



Unified Enterprise Survey - Annual

# Capital and Repair Expenditures Actual 1998

**Deadline for receipt: June 11, 1999**

Collected under the Authority of the *Statistics Act*, Revised Statutes of Canada, 1985, Chapter S-19  
Completion of the questionnaire is a legal requirement under this Act  
Confidential when completed

Si vous préférez recevoir ce questionnaire en français, veuillez cocher ou téléphoner.

**FORM A8**



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

Legal Name _____	Mail Contact Name _____
Business Name _____	Title _____
Location _____	c/o _____
Principal Activity _____	Address _____
Type of Ownership (Please see Reporting Guide) _____	Telephone No. ( <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> )
	Fax Number ( <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> )
	<input type="checkbox"/> H.R.'d <input type="checkbox"/> SMO V. <input type="checkbox"/> Corr.

## A - Introduction

### SURVEY PURPOSE:

This survey collects data on capital and repair expenditures in Canada. The information is used by Federal and Provincial governments and agencies, trade associations, universities and international organizations for policy development and as a measure of regional activity.

### 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 without the previous written consent of that 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.

### Returning your questionnaire:

Please complete a questionnaire for the operation(s) and location(s) described on the address label above. You should only report for those operations located in Canada. Please send the completed questionnaire(s) in the enclosed envelope to **Investment and Capital Stock Division, Statistics Canada, Ottawa Ontario K1A 0T6**. If you wish to send the questionnaire by facsimile, please see Reporting Guide for details. Thank you.

**Do you have any questions?  
Do you need another questionnaire?**

**Please call (613) 951-9815 or 1-800-345-2294**

**Fax (613) 951-0196 or 1-800-606-5393**

### REPORTING PERIOD:

For the purpose of this survey, please report information for your **12 month fiscal period** for which the **FINAL DAY** occurs on or between January 1, 1998 and December 31, 1998.

**If your fiscal year ends in January, February or March, and you wish to provide information for your most recent fiscal year ending in early 1999, please do so. Please clearly indicate below the period covered by this report.**

From	YYYY	MM	DD	To	YYYY	MM	DD
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### DATA SHARING AGREEMENTS

To avoid duplicating survey activity, Statistics Canada has entered into agreements with provincial and territorial statistical agencies for the sharing of data. This is done in accordance with the Federal *Statistics Act* and corresponding provincial and territorial legislation. Details are outlined in the accompanying Reporting Guide. **Please note that Statistics Canada does not share any individual responses with Revenue Canada.**

Name of person completing this questionnaire: (please print)			
First Name		Family Name	
Title:			
Telephone No.	Ext.	Fax No.	Date completed:
Signature: _____			YYYY MM DD
I certify that the information contained herein is complete and correct to the best of my knowledge.			

5-4600-343.1: 1999-02-12 SQC/SCT-475-60186

**SECTION A: Capital and Repair Expenditures**

Asset Code	Actual 1998					Expected Useful Life of Assets in Column 2 and/or 4
	New Assets including All Imported (new & used)	Purchase of Used Canadian Assets	Renovation Retrofit Refurbishing Overhauling Rehabilitation	Total Capital Expenditures (sum of columns 2, 3 & 4)		
Columns (1)	(2)	(3)	(4)	(5)	(6)	
Land	100	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
Residential Construction	101	102	103	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
<b>NON-RESIDENTIAL CONSTRUCTION INCLUDE ADDITIONS TO WORK IN PROCESS</b>						
(thousands of dollars)						Years
111	112	113	114	115	116	
118	119	120	121	122	123	
125	126	127	128	129	130	
132	133	134	135	136	137	
139	140	141	142	143	144	
146	147	148	149	150	151	
153	154	155	156	157	158	
160	161	162	163	164	165	
167	168	169	170	171	172	
174	175	176	177	178	179	
181	182	183	184	185	186	
188	189	190	191	192	193	
195	196	197	198	199	200	
202	203	204	205	206	207	
209	210	211	212	213	214	
<b>Totals</b>	900	901	902	216	000.00	← <b>BOX A - Total Non-Residential Construction</b>
<b>MACHINERY AND EQUIPMENT INCLUDE ADDITIONS TO WORK IN PROCESS</b>						
(thousands of dollars)						Years
336	337	338	339	340	341	
343	344	345	346	347	348	
350	351	352	353	354	355	
357	358	359	360	361	362	
364	365	366	367	368	369	
371	372	373	374	375	376	
378	379	380	381	382	383	
385	386	387	388	389	390	
392	393	394	395	396	397	
399	400	401	402	403	404	
406	407	408	409	410	411	
413	414	415	416	417	418	
420	421	422	423	424	425	
427	428	429	430	431	432	
434	435	436	437	438	439	
441	442	443	444	445	446	
448	449	450	451	452	453	
455	456	457	458	459	460	
462	463	464	465	466	467	
469	470	471	472	473	474	
<b>TOTAL MACHINERY AND EQUIPMENT</b>				476	000.00	→ <b>BOX B</b> XXXXXXXXXXXXXXXXXXXX
If you were not able to provide a breakdown for columns 2, 3 and 4, and if box A and/or B is greater than zero, estimate percentage below.						
		New		Used Assets		Renovation
Non-Residential Construction	596	%	597	%	598	100%
Machinery and Equipment	599	%	600	%	601	100%

