

APPENDIX A1 – Resolution concerning statistics of employment in the informal sector, adopted by the 15th International Conference of Labour Statisticians, 1995

Resolution concerning statistics of employment in the informal sector,
adopted by the Fifteenth International Conference of Labour Statisticians
(January 1993)

The Fifteenth International Conference of Labour Statisticians,

Recalling paragraph 33 of the resolution concerning statistics of the economically active population, employment, unemployment and underemployment (resolution I), adopted by the Thirteenth Conference (1982) and the resolution concerning the informal sector (resolution VIII), adopted by the Fourteenth Conference (1987),

Considering that statistics on employment in the informal sector are especially needed in order to improve the statistical systems of countries where informal sector activities account for a significant proportion of total employment and income generation,

Observing the development of concepts and techniques for obtaining and analysing such statistics in a number of countries,

Recognizing that although these concepts and techniques will be further improved in the light of additional experience, there is currently a need for international standards to provide technical guidelines as a basis for the development of suitable definitions and classifications of informal sector activities and the design of appropriate data collection methods and programmes, and recognizing the usefulness of such standards in enhancing the international comparability of statistics,

Adopts this twenty-eighth day of January 1993 the following resolution:

OBJECTIVES

1. Countries where the informal sector plays a significant role in employment and income generation and economic and social development should aim, where practicable, at developing a comprehensive system of statistics on employment in the informal sector to provide an adequate statistical base for the various users of the statistics, with account being taken of specific national needs and circumstances. The system to be developed should contribute to the improvement of labour statistics and national accounts as an information base for macroeconomic analysis, planning, policy formulation and evaluation, to the integration of the informal sector into the development process and to its institutionalisation. It should provide quantitative information on the contribution of the informal sector to various aspects of economic and social development, including employment creation, production, income generation, human capital formation and the mobilisation of financial resources. The system may also provide data for the design and monitoring of specific support policies and assistance programmes for the informal sector as a whole or parts thereof with a view to increasing the productive potential and employment- and income-generating capacity of informal sector units, improving the working conditions and social and legal protection of informal sector workers, developing an appropriate regulatory framework and promoting the organisation of informal sector producers and workers, and for the analysis of the economic and social situation of particular groups of informal sector workers such as women, children, rural-urban migrants or immigrants.

2. In order to fulfil the above objectives, comprehensive, detailed and reliable statistics should, as far as possible, be compiled on: (i) the total number of informal sector units, classified by various structural characteristics to provide information on the composition of the informal sector and identify particular segments; (ii) total employment in such units, including information on the number of persons engaged by socio-demographic and other characteristics and on the conditions of their employment and work; (iii) production and incomes generated through informal sector activities, derived, where possible, from data on outputs, inputs and related transactions; and (iv) other characteristics pertaining to conditions under which informal sector units are created and carry out their activities, including their relationships with other units inside and outside the informal sector.

3. In order to enhance their comparability and usefulness, statistics on the informal sector should, as far as possible, be compatible with other related economic and social statistics and with national accounts as regards the definitions, classifications and reference periods used.

4. Statistics on the informal sector should be compiled at regular intervals so that changes in the size and characteristics of the informal sector over time can be monitored adequately. The frequency of data collection may vary according to the different types of statistics mentioned in paragraph 2, survey methods required and their implications for the use of human and financial resources.

CONCEPT

5. (1) The informal sector may be broadly characterised as consisting of units engaged in the production of goods or services with the primary objective of generating employment and incomes to the persons concerned. These units typically operate at a low level of organisation, with little or no division between labour and capital as factors of production and on a small scale. Labour relations – where they exist – are based mostly on casual employment, kinship or personal and social relations rather than contractual arrangements with formal guarantees.

(2) Production units of the informal sector have the characteristic features of household enterprises. The fixed and other assets used do not belong to the production units as such but to their owners. The units as such cannot engage in transactions or enter into contracts with other units, nor incur liabilities, on their own behalf. The owners have to raise the necessary finance at their own risk and are personally liable, without limit, for any debts or obligations incurred in the production process. Expenditure for production is often indistinguishable from household expenditure. Similarly, capital goods such as buildings or vehicles may be used indistinguishably for business and household purposes.

(3) Activities performed by production units of the informal sector are not necessarily performed with the deliberate intention of evading the payment of taxes or social security contributions, or infringing labour or other legislations or administrative provisions. Accordingly, the concept of informal sector activities should be distinguished from the concept of activities of the hidden or underground economy.

