

**Annual Survey of Telecommunications
Service Providers, 1999****Wireline (S)**

Si vous préférez ce questionnaire
en français, veuillez appeler :
(613) 951-2201

Respondent company	<i>Please correct pre-printed label information, if necessary, using the corresponding boxes below:</i>	
	Legal Name	
	Operating or Trade Name (if different from legal name):	
	Mail contact person for this survey (please print clearly):	
	Job Title:	
	Street:	
	City:	
	Province:	Postal Code:
	Telephone:	Fax:
	E-mail:	Website:

Information for Respondents**Survey Objective**

This survey collects financial and operating data for the statistical measurement and analysis of the telecommunications industry (telecom carriage or resale). These data will be aggregated to produce estimates of national and provincial economic production in Canada as well as estimates of activity by industry. These estimates are used by government for national and regional programs and policy planning, by the private sector for industry performance measurement and market development and by the aforementioned parties, international telecommunications organizations, academics, analysts, and the general public to better understand this sector's role in the social and economic fabric of Canada. Selected results of this survey will be published in Statistics Canada Catalogue No. 56-203-XIB.

Authority

This survey 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.

Confidentiality

Statistics Canada is prohibited by law from publishing or releasing any statistics which would divulge information obtained from this survey relating to any identifiable business without the previous written consent of that business. **The data on this questionnaire will be treated in confidence, used for statistical purposes and published in aggregate form only.** The confidentiality provisions of the Statistics Act are not affected by the Access to Information Act or any other legislation. **Please note that Statistics Canada does not share any individual responses with Revenue Canada.**

Data Sharing Agreement

To reduce respondent burden and to ensure more uniform statistics, an agreement has been made under Section 11 of the Statistics Act to exchange information about the Quebec operations of survey respondents with Statistics Quebec. This statistical agency has been established under provincial legislation which provides substantially the same provisions for confidentiality and penalties for disclosure of confidential information as the federal Statistics Act. The legislation also provides this agency with the authority to collect this information on their own.

Reporting Period

This questionnaire should be completed for the fiscal year ended between April 1, 1999 and March 31, 2000.

Return Procedures

Please return the completed questionnaire(s) within **30 days** of receipt in the enclosed envelope or by facsimile to (613) 951-9920. If you anticipate difficulty in making this deadline, please inform Statistics Canada of your expected filing date.

Reporting Instructions

Please complete all questions that pertain to your operations; cross out cells or sections that do not apply to your company to reduce the likelihood of follow-up call-backs to verify missing information. Detailed instructions and definitions of terms used in the questionnaire are found in the Reporting Guide. Please refer to the Reporting Guide in order to ensure your responses are consistent with those provided by other respondents.

Assistance

If you require further assistance or need additional forms, please contact:

Telecommunications Section
Science, Innovation and Electronic Information Division
Statistics Canada
R.H. Coats Building, Floor 7
Ottawa, Ontario
Canada, K1A 0T6

**For service in English or French /
Pour un service en anglais ou en français:**

Michael Lynch
Phone/Téléphone: (613) 951-2201
Fax/Télocopieur: (613) 951-9920
E-mail/Courriel: michael.lynych@statcan.ca

For service in English:

Rad Joseph
Telephone: (613) 951-6830
Fax: (613) 951-9920
E-mail: robert.joseph@statcan.ca

Thank you for your co-operation

Respondent Information

100

A. Type of business organization:

- | | | |
|---|--|--|
| <input type="checkbox"/> A single corporation | <input type="checkbox"/> Consolidated family of corporations*
• complete the back page
• do not include foreign subsidiaries | <input type="checkbox"/> Part of a corporation
(e.g., branch, division) |
| <input type="checkbox"/> Provincial government system | <input type="checkbox"/> Municipal system | <input type="checkbox"/> Co-operative |
| <input type="checkbox"/> Sole proprietorship | <input type="checkbox"/> Joint venture | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Other (please specify) _____ | | |

