



2005 Survey of Service Industries: Repair and Maintenance Services

If necessary, please correct pre-printed information below.



0001	Legal name		0004	Address (number and street)	
0002	Business name		0005	City	
0021	Title of contact		0006	Province/ Territory or State	
0008	First name of contact		0053	Country	0007 Postal code/ Zip code
0028	Last name of contact		0010	Language preference	1 <input type="checkbox"/> English 2 <input type="checkbox"/> French

This information 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.

A - Introduction

Survey Purpose

This survey collects the financial and operating data needed to develop national and regional economic policies and programs.

Fax or Other Electronic Transmission Disclosure

Statistics Canada advises you that there could be a risk of disclosure during the facsimile or other electronic transmission. However, upon receipt, Statistics Canada will provide the guaranteed level of protection afforded all information collected under the authority of the *Statistics Act*.

Data-sharing Agreements

In an effort to reduce reporting burden, Statistics Canada has entered into agreements with provincial and territorial statistical agencies for the sharing of data. The data are kept confidential and used for statistical purposes only. Please see the enclosed reporting guide for details of these agreements.

Reporting Instructions

- Report for **all** operation(s) and/or location(s) pre-printed in the above address area. If it is not possible to report for the above business unit(s), please explain the reason(s) in the **Comments** section at the end of the questionnaire.
- When precise values are not available from your records, estimates are acceptable.
- For further information about this survey and definitions, please consult the enclosed reporting guide.

Confidentiality

The *Statistics Act* protects the confidentiality of information collected by Statistics Canada. Please see the enclosed reporting guide for more information.

Please return the questionnaire within 30 days.

**Please mail the completed questionnaire in the enclosed envelope
or fax it to Statistics Canada at 1 888 883-7999.**

Lost the return envelope or need help? Call us at **1 888 881-3666** or mail to:
Statistics Canada, Operations and Integration Division, 120 Parkdale Avenue, Ottawa, Ontario K1A 0T6

B - Main Business Activity

1. Please describe the nature of your business.

0055 _____

2. Please check the **one main activity** which most accurately represents your **principal** source of revenue.

- 0800 General automotive mechanical and electrical repair and maintenance
- 0801 Automotive exhaust systems repair
- 0803 Automotive body, paint and interior repair and maintenance
- 0825 Other specialized motor vehicle repair and maintenance services (e.g., brake, radiator, transmission repair shops)
- 0804 Automotive glass replacement shops
- 0805 Car washes
- 0934 All other automotive repair and maintenance services (e.g., diagnostic centres, emissions testing, tire repair, oil and lube services)
- 0807 Electronic and precision equipment repair and maintenance
- 0808 Commercial and industrial machinery and equipment repair and maintenance
- 0040 None of the above

If you checked, "None of the above", please call **1 888 881-3666** for further instructions.

C - Reporting Period Information

1. Please report information for your **fiscal year** (normal business year) ending between April 1, 2005 and March 31, 2006. Please indicate below the period covered by this questionnaire.

From ⁰⁰¹¹ ^{YYYY} ^{MM} ^{DD} To ⁰⁰¹² ^{YYYY} ^{MM} ^{DD}

2. If you **did not operate** this business unit for a **full year**, please check the reason(s) below:

- 0031 ¹ Seasonal operations ² New business ³ Change of fiscal year ⁴ Change of ownership ⁵ Ceased operations ⁶ Temporarily inactive

**Please complete only the questions that are applicable to your business.
 When precise values are not available from your records, estimates are acceptable.**

D - Revenue

	CAN\$
1. Sales (a detailed sales breakdown will be requested in Section F)	2299
2. Grants and subsidies	2068
3. Royalties, rights, licensing and franchise fees	2022
4. Investment income (dividends and interest)	2097
5. Other revenue (please specify): ²⁰⁰¹	2077
6. Total revenue (sum of questions 1 to 5)	2098