OPERATIONAL DEFINITIONS

Informal sector

6. (1) For statistical purposes, the informal sector is regarded as a group of production units which, according to the definitions and classifications provided in the United Nations System of National Accounts (Rev.4), form part of the household sector as household enterprises or, equivalently,

unincorporated enterprises owned by households as defined in paragraph 7.

(2) Within the household sector, the informal sector comprises (i) "informal own-account enterprises" as defined in paragraph 8; and (ii) the additional component consisting of "enterprises of informal employers" as defined in paragraph 9.

(3) The informal sector is defined irrespective of the kind of workplace where the productive activities are carried out, the extent of fixed capital assets used, the duration of the operation of the enterprise (perennial, seasonal or casual), and its operation as a main or secondary activity of the owner.

Household enterprises

7. According to the United Nations System of National Accounts (Rev.4), household enterprises (or, equivalently, unincorporated enterprises owned by households) are distinguished from corporations and quasi-corporations on the basis of the legal organisation of the units and the type of accounts kept for them. Household enterprises are units engaged in the production of goods or services which are not constituted as separate legal entities independently of the households or household members that own them, and for which no complete sets of accounts (including balance sheets of assets and liabilities) are available which would permit a clear distinction of the production activities of the enterprises from the other activities of their owners and the identification of any flows of income and capital between the enterprises and the owners. Household enterprises include unincorporated enterprises owned and operated by individual household members or by two or more members of the same household as well as unincorporated partnerships formed by members of different households.

Informal own-account enterprises

8. (1) Informal own-account enterprises are household enterprises (in the sense of paragraph 7) owned and operated by own-account workers, either alone or in partnership with members of the same or other households, which may employ contributing family workers and employees on an occasional basis, but do not employ employees on a continuous basis and which have the characteristics described in subparagraphs 5 (1) and (2).

(2) For operational purposes, informal own-account enterprises may comprise, depending on national circumstances, either all own-account enterprises or only those which are not registered under specific forms of national legislation.

(3) Registration may refer to registration under factories or commercial acts, tax or social security laws, professional groups' regulatory acts, or similar acts, laws, or regulations established by national legislative bodies.

(4) Own-account workers, contributing family workers, employees and the employment of employees on a continuous basis are defined in accordance with the most recently adopted version of the International Classification of Status in Employment (ICSE).

Enterprises of informal employers

9. (1) Enterprises of informal employers are household enterprises (in the sense of paragraph 7) owned and operated by employers, either alone or in partnership with members of the same or other households, which employ one or more employees on a continuous basis and which have

the characteristics described in subparagraphs 5 (1) and (2).

(2) For operational purposes, enterprises of informal employers may be defined, depending on national circumstances, in terms of one or more of the following criteria:

- (i) size of the unit below a specified level of employment;
- (ii) non-registration of the enterprise or its employees.

(3) While the size criterion should preferably refer to the number of employees employed on a continuous basis, in practice, it may also be specified in terms of the total number of employees or the number of persons engaged during the reference period.

(4) The upper size limit in the definition of enterprises of informal employers may vary between countries and branches of economic activity. It may be determined on the basis of minimum size requirements as embodied in relevant national legislations, where they exist, or in terms of empirically determined norms. The choice of the upper size limit should take account of the coverage of statistical inquiries of larger units in the corresponding branches of economic activity, where they exist, in order to avoid an overlap.

(5) In the case of enterprises which carry out their activities in more than one establishment, the size criterion should, in principle, refer to each of the establishments separately rather than to the enterprise as a whole. Accordingly, an enterprise should be considered to satisfy the size criterion if none of its establishments exceeds the specified upper size limit.

(6) Registration of the enterprise may refer to registration under specific forms of national legislation as specified in subparagraph 8 (3). Employees may be considered registered if they are employed on the basis of an employment or apprenticeship contract which commits the employer to pay relevant taxes and social security contributions on behalf of the employee or which makes the employment relationship subject to standard labour legislation.

(7) Employers, employees and the employment of employees on a continuous basis are defined in accordance with the most recently adopted version of the International Classification of Status in Employment (ICSE).

10. For particular analytical purposes, more specific definitions of the informal sector may be developed at the national level by introducing further criteria on the basis of the data collected. Such definitions may vary according to the needs of different users of the statistics.

