



2006 Survey of Service Industries: Food Services and Drinking Places

This document is confidential when completed.

Si vous préférez recevoir ce questionnaire en français,
veuillez nous téléphoner au numéro sans frais suivant :
1 888 881-3666.

If necessary, please make address label corrections in the boxes 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. For more information on this survey, please access www.statcan.ca/english/survey/index.htm.

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.

Confidentiality

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

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*.

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, 150 Tunney's Pasture Driveway, Ottawa, Ontario K1A 0T6

Visit our website at www.statcan.ca



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 **main** 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 – 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, 2006 and March 31, 2007. 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

Reporting Instructions:

- Report for business unit(s) specified on the label on the front page.
- Complete only the questions that apply to your business.
- When precise figures are not available, please provide your best estimate.
- Report in Canadian dollars only. Dollar amounts and percentages should be rounded to whole numbers.
- Consult the enclosed Reporting Guide for further information.

D - E - Not applicable

F - Industry Characteristics - Food Services and Drinking Places

1. Franchise information

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

1001 1 Yes 3 No – If "No", please go to question 2.

b) Please specify the trade name:

1002

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

1007 1 Franchisor 2 Franchisee

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

1004 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

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

1005 1 Yes 3 No

4. 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

1006

5. Please report the number of locations (physical place in which business activity is conducted) that **you operated** in Canada during the reporting period.

Number

5025

6. Sales by type of service

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):

2559

2558

j) **Total sales** (sum of questions 6a to 6i)

2305

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

7. Sales and other revenue

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

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 revenue (e.g., rentals, cover charge, coat check)

1434

(please specify):

2163

f) **Total revenue** (sum of questions 7a to 7e)

1437

8. Cost of goods sold

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

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 8a to 8c)

5723

9. Waste management

a) Do you pay a contractor or a municipality directly to collect some or all your solid or liquid waste and/or recyclable materials?

5800 1 Yes 3 No – If "No", please go to **Section G**.

CAN\$

b) How much do you pay for waste management and/or recycling?

5801

c) How are these services paid for?

5802 1 A weekly, monthly or annual flat fee contract

2 Per unit (such as bin, cubic metre, tonne) contract based on the volume or weight of waste collected

G - Personnel

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

H - I - J - Not applicable

K - Provincial/Territorial Distribution

Number

5001

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.

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

9966

Yes – Please complete question 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 \$ OR %

	Number of business units (locations)	Total revenue	Salaries, wages and employee benefits	Amortization and depreciation 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 - Contact Information

0015

Date completed

YYYY

MM

DD

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Name of person to contact about this questionnaire:

0026 1 Mr. 2 Mrs. 3 Miss 4 Ms

First name

0013

Last name

0054

Title

0014

E-mail
address

0018

Website
address

0020

Telephone
number

0017

()

Extension
number

0027

Fax
number

0016

()

Hour(s)

Minutes

How long did you spend collecting the data and completing the questionnaire?

9910

9909

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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FOR
INFORMATION
ONLY

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

Visit our website at www.statcan.ca