1. <b>NON-CAPITAL REPAIR AND MAINTENANCE EXPENDITURES</b>	Non-Residential Construction	602	000.00	Machinery and Equipment	603	000.00
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SECTION B: Disposals/Sales/Write-downs of Fixed Assets				
Asset Code	Selling Price	Gross Book Value	Age	
Columns (7)	(thousands of dollars)		Years (10)	
	(8)	(9)	(10)	
Land	604	733	XXXXXXXXXXXX	
Residential Construction	605	606	607	
	<b>Codes 1001 - 9999</b>	<b>Non-Residential Construction/Machinery and Equipment</b>		
611	612	613	614	
615	616	617	618	
619	620	621	622	
623	624	625	626	
627	628	629	630	
631	632	633	634	
635	636	637	638	
639	640	641	642	
643	644	645	646	
647	648	649	650	
<b>Box C Total (612, 616 ... 648)</b>	712	651	<b>Box D Total (613, 617 ... 649)</b>	
	000.00	000.00		

SECTION C: Reasons for Disposals	
	Disposals/Sales % of Box C or D <sup>1</sup>
	%
1. End of expected useful life . . . . .	752
2. Damaged or destroyed . . . . .	753
3. Outdated technology . . . . .	754
4. Energy inefficient . . . . .	755
5. Assets no longer needed (surplus)	756
6. Other (Specify major reason below) . . . . .	757
	<b>100%</b>

When both boxes C and D are reported, provide percentages based on the expenditures reported in Box D.

SECTION D: Analysis of Capital Expenditures		
(See Reporting Guide Page 1, Instruction 4)		
	Non-Residential Construction % of Box A	Machinery and Equipment % of Box B
	%	
1. Capacity expansion and/or new installation . . . . .	758	759
2. Replacement and/or modernization . . . . .	760	761
3. Pollution abatement and control . . . . .	762	763
4. Improvement to working environment (health, safety, security, etc.) . . . . .	764	765
5. Reduction of energy costs . . . . .	766	767
6. Other (specify major reasons) . . . . .	768	769
	<b>100%</b>	<b>100%</b>

SECTION E: Detail of Expenditures for Fixed Assets				
(See Reporting Guide, Page 3)				
If percentage or expenditure is zero for a question, please check the applicable zero box <input checked="" type="checkbox"/>				
	Non-Residential Construction	Machinery and Equipment		
	%			
1. What is the percentage of interest payments capitalized included in Section A, Column 5 - Box A and B? . . . . . (Not applicable to Government Departments)	772	Zero <input type="checkbox"/>	773	Zero <input type="checkbox"/>
2. What is the total dollar value of your work in progress at year end? . . . . .	770	Zero <input type="checkbox"/>	771	Zero <input type="checkbox"/>
3. What is the value of leases of new assets to others booked during the current year under a sales type or direct financing lease giving rise to a lease payments receivable or similar account on your books? . . . . .	861	Zero <input type="checkbox"/>	862	Zero <input type="checkbox"/>
4. What is the value of new assets capitalized by you and leased to others under an operating lease during the current year? . . . . .	863	Zero <input type="checkbox"/>	864	Zero <input type="checkbox"/>
5. Have you obtained new assets as a lessee under a capital lease during the current year? . . . . .	865	YES <input type="checkbox"/>	866	NO <input type="checkbox"/>