Population employed in the informal sector

11. (1) The population employed in the informal sector comprises all persons who, during a given reference period, were employed (in the sense of paragraph 9 of resolution I adopted by the Thirteenth International Conference of Labour Statisticians) in at least one informal sector unit as defined in paragraphs 8 and 9, irrespective of their status in employment and whether it is their main or a secondary job.

(2) Where possible, the population employed in the informal sector should be subclassified into two categories: persons exclusively employed in the informal sector, and persons employed both in and

outside the informal sector. The latter category may be further divided into two subcategories: persons whose main job is in the informal sector; and persons whose secondary job is in the informal sector.

(3) If the total employed population is to be classified into mutually exclusive categories of persons employed in and outside the informal sector, persons employed both in and outside the informal sector should be classified as a separate category, or criteria should be established to determine their main job (e.g. on the basis of self-assessment, time spent at work or amount of remuneration received in each job).

(4) In some countries, a significant number of children below the age specified for measurement of the economically active population in population censuses or household surveys work in informal sector units and may represent a group of particular concern for labour legislation and educational and social policies. In such situations, every possible effort should be made in informal sector surveys to collect information on the work of all children irrespective of age, and children below the minimum age specified in population censuses or household surveys should be identified separately.

TREATMENT OF PARTICULAR CASES

12. (1) Different members of a household may be engaged as self-employed persons in different kinds of informal sector activities during a given reference period. In order to determine whether such activities should be regarded as separate enterprises or as parts of a single enterprise, due consideration should be given to the definitional requirements of an enterprise as specified in the International Standard Industrial Classification of All Economic Activities (ISIC, Rev.3). Where it is difficult in practice to apply these requirements, different activities carried out by different household members should be treated as separate enterprises if they are perceived as such by the household members themselves.

(2) A household member or group of household members may be engaged as self-employed persons in different kinds of informal sector activities during a given reference period. For practical purposes, all activities carried out at a time by the same household member or group of household members should be treated as parts of a single enterprise rather than as separate enterprises.

13. In the case of informal sector units which are engaged in different kinds of production activities during a given reference period, efforts should be made to collect as much separate information as possible in respect of each activity, even when the enterprises concerned need not or cannot be partitioned into establishments as defined by the International Standard Industrial Classification of All Economic Activities (ISIC, Rev.3). In particular, such separate information should be collected in respect of all activities of the enterprise which are horizontally integrated (i.e. producing different kinds of goods or services for sale or exchange and carried out parallel with each other), irrespective of their share in the total value added of the enterprise.

14. Household enterprises, which are exclusively engaged in non-market production, i.e. the production of goods or services for own final consumption or own fixed capital formation as defined by the United Nations System of National Accounts (Rev.4), should be excluded from the scope of the informal sector for the purpose of statistics of employment in the informal sector. Depending on national circumstances, an exception may be made in respect of households employing domestic workers as referred to in paragraph 19.

15. With account being taken of paragraph 14, the scope of the informal sector should include household enterprises located in urban areas as well as household enterprises located in rural areas.

However, countries which start to conduct surveys of the informal sector may initially confine data collection to urban areas. Depending upon the availability of resources and appropriate sampling frames, the coverage of the surveys should gradually be extended to cover the whole national territory.

16. For practical reasons, the scope of the informal sector may be limited to household enterprises engaged in non-agricultural activities. With account being taken of paragraph 14, all non-agricultural activities should be included in the scope of the informal sector, irrespective of whether the household enterprises carry them out as main or secondary activities. In particular, the informal sector should include secondary non-agricultural activities of household enterprises in the agricultural sector if they fulfil the requirements of paragraphs 8 or 9.

17. Units engaged in professional or technical activities carried out by self-employed persons such as doctors, lawyers, accountants, architects or engineers, should be included in the informal sector if they fulfil the requirements of paragraphs 8 or 9.

18. (1) Outworkers are persons who agree to work for a particular enterprise, or to supply a certain quantity of goods or services to a particular enterprise, by prior arrangement or contract with that enterprise, but whose place of work is not within any of the establishments which make up that enterprise.

(2) In order to facilitate data collection, all outworkers should be potentially included in the scope of informal sector surveys, irrespective of whether they constitute production units on their own (self-employed outworkers) or form part of the enterprise which employs them (employee outworkers). On the basis of the information collected, self-employed and employee outworkers should be distinguished from each other by using the criteria recommended in the United Nations System of National Accounts (Rev.4). Outworkers should be included in the informal sector, or in the population employed in the informal sector, if the production units which they constitute as self-employed persons or for which they work as employees fulfil the requirements of paragraphs 8 or 9.