* **Multiple Unit Reporting** - If you are including more than one legal or operating entity on a single questionnaire, please fill out **Information Concerning Consolidated Reporting** on the back of the questionnaire. Please see the Respondent Information section in the Reporting Guide for more information on multiple unit reporting. In general, if your organization operates distinct business units (a corporation or organizational unit) offering different telecommunications services (see Industry Classification section, Page iii) for which you maintain separate financial statements, please complete a questionnaire for each unit. For more forms, contact Statistics Canada at (613) 951-5948 or (613) 951-2201. **Do not consolidate foreign subsidiaries in this report.**

B. Foreign ownership:

- | | |
|--|--|
| a) What percentage of this company's common (voting) shares were foreign owned at year end? | 101
<input style="width: 50px;" type="text"/> % |
| b) If applicable, what percentage of this company's parent company's shares were foreign owned at year end? | 102
<input style="width: 50px;" type="text"/> % |
| c) If known, what percentage of this company's common (voting) shares were ultimately foreign owned at year end? (e.g., through direct and/or indirect control by holding companies, parent companies, etc.) | 103
<input style="width: 50px;" type="text"/> % |

C. If your organization has undergone legal changes during its past fiscal year, or is reporting for other than a 12-month fiscal year, please check (✓) the appropriate box(es) below and provide a brief explanation and the date(s) of the event(s). If the legal change involved other companies, please provide their legal names:

- | | | | |
|---|--|---|---|
| 201
<input type="checkbox"/> New business | 202
<input checked="" type="checkbox"/> Ceased operations | 203
<input type="checkbox"/> Change of ownership | 204
<input type="checkbox"/> Merger/Amalgamation/Split-up/Spin-off |
| 205
<input type="checkbox"/> Other (Please describe - attach additional pages if necessary). ➤ _____ | | | |

300

D. Please enter your nine digit GST Registered Account/Business Number:

--	--	--	--	--	--	--	--	--

E. Reporting period:

This questionnaire should be completed for the fiscal period ending between April 1, 1999 and March 31, 2000.

From: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td> <td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td> <td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td> </tr> </table>	Y	Y	Y	Y	M	M	D	D	To: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td> <td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td> <td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td> </tr> </table>	Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D										
Y	Y	Y	Y	M	M	D	D										

Telecommunications Industry Classification

400

A. Please indicate (✓) which of the following account for more than 50 percent of your operating revenues:
(check one only)

- Facilities-based telecommunications services (see B. below) Reselling of telecommunications services
- Non-telecommunications activity (Please describe your main revenue activities and return this form in the envelope provided)

➤ _____

B. Please indicate (✓) the telecommunications services provided:

Telecommunications service	Facilities-based* 401	Reseller 402
Wireline Telecommunications	<input type="checkbox"/>	<input type="checkbox"/>
Competitive Pay Telephone Service (CPTS)	<input type="checkbox"/>	<input type="checkbox"/>
Cellular/PCS/ESMR	<input type="checkbox"/>	<input type="checkbox"/>
RCC (Radio Common Carriage)	<input type="checkbox"/>	<input type="checkbox"/>
Paging, Narrowband PCS	<input type="checkbox"/>	<input type="checkbox"/>
Wireless Broadband	<input type="checkbox"/>	<input type="checkbox"/>
Fixed Wireless	<input type="checkbox"/>	<input type="checkbox"/>
Satellite (Fixed)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Satellite (Mobile)	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please specify) ➤	<input type="checkbox"/>	<input type="checkbox"/>

Complete this questionnaire if you provide facilities-based* wireline services. Resellers (including CPTS resellers) should contact Statistics Canada for the Reseller/CPTS Reseller questionnaire.

Contact Statistics Canada for the appropriate Wireless Telecommunications questionnaire if more than half of your revenues are from the services listed here.

* ownership of transmission facilities (wire, cable, radio, optical or other electromagnetic system), other than switching equipment.

C. Please check (✓) all areas of operation (areas where respondent has employees):

- 501 502 503 504 505 506 507 508 509 510 511 512 513
 B.C. Alta. Sask. Man. Ont. Que. N.B. N.S. P.E.I. Nfld. Y.T. N.W.T. Nvt.

➔ Please complete the appendix if more than one box is checked in question C.

