



Annual Survey of Consumer Goods Rental, 1999

▼ Reference number ▼

Authority

The survey is conducted under the authority of the Statistics Act, Revised Statutes of Canada, 1985, chapter S19.



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

| | | | | | |
|-----|---------------|-----|-------------------|-----|-------------------|
| 001 | Legal name | 004 | Number and street | | |
| 002 | Business name | 005 | City | 006 | Province or State |
| 003 | C/o | 053 | Country | 007 | Postal code |

Please read carefully before completing the questionnaire

Coverage

Please complete the questionnaire for the business unit(s) described in the pre-printed area above. For this purpose, a "business unit" is defined as the lowest level of the firm for which separate records are kept for such details as revenue, expenses and employment.

Survey Objective

The survey objective is the collection and publication of data necessary for the statistical analysis of the consumer goods rental industry. The information from the survey can be used by businesses and trade associations for market analysis and assessment of industry performance, operating characteristics and trends, by government to develop national and regional economic policies, by other users involved in research or policy making and by Statistics Canada for maintaining important data input to the preparation of the Canadian System of National Accounts.

Confidentiality

Statistics Canada is prohibited by law from publishing any statistics which would divulge information relating 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 by any other legislation.

Questions and Return Procedures

We ask that you complete and return questionnaire within 30 days of receipt to:

**Statistics Canada
Operations and Integration Division
2nd floor, Jean Talon Bldg, Ottawa, Ontario K1A 0T6**

This survey questionnaire can also be sent to Statistics Canada using the following facsimile communication: **1-888-605-2493**

Statistics Canada advises you that there could be a risk of disclosure during the facsimile communication process. However, upon receipt of your facsimile, Statistics Canada will provide the guaranteed level of protection afforded to all information collected under the authority of the Statistics Act.

If you have questions or require assistance in completing this questionnaire, please call our **toll free number: 1-800-916-9316** and a representative of Statistics Canada will gladly answer your queries.

Duplicate Questionnaires

If you receive more than one copy of this questionnaire for the same business, please complete the one that is correctly labelled and return it with the duplicate(s), writing "DUPLICATE" on the relevant form(s).

Note of Appreciation

Canada owes the success of its statistical system to a long-standing co-operation involving Statistics Canada, the citizens of Canada, its businesses, governments and other institutions. Accurate and timely statistical information could not be produced without their continued co-operation and goodwill.

1. Business Activity

- a) Please describe the nature of your firm's business activity in 1999: 021 _____
-
- b) Is this a change from the previous year? 022 1 Yes 3 No
 ↓
 If yes, please provide details in the "Comments" section on page 7.
- c) Please check (✓) below the one industry which most accurately describes your firm's principal source of operating revenue.
- 023 532210 Consumer Electronics and Appliance Rental
 (excluding computer rental or leasing)
- 532220 Formal Wear and Costume Rental
 (except linen and uniform supply)
- 532230 Video Tape and Disc Rental
- 532290 Other Consumer Goods Rental
 (eg. furniture rental centres, party supply centres,
 home health equipment rental centres,
 recreational goods rental centres)
- 532310 General Rental Centres
 (e.g. home repair tools, lawn/garden
 equipment; excludes heavy construction
 equipment rental)
- 032 None of the above
 (please specify)
- _____
- _____
- _____

2. Form of Organization

- a) Type of organization (please check **one** only):
- 027 1 Sole proprietorship 2 Partnership 3 Incorporated company 4 Co-operative
- 5 Joint venture 6 Government business entity 7 Government 8 Non-profit
- b) Is the sole purpose of this business unit to provide services to your parent company, an affiliated company or a professional practice?
 025 1 Yes – **If yes**, please name the company or professional practice 033 _____
 3 No
- c) Please enter your nine-digit Business Number (if incorporated)
 034 _____
- d) Is this business affiliated with a chain or franchise group?
 030 1 Yes (please provide name) 044 _____
 3 No
- e) Did this business unit participate in any joint venture(s) during the reporting period?
 A joint venture refers to a specific commercial undertaking entered into jointly by two or more parties or companies, who agree to contribute the necessary capital and share in profits or losses of the project in agreed proportions. The association terminates either upon completion of the undertaking or at a specific time.
 028 1 Yes – **If yes**, please go to f) 3 No – **If no**, please go to Question 3, Reporting Period
- f) Are detailed revenue and expenses for the business unit's share in the joint venture(s) included in this questionnaire?
 035 1 Yes 3 No
- g) Please provide the name of the joint venture. 036 _____
- h) Is this joint venture:
 037 1 Incorporated – **If incorporated**, please go to i) 3 Unincorporated – **If unincorporated**, please go to j)
- i) Business Number of joint venture (if incorporated) 038 _____
- j) If it is an unincorporated joint venture, please provide the length of time of the joint venture.
 039 Y Y Y Y M M D D 040 Y Y Y Y M M D D
 From _____ To _____
- k) Venture partner(s) and Business Number(s) (if incorporated)
- | Venture partner(s) | Business Number(s)
(if incorporated) |
|--------------------|---|
| 041 | 043 _____ |

If you participated in more than one joint venture or if more space is required, please enclose a separate page.

3. Reporting Period

Please report for the calendar year 1999 or for your most recent fiscal year ending no later than March 31, 2000.

This report covers no. of months ending

229

| | |
|--|--|
| | |
|--|--|

 231

| | | |
|------|----|----|
| YYYY | MM | DD |
| | | |

Period of Operation If you did not operate this business for a full year, please check (✓) the reason below:

235 Seasonal operation Ceased operation (please specify) 046 _____

New business in 1999 Temporarily closed (please specify) 047 _____

Change of fiscal year end

Change of ownership (please provide name and address of the other owner)

045 _____

Effective date of change 236

| | | |
|------|----|----|
| YYYY | MM | DD |
| | | |

Please report for your 1999 fiscal year, as reported in section 3, on page 3.

