



# Annual Survey of Telecommunications Service Providers, 1999

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

## Resellers, Competitive Pay Telephone Service Providers (CPTSP)

<b>Respondent company</b>	<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*<br>• complete the back page<br>• do not include foreign subsidiaries | <input type="checkbox"/> Part of a corporation<br>(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<br><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<br><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<br><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:**

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

300

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

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**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: 25px; text-align: center;">Y</td><td style="width: 25px; text-align: center;">Y</td><td style="width: 25px; text-align: center;">Y</td><td style="width: 25px; text-align: center;">Y</td> <td style="width: 25px; text-align: center;">M</td><td style="width: 25px; text-align: center;">M</td> <td style="width: 25px; text-align: center;">D</td><td style="width: 25px; 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: 25px; text-align: center;">Y</td><td style="width: 25px; text-align: center;">Y</td><td style="width: 25px; text-align: center;">Y</td><td style="width: 25px; text-align: center;">Y</td> <td style="width: 25px; text-align: center;">M</td><td style="width: 25px; text-align: center;">M</td> <td style="width: 25px; text-align: center;">D</td><td style="width: 25px; 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*	Reseller
Wireline Telecommunications	401 <input type="checkbox"/>	402 <input type="checkbox"/>
Competitive Pay Telephone Service (CPTS)	419 <input type="checkbox"/>	420 <input type="checkbox"/>
Cellular/PCS/ESMR	403 <input type="checkbox"/>	404 <input type="checkbox"/>
RCC (Radio Common Carriage)	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 checked="" type="checkbox"/>
Satellite (Mobile)	415 <input type="checkbox"/>	416 <input type="checkbox"/>
Other (Please specify) ➤	417 <input type="checkbox"/>	418 <input type="checkbox"/>

Complete this questionnaire if you do not own facilities-based wireline services, (e.g., resellers and CPTS providers). Companies that own facilities should contact Statistics Canada for the facilities-based Wireline 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
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**MODULE 1. OPERATING REVENUES**

**Telecommunications Operating Revenues**

**Total**  
(thousands of dollars)

**Wholesale (Carrier) Services**

*(revenues from other telecom service providers for (re)sale to end users)*

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

**Retail Services:**

*(revenues from end users)*

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

Residential (#)	Business (#)	Total (#)
1071	1072	1073

**Telecom Customer Accounts** *(at year end)*

**MODULE 1. OPERATING REVENUE — Concluded**

<b>Non-Telecommunications Operating Revenues</b>	<b>Total</b> (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 Revenues:	
1. <i>(Please specify)</i> ➤	1094
2. <i>(Please specify)</i> ➤	1097
3. Residual	1100
<b>Total - Non-Telecommunications Operating Revenues</b> <i>(sum of cells 1079, 1085, 1302, 1094, 1097 and 1100)</i>	1101
	1102 <i>(1070 + 1101)</i>
<b>TOTAL - OPERATING REVENUES</b> <i>(Telecom and Non-Telecom Services)</i>	

<b>Distribution of Operating Revenues by Type of Customer</b>	<b>Percentage</b>
A. Customers in Canada:	
1. Residential <i>(individuals and households)</i>	1103
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
<b>Total - Business</b>	1108
<b>Total - Business and other</b>	1109
<b>Total - Business and other</b>	1110
B. Customers outside Canada <i>(exports)</i>	
<b>TOTAL - OPERATING REVENUES</b> <i>(balded cells sum to 100%, = cell 1102, page 2)</i>	(1103 + 1109 + 1110) <b>100%</b>

**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.	<b>Purchases*</b>		<b>Total</b> (thousands of dollars)	<b>Salaries, wages and benefits**</b> <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

<b>Telecommunications Operating Expenses</b>				
<b>A. Telecom Network Expenses:</b>				
	2001		2002	
1. Network operations				
2. Depreciation	2003			
3. Maintenance and repairs	2004		2005	
4. Wireline circuit/line 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			2070	2071

**MODULE 2. OPERATING EXPENSES — Concluded**

* 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.	<b>Total</b>	<b>Salaries, wages and benefits**</b>
	(thousands of dollars)	<input type="checkbox"/> (\$ 000's) or <input type="checkbox"/> (%) of col. 3
	3	4

**Telecommunications Operating Expenses — continued**

<b>B. Commercial and Administrative Expenses:</b>	2016	2017
1. Selling and marketing		
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	2018	
6. Professional and business fees (purchased)	2027	
7. Management fees paid to head office or parent company	2028	
8. Amortization charges	2029	
9. Depreciation	2030	
10. Bad debts expenses	2034	
11. Permits and indirect taxes (do not include income taxes, report property taxes in C, below)	2037	
12. Other Expenses:		
a) (Please specify) ➤	2041	
b) (Please specify) ➤	2042	
c) (Please specify) ➤	2043	
d) Residual expenses	2044	2045
	2038	
<b>C. Land and buildings rentals (network or commercial)</b>		
	2046	2047
<b>Total - Telecommunications Operating Expenses (sum of each column)</b>		

**Non-Telecommunications Operating Expenses**

A. Cost of Telecommunications Goods Sold	2049	
B. Retail Internet	2051	
C. Residual Expenses (Please specify) ➤	2054	
	2056 (2049 + 2051 + 2054)	2055
<b>Total - Non-Telecommunications Operating Expenses</b>		

