



Service Industries Division

Annual Survey of Automotive Equipment Rental and Leasing, 2002

▼ Reference number ▼

Confidential when completed

Français au verso

Authority

The survey is conducted 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.

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

0001	Legal name	0004	Number and street		
0002	Business name	0005	City	0006	Province or State
0003	C/o	0053	Country	0007	Postal code

Confidential Only



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 automotive equipment rental and leasing. 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.

Data Sharing Agreements

In order to reduce response burden and to provide consistent statistics, Statistics Canada has entered into data sharing agreements with the statistical agencies of *Quebec*, *Manitoba* and *British Columbia* in accordance with Section 11 of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19. For business locations operated in *Quebec*, *Manitoba* and *British Columbia*, the agreements authorize Statistics Canada to forward a record of the data collected in this survey to the statistical agencies of these provinces. The Statistics Acts of these provinces include the same provisions for confidentiality and penalties for disclosure of information as the federal Statistics Act.

5-3300-11: 2002-06-18 STC/SER-425-75120

1. Business Activity

- a) Please describe the nature of your firm's business activity in 2002: 0141 _____
-
- b) Is this a change from the previous year? 0142 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.
- 532111 0113 Passenger Car Rental (*without driver*) 0040 None of the above
 (please specify)
- 532112 0114 Passenger Car Leasing (*without driver*).
 (Excludes establishments primarily engaged in
 retailing cars.) 0041 _____
- 532120 0115 Truck, Utility Trailer and RV (Recreational
 Vehicle) Rental and Leasing (*without driver*).
 (Excludes establishments primarily engaged in
 renting/leasing heavy equipment). (Includes
 renting/leasing modular space). _____
- 522220 0116 This business unit is engaged in sales financing
 as well as automotive equipment rental and
 leasing. _____

2. Form of Organization

- a) Type of organization (please check one only):
- 0024 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?
 0029 1 Yes – **If yes**, please name the company or professional practice 0030 _____
 3 No
- c) Please enter your nine-digit Business Number (if incorporated)
 0189 [][][][][][][][][][]
- d) Is this business affiliated with a chain or franchise group?
 0789 1 Yes (please provide name) 0790 _____
 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.
 0170 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?
 0171 1 Yes 3 No
- g) Please provide the name of the joint venture. 0180 _____
- h) Is this joint venture:
 0190 1 Incorporated – **If incorporated**, please go to i) 3 Unincorporated – **If unincorporated**, please go to j)
- i) Business Number of joint venture (if incorporated) 0179 [][][][][][][][][][]
- j) If it is an unincorporated joint venture, please provide the length of time of the joint venture.
 0191 YYYY MM DD 0192 YYYY MM DD
 From [][][][] To [][][][]
- k) Venture partner(s) and Business Number(s) (if incorporated)
- | Venture partner(s) | Business Number(s)
(if incorporated) |
|--------------------|---|
| 0181 | 0182 [][][][][][][][][][] |

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 information for your **fiscal year** (normal business year) ending between April 1, 2002 and March 31, 2003. Please indicate below the period covered by this questionnaire.

From 0011

YYYY	MM	DD

 To 0012

YYYY	MM	DD

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

0042 1 Seasonal operation 0035 5 Ceased operation (please specify) 0119 _____
 0032 2 New business in 2002 0036 6 Temporarily closed (please specify) 0049 _____
 0033 3 Change of fiscal year end
 0034 4 Change of ownership (please provide name and address of the other owner)
 0124 _____ Effective date of change ► 0125

YYYY	MM	DD

Please report for your 2002 fiscal year, as reported in section 3.

4.1 Revenue

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

a) Revenue from Rental and/or Operating Lease Agreements

- i) automobiles and passenger vans
- ii) trucks and commercial vans
- iii) recreational vehicles (e.g., motor homes, tent trailers)
- iv) other trailers
- v) other (e.g., buses, please specify). **Exclude** revenue from rental of real estate (see item (g) below).

b) Revenue from Capital Leases (i.e., leases that transfer the benefits/risks of ownership to the lessee; **include interest and principal**)

- i) automobiles and passenger vans
- ii) trucks and commercial vans
- iii) recreational vehicles (e.g., motor homes, tent trailers)
- iv) other trailers
- v) other (e.g., buses, please specify). **Exclude** revenue from rental of real estate (see item (g) below).

c) Sales of Merchandise

(e.g., new or used vehicles, oil, gasoline) including materials and parts charged to a customer in the performance of repairs. Charges for labour should be reported in 4.1 (e) Repair Revenue. Report sales and/or disposal of previously rented and/or leased equipment in 4.1 (f) below.

d) Insurance Revenue

(also include Collision Damage Waiver) Report commissions earned from the sale of insurance

e) Repair Revenue

(Exclude parts and materials charged to customers and report them in 4.1 (c) Sales of Merchandise.)

f) 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

g) Other Operating Revenue

e.g., revenue from rental of real estate, miscellaneous service revenue, etc. (Please specify)

h) Total Operating Revenue

(sum of items (a) to (g))

i) Non-Operating Revenue

Interest and all other revenue that is not directly related to the operation of this business.

j) Total Revenue

(sum of items (h) and (i))

	Dollars (omit cents)
2205	
2206	
2207	
2208	
2210	
1192	
1193	
1194	
1196	
1197	
2048	
2211	
2041	
2198	
2077	
2080	
2097	
2098	

4.2 Fixed Assets

Please report the total dollar value of leasing and/or rental equipment on your books at your 2002 year end.

