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.
This document is confidential when completed.
Si vous préférez recevoir ce questionnaire en français, veuillez nous téléphoner au 1888 373-8424.

If necessary, please correct pre-printed information below.

| 0001 | Legal name | 0004 | Address (. umber and street) |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 0002 | Business name |  | City |  | 0006 | Province or State |
| 0003 | Care of |  | Ccuntry | 0007 | Posta | l code / Zip code |
| 0008 | First name of contact |  | Langua |  |  |  |
| 0028 | Last name of contact | 0010 | O |  | Frenc |  |
|  | neral Information |  |  |  |  |  |

## Purpose of Survey

This survey collects data essential for the statistical $a_{1}$ っlvsis, of the passenger bus industry and its impact on he Canadian economy.

## Confidentiality

The data are to be used fo $s$ atistical purposes only and published in aggregate form. Siti, tinc Canada is prohibited by law from publishing any stau'ics that divulge information that relate to any identifiabl busil ess without the prior written consent of that busiress. The confidentiality provisions of the Statistics Act are no, 7 ffectea by the Access to Information Act or any other legislation.

## Federal Provincial Data Sharing Agreements

To avoid duplication and ease the burden on respondents, Statistics Canada has entered into agreements for this survey:
A. Under section 11 of the Statistics Act with the Newfoundland Statistics Agency and the Quebec Statistics Institute. 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 provisions 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 Transportation and Transport Canada (see section C below). These agencies are required to 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 Chief Statistician and returning their letter of objection along with the completed questionnaire in the enclosed envelope.
C. Under section 12 of the Statistics Act with Transport Canada for the sharing of information from this survey. This information is required by Transport Canada and collected from federally regulated carriers under the authority of the Canada Transportation Act and pursuant to the Carriers, Transportation and Grain Handling Undertakings Information Regulations. Under section 12 of the Statistics Act, non-federally regulated carriers may refuse to share their information with Transport Canada by giving notice in writing to the Chief Statistician and returning their letter of objection along with the completed questionnaire in the enclosed return envelope.
D. Please complete the questionnaire and return it in the supplied envelope. If you choose to send it by fax or email, please read the following: Fax or Other Electronic Transmission Disclosure: Statistics Canada advises 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 to all information collected under the authority of the Statistics Act.

If you need further information or help, please call 1888 373-8424

## Note to Respondents

This questionnaire is intended to capture information about the passenger bus and urban transit industry only. Is your business primarily engaged in providing urban transit and/or passenger bus services?

0099Yes - Please continue.
${ }^{3}$No - Please call phone \# 1888 373-8424.
A. Please report for the period January 1, 2007 to December 31, 2007. If your fiscal year is different from the calendar year, please report for the most recent fiscal period ending between April 1, 2007 to March 31, 2008.
Please indicate below the period covered by this questionnaire:

B. Do the dates above represent a change in your fiscal year?
$0056{ }^{1} \bigcirc$ Yes ${ }^{3} \bigcirc$ No
C. The list of companies for whom you are reporting is on the mailing label. Piease note any changes / additions / deletions:
0199
$\qquad$
$\qquad$

## Part A

1. Are you a municipal government, urban trar. it orope ty or government agency involved in urban transit operations? (If you are a private company •na r cuntract to an urban transit company / agency, proceed to Question 4).
0101Yes - Proceed to Question .No - Proceed to Que-tinn 4.
2. Did you contract out or arrange -ontracts for some or all of your urban transit services (including services for persons with disabilit as or the elderly) with one or more private companies?
0201Yes - rill ou the iollowing table; then go to Question 3.N-GO. Nuestion 4.

| Name of Contractor | \$ Amount of Contract |  |
| :--- | :--- | :--- |
| 0205 |  | 0250 |
| 0206 |  | 0251 |
| 0207 | TOTAL | 0252 |
| 0208 |  | 0263 |

3. Did you contract out $\mathbf{1 0 0 \%}$ of your urban transit services?
$0301{ }^{1}$Yes - You are finished. Please send your questionnaire to Statistics Canada.
${ }^{3} \bigcirc$ No - Proceed to Question 4. Answer for the portion of your business that is not contracted out.

