandise (for resale). Please report these items in Section C - Cost of Goods Sold.	3420
5. Depreciation and amortization (including this business unit's assets and capital lease obligations, e.g., vehicles, buildings, equipment)	4520
6. All other operating expenses Please include for example: <ul style="list-style-type: none"> • purchased energy and water expenses; • franchise fees; • management fees or any other service fees (e.g., legal, advertising, insurance) paid to head office and other business support units (e.g., warehouses, sales centres, trucking facilities); • bad debt expenses; • purchased service expenses; • other miscellaneous operating expenses. 	4569
7. Total operating expenses (add amounts reported at questions 3 to 6 above) Exclude all interest expenses. EXCLUDE COST OF GOODS SOLD.	4598

E - Employment Characteristics

Paid Employees

Please report the average **number** of people employed during the reporting period. Employees are defined as those workers for whom you completed a Canada Customs and Revenue Agency (formerly Revenue Canada)

T4 - Statement of Remuneration Paid form.

Include full-time, part-time and temporary employees and employees absent with pay.

Do not include contract workers who are not part of your payroll.

	Number
1. Full-time employees (usually 30 hours or more per week)	6073
2. Part-time employees (usually less than 30 hours per week)	6076
3. Number of working owners or partners of unincorporated businesses	6079

F - Comments

1. How long did you spend collecting the data and completing this form? hours

2. Comments?

We invite your comments on the following topics or any others related to our business survey program. We appreciate your assistance.

- events that may have caused significant changes in your reported values from the previous year
- questionnaire content
- new questions of interest to your industry
- questionnaire language
- use of business terminology
- clarity of questions (e.g., definitions, examples of inclusions and exclusions, code sheets, instruction sheets, reporting guides)
- order and flow of questions
- timing of receipt of questionnaire and the period given for response
- other sources of data to further reduce response burden
- potential for electronic data reporting
- general (non-proprietary) business software packages in use

9920

Lost the return envelope?

Please telephone 1 888 881-3666 OR fax the questionnaire back to us at 1 888 883-7999
OR
mail your questionnaire to Statistics Canada, Operations and Integration Division,
120 Parkdale Ave., Ottawa, Ontario K1A 0T6



Thank you for your co-operation

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