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# 2005 Survey of Service Industries: Surveying and Mapping

This document is confidential when completed. Si vous préférez recevoir ce questionnaire en français, veuillez nous téléphoner au 1 888 881-3666.

f necessary, please correct pre-printed information below	f	necessary	please	correct	pre-printed	information	below
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	iecessai y, pieas	se correct pre-printed information below.							
1	Legal name			Address (number and street)					
2	Business name		0005	City					
1	Title of contact	FO		Province/ Territory or State					
,	First name of contact	FUI	0053	Country		0007	Postal code/ Zip code		
3	Last name of contact	INFORM		Language preference	1 English	1	2	French	

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.

# A - Introduction

### **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 reporting guide for details of these agreements.

### Confidentiality

The Statistics Act protects the confidentiality of information collected by Statistics Canada. Please see the enclosed reporting guide for more information.

### 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

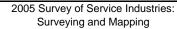
- Report for all operation(s) and/or location(s) pre-printed in the above address area. If it is not possible to report for the above business unit(s), please explain the reason(s) in the **Comments** section at the end of the questionnaire.
- When precise values are not available from your records,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

## Please return the questionnaire within 30 days.

Please mail the completed questionnaire in the enclosed envelope or fax it to Statistics Canada at 1 888 883-7999.

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

Statistics Statistique Canada Canada





В	- Main Business Activity								
1.	. Please describe the nature of your business.								
	0055								
2.	Please check the one main activity which most accurately represents your principal source of revenue.								
۷.	O247 Geophysical surveying and/or mapping services								
	Occuping and/or mapping services  Surveying and/or mapping (except geophysical) services								
	Exclusion  Business units primarily engaged in geophysical surveying activities in combination with other exploration								
	activities; business units primarily engaged in publishing atlases and maps or developing and/or publishing GIS software.								
	None of the above								
	If you checked, "None of the above", please call 1 888 881-3666 for further instructions.								
С	- Reporting Period Information								
1.	Please report information for your <u>fiscal year</u> (normal business year) ending between April 1, 2005 and								
	March 31, 2006. Please indicate below the period covered by this questionnaire.								
	YYYY MM DD YYYY MM DD 0011								
	From To To								
2.	If you <b>did not operate</b> this business unit for a <b>full year</b> , please check the reason(s) below:								
	0031 1 Seasonal 2 New 3 Change of 4 Change of 5 Ceased 6 Temporarily								
	operations business fiscal year ownership operations inactive								
	Please complete only the questions that are applicable to your business.								
	When precise values are not available from your records, estimates are acceptable.								
D	- Revenue								
1.	Sales (a detailed sales breakdown will be requested in <b>Section F</b> )								
	2068								
2.	Grants and subsidies								
3.	Royalties, rights, licensing and franchise fees								
4.	Investment income (dividends and interest)								
5.	Other revenue 2001 (please specify):								
6.	Total revenue (sum of questions 1 to 5)								

E	- Expenses		
		E	CAN\$
1.	Salaries and wages of employees who have been issued a T4 statement	3010	
2.	Employer portion of employee benefits ( <b>include</b> employer contributions to pension, medical/life insurance plans, employment insurance, etc.)	3040	
3.	Commissions paid to non-employees	4466	
4.	Professional and business service fees (e.g., legal, accounting)	4315	
5.	Outsourcing ( <b>include</b> work contracted out, freelancers, payments to personnel suppliers, etc.)	3060	
6.	Payments for services provided by your head office	4555	
7.	Cost of goods sold – <b>if applicable</b> (purchases <b>plus</b> opening inventory <b>minus</b> closing inventory)	5721	
8.	Office supplies	3301	
9.	Rental and leasing (include rental of premises, equipment, motor vehicles, etc.)	4115	
10.	Repair and maintenance ( <b>include</b> janitorial services, equipment, motor vehicles, etc.)	4178	
11.	Insurance (include professional liability, motor vehicles, etc.)	4350	
12.	Advertising, marketing and promotions (report charitable donations at question 22)	4365	
13.	Travel, meals and entertainment	4370	
14.	Utilities (include gas, heating, hydro, water)	4066	
15.	Telephone and other telecommunication expenses	4101	
16.	Property and business taxes, licences and permits	4410	
17.	Royalties, rights, licensing and franchise fees	4440	
18.	Delivery, warehousing, postage and courier	4179	
19.	Financial services fees (e.g., bank and credit card charges)	4325	
20.	Interest expenses	4630	
21.	Amortization of tangible and intangible assets	4520	
22.	Charitable donations	4521	
23.	Bad debts	4542	
24.	All other expenses 4531 (please specify):	4569	
25.	Total expenses (sum of questions 1 to 24)	4699	
26.	Corporate taxes (if applicable)	4600	
27.	Gains (losses) and other items ( <b>include</b> write-offs, foreign exchange, share of partnership income, etc.)	4601	
28.	Net profit/loss after tax and other items	2304	

