



# 2005 Survey of Service Industries: Food Services and Drinking Places

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.

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

- 0430  Full-service restaurant – patrons order while seated and pay **after** eating
- 0431  Limited-service restaurant – patrons order food and beverages at a counter, and/or order by phone and pay **before** eating
- 0432  Food service contractor – supplies food services under contract for a specific period of time
- 0433  Social caterer – provides food services for social or business events
- 0434  Mobile food service – serves food and beverages, from motorized vehicles or non-motorized carts
- 0435  Drinking places (e.g., bars, night-clubs, taverns)
- 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.

	YYYY	MM	DD	YYYY	MM	DD	
<b>From</b>	0011 <input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<b>To</b>	0012 <input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>

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

- 0031  <sup>1</sup> Seasonal operations     <sup>2</sup> New business     <sup>3</sup> Change of fiscal year     <sup>4</sup> Change of ownership     <sup>5</sup> Ceased operations     <sup>6</sup> 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 <b>Section F</b> )	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): <sup>2001</sup>	2077	
6. <b>Total revenue</b> (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 ( <b>include</b> 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 ( <b>include</b> 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 – <b>if applicable</b> (purchases <b>plus</b> opening inventory <b>minus</b> closing inventory)	5721
8.	Office supplies	3301
9.	Rental and leasing ( <b>include</b> rental of premises, equipment, motor vehicles, etc.)	4115
10.	Repair and maintenance ( <b>include</b> janitorial services, equipment, motor vehicles, etc.)	4178
11.	Insurance ( <b>include</b> 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 ( <b>include</b> 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 <sup>4531</sup> (please specify):	4569
25.	<b>Total expenses</b> (sum of questions 1 to 24)	4699
26.	Corporate taxes (if applicable)	4600
27.	Gains (losses) and other items ( <b>include</b> write-offs, foreign exchange, share of partnership income, etc.)	4601
28.	<b>Net profit/loss after tax and other items</b>	2304

## F - Industry Characteristics - Food Services and Drinking Places

### 1. Menu Theme

Please identify your main menu specialty(ies) maximum of three (3).

- |  |   |
|--|---|
| a) <sup>9181</sup> <input type="checkbox"/> Baked goods (e.g., doughnuts, muffins, pastries) | l) <sup>9191</sup> <input type="checkbox"/> Roast beef      |
| b) <sup>9182</sup> <input type="checkbox"/> Chicken  | m) <sup>9192</sup> <input type="checkbox"/> Sandwiches/Subs |
| c) <sup>9183</sup> <input type="checkbox"/> Chinese  | n) <sup>9193</sup> <input type="checkbox"/> Seafood         |
| d) <sup>9184</sup> <input type="checkbox"/> Other Asian                                      | o) <sup>9194</sup> <input type="checkbox"/> Steak           |
| e) <sup>9185</sup> <input type="checkbox"/> Coffee   | p) <sup>9195</sup> <input type="checkbox"/> Vegetarian      |
| f) <sup>9186</sup> <input type="checkbox"/> Hamburger  | q) <sup>9196</sup> <input type="checkbox"/> Other ethnic    |
| g) <sup>9187</sup> <input type="checkbox"/> Mexican  | (please specify): <sup>9200</sup> _____                     |
| h) <sup>9188</sup> <input type="checkbox"/> North American (varied)                          | r) <sup>9197</sup> <input type="checkbox"/> Other specialty |
| i) <sup>9198</sup> <input type="checkbox"/> Finger food                                      | (please specify): <sup>9201</sup> _____                     |
| j) <sup>9189</sup> <input type="checkbox"/> Pizza  | s) <sup>9199</sup> <input type="checkbox"/> No menu theme   |
| k) <sup>9190</sup> <input type="checkbox"/> Other Italian                                    |   |

### 2. Franchise information

- a) Does this establishment use a trade name authorised by a franchisor?

<sup>1001</sup> 1  Yes 3  No

- b) If yes, indicate trade name (please specify):

<sup>1002</sup> \_\_\_\_\_

- c) Is this establishment owned or operated by the franchisor?

<sup>1003</sup> 1  Yes 3  No

### 3. Estimated average **check per person** (exclude taxes and tips). Please check **one** only.

<sup>1004</sup> 1  Less than \$5      2  \$5 to \$9.99      3  \$10 to \$14.99      4  \$15 to \$19.99      5  \$20 to \$29.99      6  \$30 or more

### 4. Does this establishment have a licence to sell and serve alcohol? Please check **one** only.

<sup>1005</sup> 1  Yes 3  No

5. Number of seats in this establishment ( **exclude** patio or seasonal seating). If reporting for more than one establishment, please report average number of seats.

