## Authority

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

Please revise name and/or address if required
Legal name (please print)

Operating (trading) name
(if different from address label or legal name)


## Please read carefully before completing the questionnaire

Coverage

## Survey

 Objective
## Confidentiality

## Return

Procedure

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 Actyare not affected by either the Access to Information Act or by any other legislation.

If you require assistance in the completion of this questionnaire or have any questions regarding the survey, please call the Sturgeon Falls Statistics Canada Regional Office at 753-4888 or 1-800-461-1662.

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).

Please return the questionnaire within 30 days of receipt. If you are unable to do so, please inform us of the expected completion date.
This survey is being collected from businesses at the establishment leve of organization. For this purpose, an "establishment" is defined as the lowest level of the firm for which separate records are kept for such details as revenue, expenses and employment.
"Single-establishment" firms should report data for all their activities on this report.
Other firms (generally those which are larger and moke diverse) Will have more complex organizational structures and record-keeping needs, and therefore may have more than ore establishment. For this survey, such firms should report data for only their establishments whose principal business activity is in the engineering services industry (see Section 2). It may be that these establishments engage in sideline activities outside the engineering services industry; their data (e.g. revenue, expenses, employment, etc.) relating to those activities should als 0 de reported on this form.
This report should exclude the revenue of you separately incorporated subsidiaries or foreign branches, but should include your portion of the revenue and expenses of yrincorpoyated joint ventures in which you are involved. Please report all amounts in Canadian dollars.

The survey objective is the collection and publication of data necessary for the statistical analysis of the engineering services industry. The information from the survey can be used by businesses and trade associations for market analysis and assessment of industry perlormance, operating characteristics and trends, by government to develop national and regional economic policies, by other users involyed in research or policy making and by Statistics Canada for maintaining important data input to the preparation of the Ganadian System of National Accounts. The results of this survey will be published in the Statistics Canada publigation entitled "Architectural, Engineering and Scientific Services in Canada" (Cat. No. $63-234-X P B)$.
$\square$

Statistics
Statistique
Canada

## 1. Enterprise Details

a) Is the sole purpose of this corporation to provide services to your parent company, an affiliated company or a professional practice?

If YES, please name your affiliated corporation or name the professional practice
b) Please enter your nine-digit GST Registered Account Number.


## 2. Business Activity

a) Please describe the nature of your firm's business activity in 1998: $\qquad$
b) Is this a change from the previous year? $\qquad$ your firm's principal source of operating revenue.

$\qquad$ 541330

Engineering Services - establishments primarily engaged in applying principles of engineering in the design, development and utilization of machines, materials, processes and systems.

## 3. Form of Organization

a) Please check $(\checkmark)$ below the legal status of this busipess.
027

$4 \bigcirc$ Unincorporated-limited partnership
$5 \bigcirc$ Other (please specify)
$\qquad$
b) Is this business a joint venture?
$0281 \bigcirc$ Yes (please provide pames of partners / venturers)
$2 \bigcirc \mathrm{No}$
c) Is this business affiliated with achain or a franchise group?

030


## 4. Reporting Period

Please report for the calendar year 1998 or for your most recent fiscal year ending no later than March 31, 1999.


Period of Operation If you did not operate this business for a full year, please check ( $\checkmark$ ) the reason below:
$1 \bigcirc$ Seasonal operation
$2 \bigcirc$ New business in 1998
$3 \bigcirc$ Change of fiscal year end

$4 \bigcirc$| Change of ownership (please provide |
| :--- |
| name and address of the other owner) |

$5 \bigcirc$ Ceased operation (please specify)
$6 \bigcirc$ Temporarily closed (please specify)
$\square$

Please report for your 1998 fiscal year, as reported in section 4 , on page 2.
5. Revenues Earned during the Reporting Period

Please exclude GST and all other taxes collected for remittance to a government agency.

I Total Revenue
a) Fee Income

Total revenue generated on a fee basis for billable contracts. Exclude reimbursable expenses and sub-consultant fees
b) Reimbursable Expenses All contract-related expenses recoverable from the client. Exclude sub-consultant fees
c) Sub-Consultant Fees

All contract-related fees paid to sub-consultants
d) Other Operating Revenue (please specify)
$\qquad$
e) Total Operating Revenue Sum of Boxes 301 to 304
f) Non-Operating Revenue (please specify)
$\qquad$
g) Total Revenue

Sum of Boxes 305 and 306. This total may differ from your financial statement if reimbursables are not included there as revenues and expenses

II Revenue by Type of Service See also Question 8D, Foreign Revenue by Type of Service. Please estimate the percentage of Fee Income (Box 301) generated by the following services. (Please see attached definitions.)
a) Advisory Services - Environmental
b) Advisory Services - Other
c) Design Services - Environmentar
d) Design Services - Other $\wedge$ e) Other Environmental Services (not included
in (a) and (c) aboye
f) Constrexction mianagement
g) Project Makagement Services
h) Geotechnical Engineering and Materials Testing Services
i) Supplementary Services (e.g., preparation of cost estimates, operating manuals and technical training)
j) Sale of software products or custom systems development
k) Other (e.g., procurement, please specify, if more than $10 \%$ of total fee income)
I) Total