4. Revenue

- Please report all answers in **Canadian dollars**.
- Please **exclude** GST and all other taxes collected by you for remittance to a government agency.

| | Dollars (omit cents) |
|---|-------------------------|
| a) Rental and/or Leasing Revenue Report gross revenue generated from the rental and/or leasing of: audio-visual equipment; office furniture, vcr's, home appliances, consumer electronics and machinery, costumes and any household items. Exclude revenue from rental of real estate (see item (g) below). | 106 |
| b) Repair Revenue Include all revenue earned (labour charges) from repairs but exclude the charges for materials and parts used in these repairs and report them in item (d) as Sales of Merchandise | 102 |
| c) Miscellaneous Services Revenue Include revenue from all other services rendered. Exclude the charges for materials and parts used in repairs and report them in item (d) as Sales of Merchandise | 101 |
| d) Sales of Merchandise Include materials and/or parts charged to a customer in the performance of repairs or forming part of a service rendered. Sales of gasoline, oil and insurance which are part of a rental contract should be included here. Sales of cleaning materials, picture frames and all other items of a non-food or beverage nature must be included here. Report offsetting costs in section 5 (a). | 103 |
| e) Sales of Rental and/or Leased Equipment Loss or gain on the sales and/or disposal of previously rented and/or leased equipment. Value of sales (disposal value) of previously rented and/or leased equipment | 111 |
| 114 \$ _____ | |
| f) Commissions, Royalty Payments, Franchise Fees, Foreign Exchange and Management Fees | 107 |
| g) Other Operating Revenue e.g., revenue from rental of real estate, etc. (please specify) | 108 |
| 050 _____ | 115 |
| h) Total Operating Revenue (sum of items (a) to (g)) | 120 |
| i) Non-Operating Revenue Interest and all other revenue that is not directly related to the operation of this business. | 130 |
| j) Total Revenue (sum of items (h) and (i)) | |

5. Operating Expenses

- Please report all answers in **Canadian dollars**.
- Do not include capital expenditures.
- Please include GST, except the portion that is refundable by government.
- **If you prefer, you may attach a copy of your income statement and proceed to Section 6.**

| | Dollars (omit cents) |
|---|-------------------------|
| a) Cost of goods sold (purchases plus opening inventory minus closing inventory). Please exclude purchases for use in the business and for rental purposes (see item (s) below) | 159 |
| b) Salaries and wages paid to employees for whom you issued a T4 supplementary form; include vacation pay, bonuses and commissions | 160 |
| c) Employee benefits paid for all employees for whom you issued a T4 supplementary form; include employer's contributions to pension, medical/life, employment insurance and workers' compensation plans | 161 |
| d) Rent and/or lease of land and buildings | 162 |
| e) Rent and/or lease of motor vehicles | 163 |
| f) Computer services purchased (including equipment rental, data processing and software development) | 164 |
| g) Rent and/or lease of other machinery and equipment | 165 |
| h) Repairs and maintenance | 166 |
| i) Legal, accounting, management and consulting fees | 167 |
| j) Advertising and sales promotion | 168 |
| k) Insurance | 169 |
| l) Taxes, permits and licenses (exclude income taxes) | 170 |
| m) Heat, light, power and water | 171 |
| n) Telephone, telecommunications, postage and courier fees | 172 |
| o) Travel and entertainment | 173 |
| p) Royalties and franchise fees | 174 |
| q) Depreciation and amortization | 175 |
| r) Interest expense | 176 |
| s) Office and all other supplies and materials used in the business (exclude supplies reported under Cost of goods sold - item (a) above) | 177 |
| t) All other operating expenses, excluding bad debts . Include fees paid to contract workers. (<i>Please specify major items or attach a separate sheet.</i>) | 178 |
| 051 _____ | 179 |
| u) Total Operating Expenses (sum of items (a) to (t)) | |

6. Employment

a) Paid Employees

Please report the **average number** of persons employed during the reporting period to whom you paid Salaries and Wages as shown in Expenses, Section 5, item (b).

- i) **Full-time Employees** Regular employees who worked the standard work week as observed by the business
- ii) **Part-time Employees** Those who worked fewer than the standard work week hours observed by the business
- b) **Contract Workers** Individuals engaged only for the duration of a specific project or term
- c) **Working proprietors** and/or partners of **unincorporated** businesses

| Number |
|--------|
| 152 |
| 151 |
| 154 |
| 153 |

7. Client Base

Please report the percentage of total operating revenue (Section 4, item (h)) derived **directly** from:

1. Domestic Clients

Individuals

Business

- a) Retail Trade
- b) Traveller Accommodation and Food Services
- c) Wholesale Trade
- d) Agriculture, Forestry, Fishing and Mining
- e) Manufacturing
- f) Construction
- g) Transportation and warehousing
- h) Finance, Insurance and Real Estate
- i) Other (e.g. professional / scientific services, telecommunications, etc.) (please specify)
- 052

Institutions

- j) Educational Services
- k) Health Services
- l) Other institutional demand (please specify)
- 053

m) Government

2. Foreign Clients (regardless of type)

Total

(total of boxes 190 to 206 must equal 100%)

| Percentage |
|--------------|
| 190 |
| 191 |
| 192 |
| 193 |
| 194 |
| 195 |
| 196 |
| 197 |
| 199 |
| 200 |
| 202 |
| 203 |
| 204 |
| 205 |
| 206 |
| 207 |
| 100 % |