(3) In situations where the number of outworkers is significant or where outworkers represent a group of particular concern for data users, self-employed outworkers should be identified as separate sub-categories of informal own-account enterprises and enterprises of informal employers or of the owners of such enterprises.

(4) For purposes of distinction between employment on a continuous basis and employment on an occasional basis, and in application of the definition of registered employees according to paragraph 9(6), employee outworkers should be treated in the same way as other employees. Where relevant, employee outworkers may be identified as a separate sub-category of informal sector employees.

19. Domestic workers are persons exclusively engaged by households to render domestic services for payment in cash or in kind. Domestic workers should be included in or excluded from the informal sector depending upon national circumstances and the intended uses of the statistics. In either case, domestic workers should be identified as a separate sub-category in order to enhance international comparability of the statistics.

20. Activities excluded from the scope of the informal sector, such as domestic services, non-market production and agricultural activities, may be identified as separate categories outside the distinction between the informal and formal sectors.

DATA COLLECTION PROGRAMME AND METHODS

21. (1) The collection of data on the informal sector should be integrated into the regular national statistical system. The data collection programme should provide both for (a) the current monitoring, if possible once a year, of the evolution of employment in the informal sector and (b) the in-depth examination, if possible every five years, of informal sector units with respect to their numbers and characteristics, in particular, their organisation and functioning, their production activities and levels of income generation, as well as their constraints and potentials.

(2) The data collection programme with regard to the broad objective (a) should preferably be based on a household survey approach, with households as reporting units and individual household members as observation units. With regard to the broad objective (b), the data collection programme should preferably be based on an establishment survey approach or a mixed household and enterprise survey approach, or a combination of both, with the informal sector units themselves and their owners as observation and reporting units.

(3) Other measurement methods can also be considered, such as methods of indirect macroeconomic estimation or the comparative analysis of data from different sources.

Household surveys for monitoring informal sector employment

22. (1) Existing surveys of the economically active population and similar household surveys provide a useful and economical means of collecting data on employment in the informal sector in terms of the number and characteristics of the persons concerned and the conditions of their employment and work.

(2) For this purpose, questions pertaining to the definition of the informal sector should be incorporated into the survey questionnaire and asked in respect of all persons employed during the reference period of the survey, irrespective of their status in employment.

(3) Special care should be taken in the survey design and operations to ensure comprehensive coverage of the population employed in the informal sector as defined in paragraph 11(1) above. In particular, special efforts should be made in the sample design to ensure appropriate representativeness of areas where persons engaged in informal sector activities tend to live. It is also important to collect data on secondary activities of household members in the same detail as on the main activity, including the criteria used for defining the informal sector. Special probings may be needed with respect to informal sector activities that would otherwise go unreported, such as unpaid work in family enterprises or activities carried out by women on their own account at or from home. To obtain comprehensive data on children working in the informal sector, it may also be necessary to lower the minimum age normally used in the survey for measuring characteristics of the economically active population.

(4) The data collected should be analysed in conjunction with other relevant information obtained from the same survey. In particular, a mutually exclusive breakdown may be made of the economically active population by employment in and outside the informal sector and unemployment. Depending on national circumstances and data needs, information on various forms of atypical or precarious employment outside the informal sector may be obtained along with data on the different forms of employment in the informal sector. For this purpose, all employed persons, whether working in the informal sector or outside, should be classified by status in employment at an appropriate level of disaggregation.

(5) In order to monitor trends in informal sector employment over time, questions on

employment in the informal sector should be included, if possible, once a year in existing infra-annual surveys of the economically active population or similar household surveys. Surveys conducted at less frequent intervals (e.g., annually or quinquennially) should include questions on employment in the informal sector in every survey round, if possible.

Establishment surveys of informal sector units

23. It may be possible to collect data on informal sector units through various kinds of establishment surveys depending on the measurement objectives, the intended uses of the data, the calendar and structure of the national statistical system, and the availability of sampling frames and resources.

24. (1) In conjunction with an establishment or economic census or using the latest economic census as an area sampling frame, special surveys of informal establishments may be conducted to collect specific data on employment, production, income generation and other characteristics of informal sector units and their owners.