E - Expenses

		CAN\$
1.	Salaries and wages of employees who have been issued a T4 statement	3010
2.	Employer portion of employee benefits (include employer contributions to pension, medical/life insurance plans, employment insurance, etc.)	3040
3.	Commissions paid to non-employees	4466
4.	Professional and business service fees (e.g., legal, accounting)	4315
5.	Outsourcing (include work contracted out, freelancers, payments to personnel suppliers, etc.)	3060
6.	Payments for services provided by your head office	4555
7.	Cost of goods sold – if applicable (purchases plus opening inventory minus closing inventory)	5721
8.	Office supplies	3301
9.	Rental and leasing (include rental of premises, equipment, motor vehicles, etc.)	4115
10.	Repair and maintenance (include janitorial services, equipment, motor vehicles, etc.)	4178
11.	Insurance (include professional liability, motor vehicles, etc.)	4350
12.	Advertising, marketing and promotions (report charitable donations at question 22)	4365
13.	Travel, meals and entertainment	4370
14.	Utilities (include gas, heating, hydro, water)	4066
15.	Telephone and other telecommunication expenses	4101
16.	Property and business taxes, licences and permits	4410
17.	Royalties, rights, licensing and franchise fees	4440
18.	Delivery, warehousing, postage and courier	4179
19.	Financial services fees (e.g., bank and credit card charges)	4325
20.	Interest expenses	4630
21.	Amortization of tangible and intangible assets	4520
22.	Charitable donations	4521
23.	Bad debts	4542
24.	All other expenses ⁴⁵³¹ (please specify):	4569
25.	Total expenses (sum of questions 1 to 24)	4699
26.	Corporate taxes (if applicable)	4600
27.	Gains (losses) and other items (include write-offs, foreign exchange, share of partnership income, etc.)	4601
28.	Net profit/loss after tax and other items	2304

F - Industry Characteristics - Repair and Maintenance Services

Please provide a breakdown of your sales.

Please indicate if you are reporting in **either** Canadian dollars **or** percentages.

9973 1 \$ OR 2 %

1. Labour charged for repair and maintenance services	2041	
2. Parts and accessories used in service and repair work only	2042	
3. Over the counter sales of merchandise, parts and accessories	2028	
4. Other sales (include revenue from towing, recycling, etc.) (please specify): ²⁵⁵⁹ <input type="text"/>	2558	
5. Total sales (sum of questions 1 to 4)	2305	

Inventory

		CAN\$	
		Value of opening inventory	Value of closing inventory
6. Parts used in repair work only	5581		5582
7. Other over the counter merchandise	5560		5565
8. Total inventories (sum of questions 6 and 7)	5550		5555

G - Personnel

1. Number of non-salaried partners and proprietors (if salaried, report only at question 2 below)	6321	Number
2. Number of paid employees (based on year-end T4 payroll summaries)	6339	
3. Percentage of paid employees who worked full-time	6328	%
4. Number of contract workers (for whom you did not issue a T4 such as freelancers and casual workers)	6320	Number
5. Number of volunteers (including unpaid interns and co-op students) during the reporting period	6014	
6. Total number of hours worked by volunteers during the reporting period	6026	Number of hours

H - Sales by Type of Client

Please provide a percentage breakdown of your sales by type of client.

1. Clients in Canada		%
a) Businesses	8112	
b) Individuals and households	8100	
c) Governments and public institutions (e.g., hospitals, schools)	8233	
2. Clients outside Canada	8140	
Total		100%

I - J - K - Not applicable

L - Certification

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

Signature of authorized person	Title 0014	0015	Date		
			YYYY	MM	DD
			<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of person to contact for further information: 0026	0013	First name	<input type="text"/>	
		0054	Last name	<input type="text"/>
1 <input type="checkbox"/> Mr. 2 <input type="checkbox"/> Mrs. 3 <input type="checkbox"/> Miss 4 <input type="checkbox"/> Ms				

E-mail address 0018	Web site address 0020
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Telephone number 0017	Extension number 0027	Fax number 0016
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How long did you spend collecting the data and completing this questionnaire?	9910	Hour(s)	9909	Minutes
		<input type="text"/>		<input type="text"/>

M - Comments

We invite your comments below. Please be assured that we review all comments with the intent to improve the survey.

9920 _____

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9916 _____

FOR
INFORMATION
ONLY

Thank you for completing this questionnaire. Please retain a copy for your records.

Statistics Canada's publications are available for use in all major libraries.
As well, please visit our Web site at www.statcan.ca.

If you need help, please contact us at **1 888 881-3666**.