**Number  
of seats**

<sup>1006</sup>

6. Please report the number of permanent business units/locations operating in Canada during the reporting period.

**Number**

<sup>5025</sup>

## F - Industry Characteristics - Food Services and Drinking Places (continued)

### 7. Sales by type of service

For each of the following categories, please indicate if you are reporting in **either** Canadian dollars **or** percentages.

9973

1  \$ OR 2  %

a) Full-table service

1419

b) Counter service (eat in)

1421

c) Take-out

1422

d) Drive-through

1423

e) Home delivery

1424

f) Contract catering

1441

g) Social catering

1442

h) Mobile service

1427

i) Other (please specify): <sup>2559</sup>

2558

j) **Total sales** (sum of questions 7a to 7i)

2305

### 8. Sales and commission revenue

9970

1  \$ OR 2  %

a) Alcoholic beverages

1428

b) Food and non-alcoholic beverages

1429

c) Merchandise (e.g., toys, gifts, cigarettes, newspapers)

1431

d) Commissions (e.g., lottery tickets, video gambling machines)

1433

e) Other (e.g., rentals, cover charge, coat check) (please specify): <sup>2163</sup>

1434

f) **Total revenue** (sum of questions 8a to 8e)

1437

### 9. Cost of goods sold

9972

1  \$ OR 2  %

a) Alcoholic beverages

5536

b) Food and non-alcoholic beverages

5538

c) Merchandise (e.g., gifts, toys, cigarettes, newspapers)

5539

d) **Total cost of goods sold** (sum of questions 9a to 9c)

5723

FOR  
INFORMATION  
ONLY

## G - Personnel

		Number
1. Number of <b>non-salaried</b> partners and proprietors (if salaried, report only at question 2 below)	6321	<input type="text"/>
2. Number of paid employees (based on year-end T4 payroll summaries)	6339	<input type="text"/>

	%
3. Percentage of paid employees who worked <b>full-time</b>	6328 <input type="text"/>

		Number
4. Number of contract workers (for whom you did <b>not</b> issue a T4 such as freelancers and casual workers)	6320	<input type="text"/>
5. Number of volunteers (including unpaid interns and co-op students) during the reporting period	6014	<input type="text"/>

		Number of hours
6. Total number of hours worked by volunteers during the reporting period	6026	<input type="text"/>

## H - I - J - Not applicable

FOR  
INFORMATION  
ONLY

## K - Provincial/Territorial Distribution

1. Please report the number of permanent business units/locations operating in Canada during the reporting period. 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.

5001

Number

2. Do you have permanent business units/locations in more than one province or territory?

9966

1  Yes – Please complete question 3

3  No – Please go to Section L

3. Please report the following data for the provinces or territories in which you have business units.

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

9967

1  \$

OR

2  %

Province/ Territory	Number of business units (locations)	Total revenue minus investment income	Salaries, wages and employee benefits	Amortization of tangible and intangible assets	Total expenses
1. Newfoundland and Labrador	5002	4824	4826	4827	4927
2. Prince Edward Island	5003	4829	4831	4832	4932
3. Nova Scotia	5004	4834	4836	4837	4937
4. New Brunswick	5005	4839	4841	4842	4942
5. Quebec	5006	4844	4846	4847	4947
6. Ontario	5007	4849	4851	4852	4952
7. Manitoba	5008	4854	4856	4857	4957
8. Saskatchewan	5009	4859	4861	4862	4962
9. Alberta	5010	4864	4866	4867	4967
10. British Columbia	5011	4869	4871	4872	4972
11. Yukon	5014	4874	4876	4877	4977
12. Northwest Territories	5013	4879	4881	4882	4982
13. Nunavut	5012	4884	4886	4887	4987
14. Total	5015	4889	4891	4892	4992

## L - Certification

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

Signature of authorized person 0018	Title 0014	0015	Date YYYY MM DD
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Name of person to contact for further information: 0026	0013	First name
1 <input type="checkbox"/> Mr. 2 <input type="checkbox"/> Mrs. 3 <input type="checkbox"/> Miss 4 <input type="checkbox"/> Ms	0054	Last name

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
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## M - Comments

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

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**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](http://www.statcan.ca).

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