Turnkey Projects
(Please report as a percentage of
Fee Income (Box 301 in Section 5-I))
314
315
824

| 836 |
| :--- |
| 316 |


| 316 |
| :--- |
| 400 |

317

| Dollars <br> (omit cents) |
| :--- |
| 301 |
| 302 |
| 303 |
| 304 |
| 305 |
| 306 |
| 307 |



| 310 |
| :--- |
| 318 |
| $100 \%$ |


| Percentage |
| ---: |
| 401 |

## III Revenue by Field of Specialization

See also Question 8E, Foreign Revenue by Field of Specialization.
Please estimate the percentage of Fee Income (Box 301, Section 5-I) derived from the following fields of specialization:
a) Buildings (structural)
b) Buildings (mechanical and electricaly
c) Highways, Bridges, Tanness Railways
d) Transportafrig_ Fagcilities
e) Municipat (hoads, streets, water supply)
\&t) Municipal (sewage treatment, waste disposal)

| Percentage |
| :--- |
| 319 |
| 320 |
| 321 |
| 322 |
| 323 |
| 324 |
| 325 |
| 328 |
| 329 |
| 330 |
| 3 |
| 3 |

n) Total

| 332 |  |
| ---: | ---: |
|  |  |
|  |  |
|  |  |
|  |  |

## 6. Expenditures Incurred during the Reporting Period

- Please include GST except the portion which is refundable by government.
- Exclude capital expenditures.


## Project Related Expenses

a) Direct project-related salaries and wages paid to employees for whom you issued a T4 supplementary form; include vacation pay, bonuses and commissions
b)
(telephone, telex, facsimile, etc.)
c) Reproduction costs
d) Project travel
e) Sub-consultant fees paid to engineers
f) Other sub-consultant fees
g) Other reimbursables
h) Project related non-reimbursables
i) Total Project Related Expenses (sum of items (a) to (h))

## General and Administrative Expenses

j) General and administrative salaries and wages paid to employees for whom you issued a T4 supplementary form; include vacation pay, "non-productive time", bonuses and commissions
k) 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
I) Occupancy costs (i.e. rent and/or lease payments for land and buildings; heat; power and water; business and property taxes; depreciation on buildings, as applicable)
m) Lease and rental of computer equipment
n) Depreciation on computer equigment
o) Purchased legal, accounting, alerting,
p) Professional liability insurance
p) Professional liability insurance
q) Communications (telepnone, tacsimile, etc
a) Communications (telefnone, tacsimile, etc item (b) above)
r) Bad debt expense
s) Interest expense
t) All other general and administative expenses. Include fees paid to contract workers. (Please specify major items or attach a separate sheet.)
L
u) Total General and Administrative Expenses (sum of items (j) to (t))
v) Total Operating Expenses (sum of items (i) and (u))

## Business Development Expense

Please estimate the percentage of Total General and Administrative Expenses (Box 397) spent on business development (proposals, advertising, entertainment, membership, promotional literature, travel, etc.)

## 7. Employment

For the following categories, please report the average number of persons employed during the reporting period:
a) Working Proprietors and/or Principals of Unincorporated Businesses
b) Full-time Employees

Regular employees who worked the standard work week as observed by the business
c) Part-time Employees

Those who worked for fewer than the standard work week hours observed by the business
d) Contract Workers

Those who were engaged only forthe duration of a specific project or term (exclude ) sub-consultants)
e) Total


Please indicate how this total (Box 154) breaks down into the following sategories:

|  | 155 |
| :---: | :---: |
| a) Engineers-professional | 156 |
| Soy Engineers-Other |  |
| c) Qthexprofessionals | 159 |
| .9, archiects, lawyers, accountants | 160 |
| (d) Technicians and technologists |  |
|  | 161 |
| e) Administrative, clerical and other support staff |  |
| f) Other (please specify) | 162 |
|  |  |

## 8. Foreign Projects

## A. Foreign Market Revenue

a) Of the Fee Income reported in Box 301 (Question 5-I), how much was generated outside Canada? (The location of the recipient of the service should be used to designate foreign projects. Exclude revenues earned by your foreign subsidiaries)
b) What percentage of Foreign Revenues
(Box 500 above) was earned from work performed for government?