Follow-up Contacts

Additional person(s) to contact for follow-up information: (Please print)

Contact Module(s):

Contact telephone number(s):

Certification

Please print the name of the person responsible for this return:

Signature:

I certify that the information provided in this report is complete to the best of my knowledge.

Title of signator:

Date completed:

| | | | | | | | | | | | | | |
 Y Y Y Y M M D D

MODULE 1. OPERATING REVENUES

Telecommunications Operating Revenues

Total
(thousands of dollars)

Wholesale (Carrier) Services and Transfers:
(revenues from other telecom service providers for (re)sale to end users)

A. Contribution receipts	1003	
B. Interconnection/settlements receipts	1006	
C. Circuit / line rentals	1010	
D. Wholesale minutes	1305	
E. Other (Please specify) ➤	1013	
Total - Wholesale (Carrier) Services		1014

Retail Services:
(revenues from end users)

A. Local telephony:		
1. Fixed rate and measured services	1017	
2. Pay phones	1018	
3. Other (Please specify) ➤	1021	
Total - Local telephony		1022
B. Long distance telephony:		
1. Outbound services	1031	
2. Inbound service (toll free, 1-8xx, etc.)	1034	
3. Pay phones	1035	
4. Other (Please specify) ➤	1038	
Total - Long distance telephony		1039
C. High speed circuit switched		1400
D. Packet-switched (report retail Internet activity in 'Non-Telecom Operating Revenues')		1401
E. Non-switched (private line services)		1402
F. Calling Features		1054
G. Connection (activation-deactivation, one-time charges)		1057
H. Other Telecommunications Revenue:		1060
1. (Please specify) ➤		1063
2. (Please specify) ➤		1066
3. (Please specify) ➤		1069
4. Residual		1306
Total - Retail Services <i>(sum of cells 1022, 1039, 1400, 1401, 1402, 1054, 1057, 1060, 1063, 1066 and 1069)</i>		1070
Total - Telecommunications Operating Revenues <i>(sum of bolded cells)</i>		1070 (1014 + 1306)

	Residential (#)	Business (#)	Total (#)
Telecom Customer Accounts <i>(at year end)</i>	1071	1072	1073

MODULE 1. OPERATING REVENUES — Continued

Non-Telecommunications Operating Revenues	Total (thousands of dollars)
A. Sale of Telecommunications Goods <i>(Please specify)</i> ➤	1079
B. Retail Internet Access	1085
C. Late Payment and Related Charges	1302
D. Other Non-Telecommunications Operating Revenue:	
1. <i>(Please specify)</i> ➤	1094
2. <i>(Please specify)</i> ➤	1097
3. Residual	1100
Total - Non-Telecommunications Operating Revenues <i>(sum of cells 1079, 1085, 1302, 1094, 1097 and 1100)</i>	1101
TOTAL - OPERATING REVENUES	1102 (1079 + 1302 + 1101)

Distribution of Operating Revenues by Type of Customer	Percentage
A. Customers in Canada:	1103
1. Residential <i>(individuals and households)</i>	
2. Business and other:	
a) Public institutions <i>(e.g., hospitals, schools, universities)</i>	1104
b) Government <i>(e.g., federal, provincial, territorial, municipal)</i>	1105
c) Business:	
Financial <i>(banks, trust cos., financial crown corporations)</i>	1106
Other <i>(Please specify)</i> ➤	1107
Total - Business	1108
Total - Business and other	1109
B. Customers outside Canada <i>(exports)</i>	1110
TOTAL - OPERATING REVENUES <i>(bolded cells sum to 100%, = cell 1102, page 2)</i>	(1103 + 1109 + 1110) 100%

MODULE 2. OPERATING EXPENSES

* Estimate the \$ 000's or % of the total expense paid to incumbent and entrant telecom companies. Incumbent telecommunications companies are listed in the Reporting Guide. ** \$ 000's or % of the amount reported in the adjacent cell in col. 3.	Purchases*		Total (thousands of dollars)	Salaries, wages and benefits** <input type="checkbox"/> (\$ 000's) or <input type="checkbox"/> (%) of col. 3
	<input type="checkbox"/> (\$ 000's) or <input type="checkbox"/> (%) of Total			
	Telecommunications service providers			
	Incumbents	Entrants		
	1	2	3	4