SECTION F: Changes in Capital Expenditure Plans		
As compared to the expenditures reported previously on the Preliminary Estimates 1998.		
	Non-Residential Construction Box A	Machinery and Equipment Box B
	(Please check appropriate box)	
1. Abandoned plans (indefinitely) . . . . .	(781) <input type="checkbox"/>	(782) <input type="checkbox"/>
2. Deferred plans to future year(s) . . . . .	(783) <input type="checkbox"/>	(784) <input type="checkbox"/>
3. Reduced the size of the currently planned project(s) . . . . .	(785) <input type="checkbox"/>	(786) <input type="checkbox"/>
4. Expanded the size of the currently planned project(s) . . . . .	(787) <input type="checkbox"/>	(788) <input type="checkbox"/>
5. Introduced additional project(s) into current plans . . . . .	(789) <input type="checkbox"/>	(790) <input type="checkbox"/>
6. Project(s) ahead of schedule or completed . . . . .	(791) <input type="checkbox"/>	(792) <input type="checkbox"/>
7. Project(s) behind schedule . . . . .	(793) <input type="checkbox"/>	(794) <input type="checkbox"/>
8. Better information or revised reporting procedures . . . . .	(795) <input type="checkbox"/>	(796) <input type="checkbox"/>
9. Other(s) . . . . .	(797) <input type="checkbox"/>	(798) <input type="checkbox"/>

**SECTION G: Costs Components of Expenditures, 1998**

From Section A, transfer total from columns	Amounts	Expenditures by company for work performed by contractors	Expenditures on own account work				
			Total amount of own-account work	Distribution of total amount by category of costs			
				Salaries and wages	Materials and supplies	Other charges	
(thousands of dollars)							
2	New construction assets including all imported (new & used)	720	721	722	723	724	725
3	Purchase of used Canadian construction assets	726	727	728	729	730	731
4	Renovation retrofit refurbishing overhauling rehabilitation	732	733	734	735	736	737
from Box 602	Non-capital repair and maintenance expenditures	738	739	740	741	742	743

**SECTION H: Capacity Utilization**

Section "H" (field 820) applies to organizations with manufacturing operations only.

For the year 1998, this plant operated at what percentage of its capacity? .....  %

Capacity is defined as maximum production attainable under normal conditions. With regard to normal conditions, please follow the company's operating practices with respect to the use of productive facilities, overtime, workshifts, holidays, etc... When any of your facilities permit the substitution of one product for another, use a product mix at capacity which is most similar to the composition of your 1998 output.

If this plant operated at less than capacity during 1998, what is the principal reason? (Please check the appropriate box)

insufficient orders (850) <input type="checkbox"/>	plant shutdown (e.g. upgrading, equipment failure) (854) <input type="checkbox"/>
insufficient labour available (851) <input type="checkbox"/>	startup of new operation (855) <input type="checkbox"/>
lack of materials or supplies (852) <input type="checkbox"/>	sufficient inventory on hand (856) <input type="checkbox"/>
strike or work stoppage (853) <input type="checkbox"/>	other reasons - specify _____ (857) <input type="checkbox"/>

If this plant operated at more than capacity during 1998, what is the principal reason? (Please check the appropriate box)

stronger demand for product (858) <input type="checkbox"/>	other reason - specify _____ (860) <input type="checkbox"/>
insufficient inventory on hand (859) <input type="checkbox"/>	

Name of **person** responsible for reporting capacity utilization (if different from name on page 1) (print or type) \_\_\_\_\_ Telephone number \_\_\_\_\_

If reporting expenditures for other asset groups (codes ending in 99) please describe:

Asset Code	Description of Asset	Asset Code	Description of Asset
9   9		9   9	
9   9		9   9	
9   9		9   9	
9   9		9   9	
9   9		9   9	
9   9		9   9	
9   9		9   9	
9   9		9   9	

**COMMENTS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature	Official position	Date of this report		
		D	M	Y
Business address (if different from mailing address)		Telephone number		

**THANK YOU FOR THE INFORMATION**