F-	Industry Characteristics - Surveying and Mapping Services		
Ple	ase provide a breakdown of your sales.		
Ge	ophysical surveying and/or mapping services		CAN\$
1.	Geophysical (seismic and non-seismic) surveying (data acquisition, processing or interpretation)	2679	
2.	Geophysical mapping and cartography	2680	
3.	Geophysical consulting services	2751	
No	n-geophysical surveying and/or mapping services		
4.	Surveying (e.g., cadastral, land, hydrographic, topographic, engineering, marine)	2681	
5.	Mapping and cartography (e.g., photogrammetry, charting)	2682	
6.	Geodesy, navigation and positioning (including Global Positioning System)	2683	
7.	Remote sensing (e.g., airborne, satellite, radar, lidar)	2684	
8.	Geospatial data management (data archiving, storage, cataloguing and building databases)	2685	
9.	Surveying and mapping consulting services	2761	
10.	Development of customized geospatial software	2686	
11.	Other sales (please specify):	2558	
12.	Total sales (sum of questions 1 to 11)	2305	
G	- Personnel		
1.	Number of <b>non-salaried</b> partners and proprietors (if salaried, report only at question 2 below)  Number		
2.	Number of paid employees (based on year-end T4 payroll summaries)		
3.	Percentage of paid employees who worked <b>full-time</b>		
4.	Number of contract workers (for whom you did <b>not</b> issue a T4 such as freelancers and casual workers)  Sumber 6320		
5.	Number of volunteers (including unpaid interns and co-op students) during the reporting period 6014		
6.	Total number of hours worked by volunteers during the reporting period  Number of hours 6026	ırs	

# H - Sales by Type of Client Please provide a percentage breakdown of your sales by type of client. 1. Clients in Canada a) Businesses b) Individuals and households c) Governments and public institutions (e.g., hospitals, schools) 2. Clients outside Canada Total 100%

# I - Sales by Client Location

Please provide a percentage breakdown of your sales by client location (first point of sale).

			%
1.	Newfoundland and Labrador	8400	
2.	Prince Edward Island	8415	
3.	Nova Scotia	8405	
4.	New Brunswick	8410	
5.	Quebec	8420	
6.	Ontario	8425	
7.	Manitoba	8430	
8.	Saskatchewan	8435	
9.	Alberta	8440	
10.	British Columbia	8445	
11.	Yukon	8455	
12.	Northwest Territories	8451	
13.	Nunavut	8452	
14.	Clients outside Canada	8401	
	Total		100%

# J - International Transactions in Services

Complete this section only if you have purchased royalties, rights and/or services outside Canada (imports), or sold royalties, rights and/or services outside Canada (exports).

Please report in Canadian dollars.

<u>Note:</u> Services cover a variety of industrial, professional, trade and business services, as well as transactions in royalties and licences, but **exclude** imports and exports of goods.

		CAN	\$	CAN\$				
		Import of royalties services purchased		Export of royalties, services <b>sold</b> out				
		Royalties and rights	Other services	Royalties and rights	Other services			
1.	United States	0538	0548					
2.	Mexico 0510	0539	0549	0559				
3.	United Kingdom	0540	0550	0560				
4.	France 0512	0541	0551	0561				
5.	Other European Union countries <sup>1</sup>	0542	0552	0562				
6.	Africa 0597	0601	0605					
7.	Middle East countries <sup>2</sup>	0602	0606	0610				
8.	India 0599	0603	0607	0611				
9.	O514 China	0543	0553	0563				
10.	Japan 0515	0544	0554	0564				
11.	Other Asian Pacific countries <sup>3</sup>	0545	0555	0565				
12.	Australia/New Zealand	0604	0608	0612				
13.	All other countries 0517 (please specify): 0613	0546	0556	0566				
14.	Total	0547	0557	0567				

Other European Union countries (defined as Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, Finland, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, and Netherlands).

Middle East countries (defined as Armenia, Azerbaijan, Bahrain, Georgia, Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Oman, Palestinian Territory, Qatar, Saudi Arabia, Syrian Arab Republic, United Arab Emirates, and Yemen).

Other Asian Pacific countries (defined as Brunei Darussalam, Indonesia, Malaysia, Papua New Guinea, Philippines, Singapore, South Korea, Taiwan, Thailand, and Vietnam).

K - Not applicable									
L - Certification									
I certify that the information contained herein is complete and correct to the best of my knowledge.									
Signature of authorized person		Title 0014				(	YYYY	Date MM	
Name of person to contact for further information:	0013	First nan	ne						
<sup>1</sup> Mr. <sup>2</sup> Mrs. <sup>3</sup> Miss <sup>4</sup> Ms	0054	Last nam	ie						
E-mail address 0018			Web site address						
Telephone number 0017	Extens numbe				Fax number				
How long did you spend collecting the data and	completin	g this	questionnaire	?		9910	Hour(s)	9909	Minutes
M - Comments									
We invite your comments below. Please be assu	ured that v	ve rev	ew all comme	ents v	with the in	tent to in	nprove the su	ırvey.	
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