Telecommunications Operating Expenses				
A. Telecom Network Expenses:				
			2001	2002
1. Network operations				
2. Depreciation			2003	
3. Maintenance and repairs			2004	2005
4. Wireline circuit rentals	2006	2007	2008	
5. Purchased long-distance services	2011	2012	2013	
6. Contribution payments <i>(to the CFA or other providers)</i>			2014	
7. Interconnection/settlement payments			2015	
8. Residual <i>(please specify large amounts)</i>			2070	2071

MODULE 2. OPERATING EXPENSES — Concluded

Telecommunications Operating Expenses — <i>continued</i>	Total	Salaries, wages and benefits**
	(thousands of dollars)	<input type="checkbox"/> (\$ 000's) or <input type="checkbox"/> (%) of col. 3
B. Commercial and Administrative Expenses:	3	4
1. Selling and marketing	2016	2017
2. Customer servicing	2062	2063
3. Billings and collections	2020	2021
4. Corporate administration and general office expenses	2022	2023
5. Advertising and related services <i>(purchased)</i>	2018	
6. Professional and business fees <i>(purchased legal, accounting, auditing, consulting services, etc.)</i>	2027	
7. Management fees paid to head office or parent company	2028	
8. Amortization charges	2029	
9. Depreciation	2030	
10. Bad debts expenses	2034	
Permits and indirect taxes	2037	
11. <i>(do not include income taxes, report property taxes in '12. Other expenses', below)</i>		
12. Other expenses:		
a) <i>(Please specify)</i> ➤	2041	
b) <i>(Please specify)</i> ➤	2042	
c) <i>(Please specify)</i> ➤	2043	
d) Residual expenses	2044	2045
C. Land and buildings rentals <i>(Network or Commercial)</i>	2038	
Total - Telecommunications Operating Expenses <i>(sum of each column)</i>	2046	2047
Non-Telecommunications Operating Expenses		
A. Cost of Telecommunications Goods Sold	2049	
B. Retail Internet	2051	
C. Residual Expenses <i>(Please specify)</i> ➤	2054	
Total - Non-Telecommunications Operating Expenses	2056 (2049 + 2051 + 2054)	2055
TOTAL - OPERATING EXPENSES	2057 (2046 + 2056)	2058 (2047 + 2055) (= cell 6003, p.5)

MODULE 3. INCOME STATEMENT

		Total (thousands of dollars)
A. Total Operating Revenues	3001 (=1102, p.2)	
B. Total Operating Expenses	3002 (=2057, p.3) ()	
Operating Income (Loss)		3003
C. Non-Operating Revenues and Expenses (report expense items in brackets):		
1. Investment income (interest, dividends, joint venture and minority interest, etc.)	3004	
2. Net gains (losses) on sale of assets (fixed, intangible and investments), and foreign exchange	3005	
3. Interest expenses:		
a) on short term debt	3009	
b) on long term debt	3010	
Total - Interest expenses	3011 ()	
4. Write-offs and valuation adjustments (not part of C.5)	3018 ()	
5. Other (e.g., extraordinary and other gains and losses or revenues and expenses n.e.c.)	3019	
Total - Non-Operating Revenues and Expenses		3020
D. Income Taxes:		
1. Deferred	3014	
2. Current	3015	
Total - Income Taxes		3016 ()
NET INCOME (LOSS)		3017 (3003 + 3020 + 3016)

MODULE 4. BALANCE SHEET

Assets	Historical Cost	Accumulated depreciation	Net Book Value (thousands of dollars)
A. Current Assets			4010
B. Fixed Assets (property, plant and equipment)			4011
1. Land	4014	4015	4016
2. Buildings		()	
3. Network infrastructure	4028	4029	4030
4. Other fixed assets	4035	4036	4037
Total - Fixed Assets (sum of 'Net Book Value column,' cells 4011, 4016, 4030 and 4037)			4038
C. Financial Investments			4041
D. Deferred Charges			4042
E. Other			4043
Total - Assets (sum of bolded cells)			4044