Original cost

Total accumulated depreciation

Book value (Box 5131 minus Box 5132)

	Dollars (omit cents)
5131	
5132	
5133	

5. Operating Expenses

- Please report all answers in **Canadian dollars**.
- **Do not include capital expenditures.** (See section 4.2.)
- 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)	5721
b) Salaries and wages paid to employees for whom you issued a T4 supplementary form; include vacation pay, bonuses and commissions	3010
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	3040
d) Rent and/or lease of land and buildings	4120
e) Rent and/or lease of motor vehicles	4125
f) Computer services purchased (including equipment rental, data processing and software)	4233
g) Rent and/or lease of other machinery and equipment	4135
h) Repairs and maintenance	4175
i) Legal, accounting, management and consulting fees	4230
j) Advertising and sales promotion	4365
k) Insurance	4350
l) Taxes, permits and licenses (exclude income taxes)	4410
m) Heat, light, power and water	4042
n) Telephone, telecommunications, postage and courier fees	4102
o) Travel and entertainment	4370
p) Royalties and franchise fees	4440
q) Depreciation and amortization	4520
r) Interest expense and credit card fees	4629
s) Office and all other supplies and materials used in the business (exclude supplies reported under Cost of goods sold - item (a) above)	4000
t) Commission paid (include airport fees, travel agents' commissions)	4082
u) All other operating expenses, excluding bad debts , but including fees paid to contract workers. (Please specify major items or attach a separate sheet.)	4569
4561	
v) Total Operating Expenses (sum of items (a) to (u))	4599

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
6310
6311
6320
6321

7. Client Base

Please report the percentage of total operating revenue (Section 4.1, 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)

8172

Institutions

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

8124

m) Government

2. Foreign Clients (regardless of type)

Please report the percentage of foreign market revenue by region:

United States

Mexico

Central and South America

European Union

Other Europe

Africa

Middle East

Asia

Australia, New Zealand

Other

Total (total of boxes 8100 to 8476 must equal 100%)

Percentage

8100
8116
8103
8117
8104
8163
8165
8105
8106
8115
8121
8122
8123
8130
8465
8470
8462
8477
8463
8464
8466
8471
8467
8476
100%

8. Provincial/Territorial Distribution

- Please report all answers in **Canadian dollars**
 - "Business unit" is defined as the lowest level of the firm for which separate records are kept for such details as revenues, expenses and employment.
- a) Please report the number of permanent business units operated in Canada during the reporting period.

Number
5001

- b) Do you have permanent business units in **more** than one province or territory?

9966 3 No – Please go to Section 9

1 Yes – Please complete 8 (c)



- c) Please report the following data for the provinces or territories in which you have units.

Province or Territory	Business Units (Number)	Total Revenue \$ (omit cents)	Salaries, Wages and Employee Benefits \$ (omit cents)	Employees (Number)	Total Operating Expenses \$ (omit cents)
Nfld.Lab.	5002	4824	4826	6225	4925
P.E.I.	5003	4829	4831	6230	4930
N.S.	5004	4834	4836	6235	4935
N.B.	5005	4839	4841	6240	4940
Que.	5006	4844	4846	6245	4945
Ont.	5007	4849	4851	6250	4950
Man.	5008	4854	4856	6255	4955
Sask.	5009	4859	4861	6260	4960
Alta.	5010	4864	4866	6265	4965
B.C.	5011	4869	4871	6270	4970
Nunavut	5012	4884	4886	6275	4975
N.W.T.	5013	4879	4881	6280	4980
Yukon	5014	4874	4876	6285	4985
Total	5015	4889	4891	6290	4990

Should equal Box 5001, Section 8	Should equal Box 2098, Section 4.1	Should equal the sum of Boxes 3010 and 3040, Section 5	Should equal the sum of Boxes 6310 and 6311, Section 6	Should equal Box 4599, Section 5
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9. Certification

I certify that the information contained herein is complete and correct to the best of my knowledge.

Signature of authorized person	Title 0014	Date 0015		
		Year	Month	Day

Name of person to contact for further information (please print) 0013

0026

1 Mr. 2 Mrs. 3 Miss 4 Ms. 0054

First name

Last name

E-mail address: 0018

Web site address: 0020

Telephone number: 0017 ()

Extension: 0027

Fax number: 0016 ()

How long did you spend collecting the data and completing this questionnaire?

9910 hour(s)

9909 minutes

Comments

If more space is required please enclose a separate sheet.

9920

9913

9914

9915

9916

For information only

Questions and Return Procedures

We ask that you complete and return the 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 faxed back to Statistics Canada at: **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.

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.

Please make a copy of
this completed questionnaire for your records.

Thank You For Your Co-operation