	Transportation Division Passenger Bus Survey Annual Supplement	franç	us préférez recevoir ce questionnaire en ais veuillez contacter Statistique Canada diatement au 1-888-373-8424.
	Scheduled Intercity, Charter and Other Passenger Bus Services		Correct pre-printed information if necessary
	Form C	001	Legal name
		002	Business name
		003	C/O
		004	Number and Street
		005	City
	(3 006	Province 007 Postal cod

Please read carefully before completing

AUTHORITY

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

PURPOSE OF THE SURVEY

This survey collects data essential for the statistical analysis of the passenger bus industry and its impact on the Canadian economy. Aggregated industry information and industry averages are used by individual businesses to assess their competitive position in the industry, banks for assessing industry performance for loan purposes, industry associations to help protect the industry's interests, industry analysts to evaluate industry performance for investment decisions, and all levels of government to develop national and regional economic programs and policies.

CONFIDENTIALITY

The data are to be used for statistical purposes only and published in aggregate form. Statistics Canada is prohibited by law from publishing any statistics that divulge information that relates to any identifiable business without the previous written consent of that business. The confidentiality provisions of the Statistics Act are not affected by the Access to Information Act or any other legislation.

FEDERAL-PROVINCIAL AGREEMENTS

- A. Under section 11 of the **Statistics Act** with the Newfoundland Statistics Agency and the Quebec Bureau of Statistics: Statistics Canada only enters into section 11 agreements with provincial statistical agencies that have statistics acts similar to the federal act. These agencies have the authority to collect this information and the same providions for confidentiality and penalties for disclosure of information as the Federal Statistics Act.
- B. Under section 12 of the **Statistics Act** with the Newfoundland Department of Works Services and Transportation, the Nova Scotia Board of Commissioners of Public Utilities, the Quebec Department of Transportation, the Ontario Ministry of Transpontation and Transport Canada (see section C below): The agreements we have with these agencies require that they keep the information confidential and only use it for statistical and research purposes. Under section 12, respondents may object to the sharing of their information by giving notice in writing to the Chiel Statistician and returning their letter of objection along with the completed questionnaire in the enclosed envelope.

Further to the section 12 agreement with Transport Canada, the following applies to federally regulated carriers: Statistics Canada is collecting the information for itself pursuant to the **Statistics Act** and on behalf of Transport Canada pursuant to the **Canada Transportation Act** and the Carriers Information Regulations. In this case, respondents do not have the right to object to sharing their information since the party to the Agreement is authorized by law to require the respondent to provide the information.

Canadä

Coverage

If you are completing of	questionnailes	for a	a group	of	companies	with	common	ownership,	please	feel	free	to	provide	а
If you are completing of consolidated report if it is	s easier for you	. Yt pi	oviding	a c	onsolidated	repor	t, please o	complete the	e followir	ng.				

Legal and/or Operating Entities

List the names of the legal and/or operating entities included in this report. If additional space is required please use an additional sheet of paper.

Name	Address 011a						
Reporting period							
If you cannot provide data for this calendar period, please report for your corresponding business period.	Year Month Day Year Month Day 10 09 08 13 12 11						
Information for respondents							
Do you have questions regarding this survey? Do you need help in completing the form?	Please complete and return within 30 days of receipt. If you choose to transmit the questionnaire or information to Statistics Canadian						
Telephone:1-888-373-8424 (toll free)FAX:1-877-667-6684 (toll free)Internet:dtta@statcan.ca	by facsimile or internet e-mail communication, please be advised there co be a risk of disclosure during the communication process. However, upon receipt of your communication, Statistics Canada will provide the guarant level of protection afforded to all information collected under the authority the Statistics Act.						

5-3503-79.1: 2000-02-28 STC/TRA- 400-75030



Statistics Statistique Canada Canada

PART 1 - Annual Statement of Assets

Form C

Land	138	
Fixed assets excluding land (Net of accumulated Depreciation)	144b	
Current assets	146	
Other assets	148	
Total assets	150	

PART 2 - Annual Operating Revenues and Expenses

Omit cents

Total annual operating revenues	125
Total annual operating expenses	230
	(\bigcirc)

PART 3 - Revenue Equipment

- If a vehicle is used for two or more purposes, please report it for its major service.
- Report the average age of vehicles by type of vehicle. Please consider a vehicle purchased in this fiscal year as being one year old.

Transportation		Motor C	oache	s	70)	School Greater th in overa			Other vehicles Buses 29 feet or less in overall length, cars, minivans, and trucks			
Services	Star	ndard		alchair ssible	Star	ndard	Wheelchair accessible		Standard		Wheelchair accessible	
Scheduled intercity service	3012	\langle	3012b	\mathbf{r}	3014		3014b		3023		3023b	
School bus service (Home to school)	3024	$(\bigcirc$	3024b		3026		3026b		3035		3035b	
Charter service	3036		3036b		3038		3038b		3047		3047b	
Other passenger bus service		· ·	3085b		3089		3089b		3105		3105b	
Total	× 3108		3108b		3110		3110b		3119		3119b	
Vehicle average age	3122		3122b		3124		3124b		3133		3133b	

Number of Vehicles at End of Reporting Period

Certification

I certify that the information contained herein is complete and correct to the best of my knowledge.											
	Name and title of person making this report (Please	Signature								
015											
				Х							
-	Telestres Ne. (Discus instude and seda)		Faccinaila Na (Diana in								
	Telephone No. (Please include area code)	047	Facsimile No. (Please include area code)		040	Date (Day - Month - Year)					
016		017			018						