MODULE 4. BALANCE SHEET — Concluded

Liabilities	Historical Cost		Net Book Value (thousands of dollars)
A. Current Liabilities			
B. Long-term Liabilities:			
1. Long-term debt		4053	
Supplementary question: (amount of long-term debt that is non-interest bearing): \$		4072	
2. Residual		4076	
Total - Long-term Liabilities			4056
Total - Liabilities			4057 (4049 + 4056)
Shareholders' Equity			
A. Share capital	4058 preferred	4059 common	4060 (4058 + 4059)
B. Retained earnings:			
1. Opening balance (previous period closing balance)			4061
2. Net income or (loss) for the reporting period (cell 3017, page 4)			4062
3. Dividends declared	4063 preferred	4064 common	4065 (4063 + 4064)
4. Other additions and deductions			4066
Total - Retained Earnings			4067
C. Other (Please specify) ➤			4068
Total - Shareholders' Equity			4069 (4060 + 4067 + 4068)
Total - Liabilities and Shareholders' Equity			4070 (4057 + 4069)

MODULE 5. CAPITAL EXPENDITURES

If you complete the 'Survey on Capital and Repair Expenditures' for each province you operate in, you may submit photocopies of this questionnaire instead of completing this module.

	(thousands of dollars)
Construction Expenditures	5009
Machinery and Equipment Expenditures	5018

MODULE 6. EMPLOYMENT

	Labour Costs			Employees
	(thousands of dollars)			(number of persons at year end)
	Salaries and wages	Fringe benefits	Total	Total
A. Expensed	6001	6002	6003 (= cell 2058, p.3)	
B. Capitalized	6004	6005	6006	
Total	6007	6008	6009 (6011 + 6013) (6003 + 6006)	6010 (6012 + 6014)
C. Full-time			6011	6012
D. Part-time			6013	6014

MODULE 7. INTERNATIONAL TRANSACTIONS IN COMMERCIAL SERVICES

	Receipts (exports)			Payments (imports)		
	USA	Other countries	Total	USA	Other countries	Total
	(thousands of Canadian dollars)			(thousands of Canadian dollars)		
A. Telecommunications Services Trade	7201	7202	7203	7204	7205	7206
B. Non-Telecommunications Services Trade	7031	7032	7033	7034	7035	7036
Total	7037	7038	7039	7040	7041	7042

MODULE 8. NETWORK INFRASTRUCTURE

A. PSTN Access Lines <i>(at year end)</i>	Owned by the respondent			Leased to the respondent for telecom carriage or resale Total (#)
	Class of customer		Total (#)	
	Residential (#)	Business and other (#)		
1. Individual	8001	8002	8003	8004
2. Multi-party	8005	8006	8007	8008
3. ISDN <i>(Integrated Services Digital Network):</i>				
a) BRA <i>(Basic Rate Access)</i>	8009	8010	8011	8012
b) PRA <i>(Primary Rate Access)</i>		8013	(=8013)	8015
4. Public telephones		8016	(=8016)	8018
5. Centrex		8019	(=8019)	8021
6. Official telephone lines		8090	(=8090)	
7. Other <i>(please specify)</i>	8022	8023	8024	8025
Total - PSTN Access Lines	8026	8027	8028	8029
B. PSTN Digitalization <i>(Owned PSTN access lines - from central office, wire centre, or head-end to subscriber premises - connected to digital or analogue switches):</i>				
1. Digital switch connections	8030	8031	8032	
a) Fibre/carryer lines	8033	8034	8035	
b) Metallic lines	8036	8037	8038	
2. Analogue switch connections	8039	8040	8041	
Total - Owned PSTN Access Lines	(8036 + 8039) (= cell 8026)	(8037 + 8040) (= cell 8027)	(8038 + 8041) (= cell 8028)	
C. PSTN Access Lines Churn <i>(Change in number of owned PSTN access lines during the year)</i>				
1. PSTN Access lines at previous year end	8042	8043	8044	
2. PSTN Access lines connected during the year	8045	8046	8047	
3. PSTN Access lines disconnected during the year	()	()	()	
Total - PSTN Access Lines (at year end) (1 + 2 + 3)	(= cell 8026)	(= cell 8027)	(= cell 8028)	