(2) For this purpose, the economic census should, in principle, contain the required items for identifying the informal sector units according to the definition set forth in paragraph 6. However, as the observation unit in economic censuses is typically the establishment, the reconstitution of informal sector enterprises on the basis of the available information may not be easy to achieve in practice.

(3) Unless particular measures are taken, the coverage of such surveys of informal sector establishments is limited by the scope of the economic census on which they are based. In particular, coverage typically excludes informal sector units which do not operate in fixed premises designated for the purpose of carrying out production activities or which are not identifiable as such from the outside during the listing operation.

(4) While it is generally preferable to cover all types of informal sector activities through a single survey, branch-specific surveys or a series of such surveys may be considered if the measurement objectives are limited to particular kinds of informal sector activities, or if the scale of a single survey is considered too large to be manageable in practice.

(5) In a branch-specific survey, the listing operation should be such as to identify all and only those informal sector units that fall within the scope of the survey. Rules need to be established for informal sector units also engaged in other activities, particularly if some of these activities fall outside the scope of the survey.

(6) When the intention is to cover all types of informal sector activities through a series of branch-specific surveys rather than a single survey, the data collection programme should be designed to ensure a comprehensive coverage of informal sector units without omission or duplication between surveys. The timing of the surveys and the methodology to obtain overall aggregates should be carefully planned.

Mixed household and enterprise surveys

25. (1) The basic principle of mixed household and enterprise surveys is to construct a sampling frame of informal sector enterprises through a household survey operation, prior to the informal sector survey itself. The household survey component, if appropriately designed, makes it possible to

identify informal sector enterprises rather than establishments, and to cover virtually all informal sector units irrespective of size, kind of activity, and type of workplace.

(2) Mixed household and enterprise surveys are based on area sampling and conducted in two phases: (i) informal sector enterprises and their working owners are identified during the first phase through a household listing or interviewing operation (household survey component); (ii) all or a sample of the business owners thus identified are interviewed during the second phase to obtain information on the characteristics of their enterprises (enterprise survey component).

26. (1) The time interval between the two phases should be kept as short as possible, to minimise loss rates of units.

(2) Informal sector enterprises should be identified on the basis of own-account workers and employers who are members of the sample households. Identification based on employees of informal sector units should be avoided.

(3) In order to avoid omissions, the household survey component must be targeted to all employers and own-account workers in the sample who are potentially included in the informal sector. The informal sector units are then subsequently identified on the basis of the information obtained from the enterprise survey component.

(4) While information during the first phase of the survey may often have to be obtained from proxy respondents, it is highly desirable in the second phase that the business owners themselves are interviewed. Where relevant, these interviews should preferably be conducted at the place of work rather than the place of residence of the household member.

27. (1) Since informal sector enterprises may be owned and operated by members of different households in business partnership, and such partnerships may differ significantly from other units in their characteristics, an appropriate procedure should be adopted, at the selection stage of the informal sector units, or, preferably, at the stage of assigning the sampling weights, to ensure that the resulting statistics are representative of the total survey universe. The sampling weights should be determined with great care.

(2) For a comprehensive coverage, all informal sector enterprises and their operators in the sample areas or in the sample households should be identified in the first phase of the survey. In particular, businesses operated as secondary activities of household members should be identified on the same basis as businesses operated as main activities. Special probing may also be necessary to identify women and children engaged in informal sector activities on their own account.

28. If information on seasonal variations of informal sector activities is to be obtained and annual estimates of the main aggregates are to be produced, data collection should be spread over a period of a whole year by dividing the sample into independent subsamples for different quarters or months of the year.

29. The nature and efficiency of the survey design of a mixed household and enterprise survey will depend on whether the survey is conceived as (i) an independent survey, (ii) an attachment to an existing household survey, or (iii) part of an integrated survey designed to meet several objectives.

30. (1) In an independent survey, the sampling scheme may be designed to satisfy the specific requirements of informal sector measurement and to ensure an adequate representation of different types of informal sector activities or units in the sample.

(2) A sufficiently stratified sample at the first stage of selection helps avoid the need for differential last stage sampling rates for different categories of informal sector units and facilitates survey implementation in the field. Using the latest population census or other available information, an area sampling frame for the household survey component should be constructed so as to consist of area units of the desired size, stratified as far as possible according to the concentration of households that operate informal sector units. Provided data are available from the population census and retrievable at a sufficient level of geographical detail, the stratification of area units may be based on the concentration of own-account workers and employers by broad industry group, and, if possible, by type of location of the workplace and, for employers, by number of their employees. Where such data are not available, provision should be made to obtain them from the next population census.