If your Foreign Revenues (Box 500) are less than $\$ 100,000$, go directly to Question 9.
B. Foreign Revenue by Region

Please provide a breakdown of your Foreign Revenue (Box 500) by region. (Attach a separate sheet, if necessary.)
Omit Question 8B if you have completed Statistics Canada's "International Transactions in Services, 1998".

| United States | Dollars (omit cents) |
| :---: | :---: |
|  | 502 |
| Mexico | 509 |
|  |  |
| South America | 503 |
| Europe | 504 |
| Africa | 505 |
|  |  |
| Asia | 506 |
| Middle East | ${ }^{507}$ 人 $>$ |
| Australia | V |

Please estimate the percentage breakdown of your revenue from foreign projects (BOx 500) by source of financing:
a) Canadian InternationaNDevelopment

c) World Bank
d) A Regional Development Bank
e) A United Nations agency or program
f) Foreign government source
g) Private - foreign source
h) Private - Canadian source
i) Self-financed (i.e. your firm accepted risk of non-payment, goods in counter trade, equity in lieu of payment, etc.)
j) Other (please specify)

539

| Percentage |
| :--- |
| 530 |
| 531 |
| 532 |
| 533 |
| 534 |
| 535 |
| 536 |
| 537 |
| 538 |
| 539 |
| $100 \%$ |



Percentage 501 ?

## D. Foreign Revenue by Type of Service

Please estimate the percentage breakdown of your foreign revenue (Box 500) according to the following categories:
a) Advisory Services - Environmental
b) Advisory Services - Other
c) Design Services - Environmental
d) Design Services - Other
e) Other Environmental Services (not included in (a) and (c) above)
f) Construction Management
g) Project Management Seryices
h) Geotechnical Engineerng and Materials Testing Services
i) Supplementary Services (e.g., preparation of cost estimates, eporating manuals and technical training)
j) Sale of softivare products or custom systems development
k) Othere.g., procurement, please specify, if more than $10 \%$ of foreign revenue)


## Sos

E. Foreign Revenue by Field of Specialization

Please estimate the percentage of your foreign revenue (Box 500) derived from the following fields of specialization:
a) Buildings (structural)
b) Buildings (mechanical and electrical)
c) Highways, Bridges, Tunnels, Railways
d) Transportation Facilities
e) Municipal (roads, streets, water supply)
f) Municipal (sewage treatment, waste disposal)
g) Other Environmental Services
h) Mining, Metallurgy and Primary Metals
i) Pulp and Paper
j) Oil, Petroleum and Natural Gas
k) Power Generation and Transmission
I) Other Industrial
m) Other (please specify)
n) Total

| Percentage |
| :--- |
| 812 |
| 813 |
| 814 |
| 815 |
| 835 |
| 833 |
| 816 |
| 900 |
| 817 |
| 810 |
| 818 |
| $100 \%$ |

## 9. Provincial Distribution

| Number <br> a) <br> Please report the number of permanent business locations operated in <br> Canada during the reporting period. (Include warehouses, head offices, <br> research facilities and trading locations.) |  |
| :--- | :--- |
| $\mathbf{0 2 4}$ |  |

b) Do you have permanent business locations in more than one province?

c) Please report the number of permanent business locations, total revenue and selected expenses,


## 10. Trade Patterns: Sales Within Province/Territory, Inter-provincial and International Exports

(1) Businesses with locations in only one province or territory, please complete the vertical column in the table below that represents the province or territory of your business location(s); list the percentage of total revenue (as reported in Section 5-I, Box 307), generated by clients from the applicable geographic regions listed in the horizontal table rows. Remember to include the share of revenue from sales to clients within the same province or territory as the business location and check that the vertical column percentages add to 100 .
(2) Businesses located in more than one province/territory, please complete a separate vertical column for each province/territory for which you have reported revenue in Section 9. Distribute the revenue earned by your locations in each province/territory according to the geographic residence of your locations' clients.

If you do not keep records of this information, your best estimate is acceptable.

| Client Residence | Your Business Location(s) |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Nfld. <br> \% | P.E.I. <br> \% | $\begin{gathered} \text { N.S. } \\ \% \end{gathered}$ | N.B. <br> \% | Que. <br> \% | Ont. $\%$ | Man. \% | Sask. <br> \% | Alta. <br> \% | $\begin{gathered} \text { B.C. } \\ \% \end{gathered}$ | Nvt op | N.W.T. (without $\mathrm{Nvt})$ \% | Yukon $\%$ |
| Newfoundland |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Prince Edward Island |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Nova Scotia |  |  |  |  |  |  |  |  | $1$ |  |  |  |  |
| New Brunswick |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Quebec |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ontario |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manitoba |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Saskatchewan |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Alberta |  |  |  |  |  |  |  |  |  |  |  |  |  |
| British Columbia |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Nunavut |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Northwest Territories (without Nunavut) |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Yukon Territory |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Foreign |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Total | $100 \%$ | $100 \%$ | 100\% | 100\% | 100\% | 100\% | 100\% | 100\% | 100\% | 100\% | 100\% | 100\% | 100\% |

Each column completed must add up to $100 \%$.

## 11. Certification

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



Federal Provincia Agreements
In order to reduce yesponse burden and to provide consistent statistics, Statistics Canada has entered into data sharing agreements with the Quebec Bureau of Statistics, the Manitoba Bureau of Statistics and BC STATS in accordance with Section 11 of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19. For establishments and/or 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 Quebec Bureau of Statistics, the Manitoba Bureau of Statistics and BC STATS, respectively. The Statistics Acts of these provinces includes the same provisions for confidentiality and penalties for disclosure of information as the federal Statistics Act.

## 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.