MODULE 8. NETWORK INFRASTRUCTURE — Continued

D. High Speed Access Through PSTN Lines <i>(Only count your subscribers - directly billed by you rather than by a subsidiary company or ISP division, etc. - who have DSL modems to enhance bandwidth capacity of the PSTN access line(s) you provide)</i>	Class of customer		Total (#)
	Residential (#)	Business and other (#)	
1. Wideband (> 64 kbps to 1.544 Mbps)	8081	8082	8083
2. Broadband (> 1.544 Mbps)	8084	8085	8086
Total - High speed Access	8087	8088	8089

E. Non -PSTN Lines <i>(at year end)</i>	Owned by the respondent (#)		Leased to the respondent for telecomm carriage or resale (#)	
	1. Analogue <i>(voice, sub-voice band)</i>	8051		8052
2. Digital:				
a) Narrowband <i>(to 64 kbps inclusive)</i>	8053		8054	
b) Wideband (> 64 Kbps, to 1.544 Mbps inclusive)	8055		8056	
c) Broadband (>1.544 Mbps, excluding xDSL)	8057		8058	
d) xDSL	8059		8060	
Total - Digital	8061		8062	
Total - Non-PSTN Lines	8063	(8051 + 8061)	8064	(8052 + 8062)

F. Wireline Network Kilometres	Route km (#)	Sheath km (#)	Conductor/fibre km (#)	Lit fibre km (#)
1. Metallic <i>(copper)</i> pairs	8065	8066	8067	
2. Metallic/coaxial cable	8068	8069	8070	
3. Optical fibre	8071	8072	8073	8074

Note: - cable containing metal and fibre is classified as fibre.
 - two fibre/cables sheaths extending 100 km along the same route and containing 10 fibres each would constitute 100 route km, 200 sheath km (100 route km x number of sheaths), and 2,000 fibre or strand km (sheath km x the number of fibres/strands in each sheath).

G. Microwave Radio Relay Systems	Route km (#)
	8075

H. Switches <i>(owned by respondent)</i>	Total (#)
1. Digital switches:	
a) ATM/IP	8076
b) Circuit switches <i>(e.g., DMS, ESS, - include PBX's used as public switches, do not count PC's)</i>	8077
Total - Digital	8078
2. Analogue switches	8079
Total - Switches	8080 (8078 + 8079)

MODULE 9. TRAFFIC STATISTICS

	Long distance conversation minutes			Long distance calls/messages		
	(thousands)			(thousands)		
	Residential	Business	Total	Residential	Business	Total
A. Outbound Calls/Messages,¹ Canada to:						
	9001	9002	9003	9004	9005	9006
1. Canada						
2. USA	9007	9008	9009	9010	9011	9012
3. Overseas	9013	9014	9015	9016	9017	9018
Total	9019	9020	9021	9022	9023	9024
B. International Incoming Calls/Messages,² to Canada from:						
	9025	9026	9027	9028	9029	9030
1. USA						
2. Overseas	9031	9032	9033	9034	9035	9036
Total	9037	9038	9039	9040	9041	9042
C. Transit Traffic Calls/Messages³						
			9043			
D. Inbound Toll (toll free, 1-8xx)⁴ Calling, to Canada from:						
	9044	9045	9046	9047	9048	9049
1. Canada						
2. USA	9050	9051	9052	9053	9054	9055
3. Overseas	9056	9057	9058	9059	9060	9061
Total	9062	9063	9064	9065	9066	9067

Notes:

- ¹ include originating calls (those that are placed by your customers).
- ² only include calls that you carry over an international gateway (and are terminated in Canada).
- ³ calls that neither originate nor terminate in Canada.
- ⁴ this is a subset to part A (Outbound calls/messages).

Comments

Information Concerning Consolidated Reporting

Please provide information related to subsidiaries and affiliates consolidated in this questionnaire.