(3) The household survey component of an independent mixed survey may be restricted to a household listing operation in the selected area units, in which information is obtained on the composition of the household and, in respect of each household member of working age, whether the person operated, as main or secondary activity, any informal sector business during a specified reference period. Basic information on the type of workplace, its location, branch of economic activity, and, if possible, number of employees should also be obtained.

31. (1) If the enterprise survey component of a mixed survey is conceived as an attachment to an existing household survey (e.g. a labour force survey or a household income and expenditure survey) efforts should be made to make up for the limitations resulting from the design and selection of the base survey sample.

(2) The effective sample size of the enterprise survey component may be increased by selecting the sample of informal sector units on the basis of all households identified during the listing operation of the base survey rather than only those selected for the base survey sample. Alternative procedures would be to add, if resources are available, appropriately chosen supplementary areas to the base survey sample, or, if the base survey is of a continuing nature, to cumulate the subsamples of informal sector units over several rounds.

32. In developing integrated surveys for the collection of data on the informal sector and other topics (e.g. labour force, household economic activities), the requirements of informal sector measurement can be incorporated, to a greater or lesser extent, into the overall design of the survey, through appropriate methods of sample allocation and selection. The major requirement of the informal sector component is adequate representation of the different types of informal sector activities and units in the sample.

ITEMS OF DATA COLLECTION

33. (1) The type of data to be collected on the informal sector depends largely upon the specific circumstances in each country, methods of data collection, the intended uses of the statistics and the practical feasibility of data collection. For determination of the items of data collection, the main users of the statistics should be consulted and the results of previous surveys analysed or pilot surveys conducted.

(2) In order to enhance the usefulness of informal sector statistics for joint analysis with other related economic and social statistics and for the purposes of international comparison, the definitions and classifications of the items of data collected should, as far as possible, be compatible with those used in other national surveys or censuses and correspond to the most recently adopted versions of relevant international recommendations and standard classifications.

34. The statistics obtained should include, as a minimum, the number of persons engaged in informal sector units by status in employment and by kind of economic activity and, if possible, the number of informal sector enterprises by kind of economic activity and by type (i.e. informal own-account enterprises, enterprises of informal employers).

35. (1) In addition, data may be collected in more or less detail and with appropriate frequencies on any one or more of the following topics:

- (i) Employment and working conditions: number of persons engaged in informal sector units during the reference period by sex, age, migration characteristics, school attendance, educational attainment, kind of vocational training received, occupation, time spent at work and, where possible, other jobs held in or outside the informal sector taking account of the categories and subcategories mentioned in paragraph 11(2); number of employees by nature of employment (continuous, casual; registered, not registered); compensation of employees and its components (wages and salaries in cash or in kind, employers' social contributions), frequency and mode of remuneration, entitlement to paid annual or sick leave, etc.
- (ii) Production, income generation and fixed capital: frequency of operation (perennial, seasonal, casual); duration of operation during the reference period; quantity and value of outputs produced during the reference period; total amount of sales; intermediate consumption; taxes paid on production and subsidies received, if any; property income received and property charges payable in connection with business activities; characteristics of loans taken for business activities; fixed assets owned by the units; fixed capital formation during the reference period; etc.
- (iii) Conditions of business operation: legal organisation of the units; type of accounts kept; type of ownership (individual ownership, household ownership, business partnership with members of other households); number of business partners from other households, if any; location (urban versus rural areas); type of workplace: workshop, shop, etc., fixed market or street stall, home of the enterprise owner, no fixed place (e.g. homes of clients, construction sites, mobile); type and number of customers, or proportion of output sold to different types of customers; extent and terms of work performed for other enterprises under subcontracting arrangements; sources of capital for the acquisition of fixed assets; origin of the main goods used for further processing or resale (importation, informal sector, other); type of registration or licensing of units; availability of public utilities at the place of work; participation in informal sector support programmes and kind of assistance received, if any; membership in associations or cooperatives of informal sector producers; problems faced in the creation of enterprises and constraints on their operation or expansion; year of creation and evolution of enterprises; etc.
- (iv) Enterprise owners: sex; age; marital status; place or country of origin; period of residence in the present area; previous place of residence, if any; educational attainment; acquisition of skills needed to conduct the business (formal versus informal kinds of training); present occupation; time spent at work in the business during the reference period; engagement in other economic activities; characteristics of other economic activities, if any, and main source of income of enterprise owners; reasons for working in the informal sector; characteristics of previous employment in or outside the informal sector, if any; plans for the future

regarding business development or alternative employment; etc.