<b>TOTAL - OPERATING EXPENSES</b>	2057 (2046 + 2056)	2058 (2047 + 2055) (= cell 6003, p.5)
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**MODULE 3. INCOME STATEMENT**

		<b>Total</b> (thousands of dollars)
A. Total Operating Revenues	3001 (=1102, p.2)	
B. Total Operating Expenses	3002 (=2057, p.3) ( )	
<b>Operating Income (Loss)</b>		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	
<b>Total - Non-Operating Revenues and Expenses</b>		3020
D. Income Taxes:		
1. Deferred	3014	
2. Current	3015	
Total - Income Taxes	3016 ( )	
<b>NET INCOME (LOSS)</b> (sum of bolded cells)		3017 (3003 + 3020 + 3016)

**MODULE 4. BALANCE SHEET**

Assets	Historical Cost	Accumulated depreciation	Net Book Value (thousands of dollars)
<b>A. Current Assets</b>			4010
<b>B. Fixed Assets</b> (property, plant and equipment)			4011
1. Land	4014	4015	4016
2. Buildings	( )	( )	4030
3. Network infrastructure	4028	4029	4037
4. Other fixed assets	4035	4036	( )
<b>Total - Fixed Assets</b> (sum of 'Net Book Value column,' cells 4011, 4016, 4030 and 4037)			4038
<b>C. Financial Investments</b>			4041
<b>D. Deferred Charges</b>			4042
<b>E. Other</b>			4043
<b>Total - Assets</b> (sum of bolded cells)			4044 (= 4070, p.5)

**MODULE 4. BALANCE SHEET — Concluded**

	Historical Cost	Net Book Value (thousands of dollars)
<b>Liabilities</b>		4049
A. Current Liabilities		
B. Long-term Liabilities:		
1. Long-term debt	4053	
<i>Supplementary question:</i> (amount of long-term debt that is non-interest bearing):	4072 \$ _____	
2. Residual	4076	
Total - Long-term Liabilities		4056
<b>Total - Liabilities</b>		4057 (4049 + 4056)
<b>Shareholders' Equity</b>		
A. Share Capital	4058 preferred      4059 common	4060 (4058 + 4059)
B. Retained Earnings:		
a) Opening balance (previous period closing balance)		4061
b) Net income or (loss) for the reporting period (cell 3017, page 4)		4062
c) Dividends declared	4063 preferred      4064 common	4065 (4063 + 4064)
d) Other additions and deductions		4066
Total - Retained Earnings		4067
C. Other (Please specify) ➤		4068
<b>Total - Shareholders' Equity</b>		4069 (4060 + 4067 + 4068)
<b>Total - Liabilities and Shareholders' Equity</b>		4070 (4057 + 4069) (= 4044, p.4)

**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)
<b>Construction Expenditures</b>	5009
<b>Machinery and Equipment Expenditures</b>	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	
<b>Total</b>	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
<b>Total</b>	7037	7038	7039	7040	7041	7042

**MODULE 8. NETWORK INFRASTRUCTURE**

A. PSTN Access Lines (at year end)	Leased to the respondent for telecom carriage or resale Total (#)
1. Individual	8004
2. Multi-party	8008
3. ISDN (Integrated Services Digital Network):	
a) BRA (Basic Rate Access)	8012
b) PRA (Primary Rate Access)	8015
4. Public telephones	8018
5. Centrex	8021
6. Other (please specify)	8025
<b>Total - PSTN Access Lines</b>	8029

B. High Speed Access Through PSTN Lines <small>(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)</small>	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
<b>Total - High Speed Access</b>	8087	8088	8089

C. Non-PSTN Lines (at year end)	Leased to the respondent for telecom carriage or resale Total (#)
1. Analogue (voice, sub-voice band)	8052
2. Digital:	
a) Narrowband (to 64 kbps inclusive)	8054
b) Wideband (> 64 Kbps, to 1.544 Mbps inclusive)	8056
c) Broadband (>1.544 Mbps, excluding xDSL)	8058
d) xDSL	8060
Total - Digital	8062
<b>Total - Non-PSTN Lines</b>	8064

**MODULE 8. NETWORK INFRASTRUCTURE — Concluded**

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

**MODULE 9. TRAFFIC STATISTICS**

	Long distance conversation minutes			Long distance calls/messages		
	(thousands)			(thousands)		
	Residential	Business	Total	Residential	Business	Total
<b>Outbound Calls/Messages,<sup>1</sup> Canada to:</b>						
1. Canada	9001	9002	9003	9004	9005	9006
	9007	9008	9009	9010	9011	9012
2. USA						
	9013	9014	9015	9016	9017	9018
3. Overseas						
	9019	9020	9021	9022	9023	9024
<b>Total</b>						

<sup>1</sup> include originating calls (those that are placed by your customers).

**Comments**

For information

**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<br>(* do not include foreign companies) | <input type="checkbox"/> Part of a corporation<br>(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 <sup>400</sup> or  Reselling <sup>400</sup>  
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?** <sup>103</sup>  %

**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<br>(* do not include foreign companies) | <input type="checkbox"/> Part of a corporation<br>(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 <sup>400</sup> or  Reselling <sup>400</sup>  
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?** <sup>103</sup>  %

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