Company 1

Legal Name

Operating Name or Trade Name (if different from legal name):

Street:

City:

Province:

Postal Code:

Telephone:

Fax:

E-mail:

A. Type of business organization:

- | | | |
|---|--|--|
| <input type="checkbox"/> A single corporation | <input type="checkbox"/> Consolidated family of corporations
(* do not include foreign companies) | <input type="checkbox"/> Part of a corporation
(e.g., branch, division) |
| <input type="checkbox"/> Provincial government system | <input type="checkbox"/> Municipal system | <input type="checkbox"/> Co-operative |
| <input type="checkbox"/> Joint venture | <input type="checkbox"/> Partnership | <input type="checkbox"/> Sole proprietor |
| | <input type="checkbox"/> Other (Please specify) > | |

B. Telecommunications Service:

	Facilities-based	Reselling
Wireline Telecommunications	401 <input type="checkbox"/>	402 <input type="checkbox"/>
Competitive Pay Telephone Service	419 <input type="checkbox"/>	420 <input type="checkbox"/>
Cellular/PCS/ESMR	403 <input type="checkbox"/>	404 <input type="checkbox"/>
RCC	405 <input type="checkbox"/>	406 <input type="checkbox"/>
Paging, Narrowband PCS	407 <input type="checkbox"/>	408 <input type="checkbox"/>
Wireless Broadband	409 <input type="checkbox"/>	410 <input type="checkbox"/>
Fixed Wireless	411 <input type="checkbox"/>	412 <input type="checkbox"/>
Satellite (Fixed)	413 <input type="checkbox"/>	414 <input type="checkbox"/>
Satellite (Mobile)	415 <input type="checkbox"/>	416 <input type="checkbox"/>
Other (Please specify)	417 <input type="checkbox"/>	418 <input type="checkbox"/>

C. A majority of this company's revenues are: **Facilities-based** ⁴⁰⁰ or **Reselling** ⁴⁰⁰
or Non-telecom (please specify) >

D. Nine-digit GST Registered Account/Business No.:

300

E. If known, what percentage of this company's common (voting) shares were ultimately foreign owned at year end? ¹⁰³ %

F. Please describe the company's relationship to the respondent company 600

Company 2

Legal Name

Operating Name or Trade Name (if different from legal name):

Street:

City:

Province:

Postal Code:

Telephone:

Fax:

E-mail:

A. Type of business organization:

- | | | |
|---|--|--|
| <input type="checkbox"/> A single corporation | <input type="checkbox"/> Consolidated family of corporations
(* do not include foreign companies) | <input type="checkbox"/> Part of a corporation
(e.g., branch, division) |
| <input type="checkbox"/> Provincial government system | <input type="checkbox"/> Municipal system | <input type="checkbox"/> Co-operative |
| <input type="checkbox"/> Joint venture | <input type="checkbox"/> Partnership | <input type="checkbox"/> Sole proprietor |
| | <input type="checkbox"/> Other (Please specify) > | |

B. Telecommunications Service:

	Facilities-based	Reselling
Wireline Telecommunications	401 <input type="checkbox"/>	402 <input type="checkbox"/>
Competitive Pay Telephone Service	419 <input type="checkbox"/>	420 <input type="checkbox"/>
Cellular/PCS/ESMR	403 <input type="checkbox"/>	404 <input type="checkbox"/>
RCC	405 <input type="checkbox"/>	406 <input type="checkbox"/>
Paging, Narrowband PCS	407 <input type="checkbox"/>	408 <input type="checkbox"/>
Wireless Broadband	409 <input type="checkbox"/>	410 <input type="checkbox"/>
Fixed Wireless	411 <input type="checkbox"/>	412 <input type="checkbox"/>
Satellite (Fixed)	413 <input type="checkbox"/>	414 <input type="checkbox"/>
Satellite (Mobile)	415 <input type="checkbox"/>	416 <input type="checkbox"/>
Other (Please specify)	417 <input type="checkbox"/>	418 <input type="checkbox"/>

C. A majority of this company's revenues are: **Facilities-based** ⁴⁰⁰ or **Reselling** ⁴⁰⁰
or Non-telecom (please specify) >

D. Nine-digit GST Registered Account/Business No.:

300

E. If known, what percentage of this company's common (voting) shares were ultimately foreign owned at year end? ¹⁰³ %

F. Please describe the company's relationship to the respondent company 600