- (v) Households of the enterprise owners: other household members by sex, age, marital status, relationship to the reference person and activity status; employment characteristics of other household members employed in or outside the informal sector; amount and sources of income of the households; etc.

(2) For the purposes of national accounting, the collection of data on the production and incomes generated by informal sector units should aim at providing the elements needed for the estimation of gross output, value added and mixed income (operating surplus) as defined in the United Nations System of National Accounts (Rev.4).

(3) Since production activities of informal sector units often overlap with consumption activities of the households of the enterprise owners, efforts should be made in the collection of data on intermediate consumption, property charges and fixed assets to separate usage for business purposes from usage for household consumption. If a clear distinction is not possible, the expenditures concerned should at least be allocated approximately in proportion to the use for business purposes.

(4) In the case of informal sector units engaged in several different kinds of production activities, inputs into production in the form of labour, capital, goods or services, which cannot be clearly allocated to a specific kind of activity, should be distributed in an appropriate way over all activities for which they are used.

(5) The collection of data on characteristics of the households of the enterprise owners enables informal sector activities to be analysed in the context of households as a whole. Such analyses may include studies of the role of other household members in providing additional income to households and the impact of the household situation on the activities of women in the informal sector.

SUB-CLASSIFICATIONS

36. (1) In order to provide information on the composition of the informal sector and to identify more homogeneous groups for analytical purposes, as targets for social and economic policies and informal sector support programmes, and as basis for comparisons of statistics over time and between countries, informal sector units should be sub-classified by various characteristics on the basis of the information collected.

(2) Enterprises of informal employers, when included in statistics of the informal sector, should be identified separately from informal own-account enterprises.

(3) Useful sub-classifications of informal own-account enterprises and enterprises of informal employers, both for the analysis of informal sector statistics at the national level and international comparison, include distinctions according to the following characteristics:

- (i) kind of economic activity;
- (ii) type of workplace: home of enterprise owner, other fixed premises, no fixed place;
- (iii) location: urban areas, rural areas;

- (iv) number of persons engaged;
- (v) type of ownership: individual ownership, household ownership, business partnership with members of other households;
- (vi) relation with other enterprises: independent producers, producers working under subcontracting arrangements for other enterprises.

(4) In addition, it may be useful to sub-classify informal own-account enterprises according to the composition of their workforce, distinguishing one-person units from two-and-more person units and, among the latter, users of occasional hired labour from non-users of such labour.

(5) Depending on the needs of data users and the size of samples, two or more of these characteristics may be combined into more complex classification schemes.

(6) For the purpose of international comparisons, the classification by kind of economic activity should adhere to or be convertible into the International Standard Industrial Classification of All Economic Activities (ISIC, Rev.3). For international reporting of the statistics, data should be provided at the level of ISIC tabulation categories, except for category "Wholesale and retail trade; repair of motor vehicles, motorcycles and personal and household goods" which should be subdivided appropriately. For other purposes, data classified according to kind of economic activity may be required in as much detail as is supported by the size of the samples. To reflect the diversity of informal sector activities, it may be necessary to develop appropriate further sub-divisions of some of the groups which the activity classification commonly used provides at its most detailed level. To ensure the comparability of informal sector statistics with other statistics, any such sub-divisions should be so defined that the data can be aggregated to higher level categories of the classification without cutting across their boundaries. Units engaged in more than one activity during the reference period should be classified according to their main activity which may be defined as that with the largest value added.

(7) The size intervals used for the sub-classification by number of persons engaged should be consistent with the standard size intervals recommended for the 1983 World Programme of Industrial Statistics, i.e. 1-4, 5-9, 10-19, etc. persons engaged. Depending upon the intended uses of the statistics, these intervals may be further subdivided.

FURTHER ACTION

37. (1) In view of the particular characteristics of informal sector units and their owners, special efforts should be made in the design and operations of informal sector surveys to increase response rates and obtain the required information as accurately as possible.

(2) Countries collecting data on the informal sector should share their experiences with the International Labour Office.

38. (1) The International Labour Office should follow the developments in designing and implementing informal sector surveys, as well as surveys of household economic activities, disseminate and evaluate information about the lessons being learned from this experience for discussion at the next International Conference of Labour Statisticians, prepare a manual to provide technical guidelines on the contents of this resolution which reflects such improvements in concepts and techniques and, if necessary, arrange for a review of this resolution by a future International Conference of Labour Statisticians.