## Part B - Financial Data

4. Enter your annual operating revenue by activity:

In Dollars (Omit cents)
0400
Urban transit services (excluding para transit)
Commuter services (daily services between towns / cities and a major urban city: e.g. Oakville and Toronto; south shore of Montréal and the City of Montreal; Fraser Valley communities and Vancouver, etc.)

| Urban transit services for persons with disabilities or seniors (para transit) | 0410 |
| :---: | :---: |
| Scheduled intercity services (including interlining revenue) | 0415 |
| School bus services (home to school services) | 0420 |
| School bus charter services | $0,75$ |
| Charter - motor coach charter services (including sightseeing tours between cities and / or geographic areas that involve at least a 160 km round trip; also includes casino services, snecia services for holidays and other events) etc. | 0430 |
| Local sightseeing services | 0435 |
| Shuttle services (e.g. airport parking - terminal, hotel, railway station and other, | 0440 |
| Bus parcel express | 0445 |
| Other passenger bus services (e.g. tours, other contract services el.). (Specify): <br> 0451 | 0450 |
| Other operating revenues (e.g. terminal rentals, fuel rehates, wasing, advertising, etc.). (Specify): <br> 0456 | 0455 |
| Operating funding (Federal, Provincial, Munic ipal aı $d$ other operating contributions) | 0470 |
| Total Operating Revenue (sum of cells 0400 to 0455 and 0470) | 0460 |

## Non-Operating Revenues

Capital funding (Federal PI viIIvial, Municipal and other capital contributions)
Other non-operating rt onves (e.g. interest earned, sales of assets, returns on investment, insurance proceec.r. GST rebates, etc.)

Total Non-Operating Revenues
(sum of cells 0465 and 0475)
Total Revenue
(sum of cells 0460 and 0480)


0480

0490
$\rho$
5. Did your company generate revenue in more than one province or territory? - that is, was the point of sale in more than one province or territory?

0500
 Yes - Complete the supplementary annex if attached, and then proceed to question 6.No - Go to question 6.

## Part B - Financial Data (continued)



|  | Liabilities \& Owner's Equity |  | In Do | Omit cents) |
| :---: | :---: | :---: | :---: | :---: |
|  | Current liabilities (short term) |  | 1205 |  |
|  | Long term debt |  | 1210 |  |
|  | Other non-current liabilities (e.g. deferred taxes) |  | 1215 |  |
|  | Total liabilities (sum of cells $1205+1210+1215) \circlearrowleft{ }^{1220}$ |  |  |  |
|  | Total owner's equity (share capital, retained earnings (losses) \& contributed surplus <br> Total liabilities and owner's equity (sum of cells $1220+1240$ should $=$ line 1175) |  |  | 1240 |
|  |  |  |  | 1245 |
| Part C - Employment Statistics |  |  |  |  |
| 9. | Estimate using an annual average. | Number of employees who worked at least 30 hours per week | > Number of employees who worked between 20 and 29 h $\frac{\text { per week }}{}$ | Total number of hours for employees who worked less than 20 hours per week |
|  | Drivers | 1301 | 1302 | 1405 hrs |
|  | Mechanics | 1303 | 1304 | 1410 hrs |
|  | All other staff | 1311 | 1312 | 1422 hrs |
|  | TOTAL of each column | 1309 | $10 \sim$ | 1425 hrs |
| Part D - Vehicles in Your Fleet, Distance and Maintenance Cost |  |  |  |  |
| 10. | Estimate using an annual average. | How mar, vehicles in your itct? | Total distance driven in KILOMETRES | Using \%, allocate your maintenance expenses from cell 7035 by vehicle type |
|  | Motor coaches - all types | 1503 - | 1603 | 9003 \% |
|  | School buses - all types | 3 | 1623 | 9033 \% |
|  | Urban transit buses |  | 1640 | 9050 \% |
|  | All other rolling stock |  | 1645 | 9055 \% |
|  | TOTAL of each column | 1550 | 1650 | 9060 100\% |
|  | What proportion of your fleet in cell 550 is equipped for persons with disabilities? |  |  | 1552 \% |
| Part E-Passenger Data $\square$ |  |  |  |  |
|  | Total Passenger Trips |  |  | Total |
|  | Urban transit serv-es (i.e. linked trips), (excluding para transit) |  |  | 1703 |
|  | Commuter services |  |  | 1708 |
|  | Para transit services |  |  | 1713 |
|  | Scheduled intercity services |  |  | 1718 |
| Part F - Fuel and Energy Data |  |  |  |  |
|  | How much of each of the following types of fuel did you use for passenger carrying vehicles during the year? ( L - Litres, KW - Kilowatts) |  |  | Total |
|  | Diesel |  |  | 2101 L |
|  | Gasoline |  |  | 2105 L |
|  | Other fuel |  |  | 2114 L |
|  | Electricity for electrical tractive power (vehicles only) |  |  | 2120 KW |

## Certification

13. In the future, would you like to receive this questionnaire electronically?
2250
${ }^{3} \bigcirc$ No
$1 \bigcirc$ Yes

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


We invite your comments below. If necessary, please attach.a separate page. Please be assured that we review all comments with the intent of improving the survey.

9913
$\qquad$
$\qquad$
9914

9915
$\qquad$
$\qquad$
$\qquad$ 9920
$\qquad$
$\qquad$
$\qquad$
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