(2) The International Labour Office should cooperate, as far as possible, with countries in the development of statistics of employment in the informal sector in providing technical assistance and training.

APPENDIX A2 – Guidelines concerning a statistical definition of informal employment, endorsed by the 17th International Conference of Labour Statisticians, 2003

Guidelines concerning a statistical definition of informal employment

The Seventeenth International Conference of Labour Statisticians (ICLS),

Acknowledging that the relevance of informal employment varies among countries, and that a decision to develop statistics on it is therefore determined by national circumstances and priorities,

Noting that the term “informal economy” is used by the ILO as including the informal sector as well as informal employment and that, as a supplement to the System of National Accounts, 1993, an international conceptual framework for measurement of the non-observed economy already exists, which distinguishes the informal sector from underground production, illegal production and household production for own final use,

Recalling the existing international standards on statistics of employment in the informal sector contained in the resolution concerning statistics of employment in the informal sector adopted by the 15th ICLS (January 1993),

Noting the recommendation made by the Expert Group on Informal Sector Statistics (Delhi Group), during its Fifth Meeting, that the definition and measurement of employment in the informal sector need to be complemented with a definition and measurement of informal employment,

Emphasizing the importance of consistency and coherence in relating the enterprise-based concept of employment in the informal sector to a broader, job-based concept of informal employment,

Considering the methodological work, which the International Labour Office and a number of countries have already undertaken in this area,

Supporting the request, which was made by the International Labour Conference in paragraph 37(n) of the resolution concerning decent work and the informal economy adopted during its 90th Session (2002), that the International Labour Office should assist countries in the collection, analysis and dissemination of statistics on the informal economy,

Recognizing that the considerable diversity of informal employment situations poses limits to the extent to which statistics on informal employment can be harmonized across countries,

Realizing the usefulness of international guidelines in assisting countries in the development of national definitions of informal employment, and in enhancing the international comparability of the resulting statistics to the extent possible,

Endorses the following guidelines, which complement the resolution concerning statistics of employment in the informal sector of the 15th ICLS, and encourages countries to test the conceptual framework on which they are based:

1. The concept of informal sector refers to production units as observation units, while the concept of informal employment refers to jobs as observation units. Employment is defined in the sense of paragraph 9 of the resolution concerning statistics of the economically active population, employment, unemployment and underemployment adopted by the 13th ICLS.

2. Informal sector enterprises and employment in the informal sector are defined according to the resolution concerning statistics of employment in the informal sector adopted by the 15th ICLS. For the purpose of statistics on informal employment, paragraph 19 of the resolution concerning statistics of employment in the informal sector adopted by the 15th ICLS should be applied to exclude households employing paid domestic workers from informal sector enterprises, and to treat them separately as part of a category named “households”.

3. (1) *Informal employment* comprises the total number of informal jobs as defined in subparagraphs (2) to (5) below, whether carried out in formal sector enterprises, informal sector enterprises, or households, during a given reference period.

(2) As shown in the attached matrix, informal employment includes the following types of jobs:

- (i) own-account workers employed in their own informal sector enterprises (cell 3);
- (ii) employers employed in their own informal sector enterprises (cell 4);
- (iii) contributing family workers, irrespective of whether they work in formal or informal sector enterprises (cells 1 and 5);
- (iv) members of informal producers' cooperatives (cell 8);
- (v) employees holding informal jobs (as defined in subparagraph (5) below) in formal sector enterprises, informal sector enterprises, or as paid domestic workers employed by households (cells 2, 6 and 10);
- (vi) own-account workers engaged in the production of goods exclusively for own final use by their household (cell 9), if considered employed according to paragraph 9(6) of the resolution concerning statistics of the economically active population, employment, unemployment and underemployment adopted by the 13th ICLS.

(3) Own-account workers, employers, members of producers' cooperatives, contributing family workers, and employees are defined in accordance with the latest version of the International Classification of Status in Employment (ICSE).

(4) Producers' cooperatives are considered informal if they are not formally established as legal entities and also meet the other criteria of informal sector enterprises specified in the resolution concerning statistics of employment in the informal sector adopted by the 15th ICLS.

(5) Employees are considered to have informal jobs if their employment relationship is, in law or in practice, not subject to national labour legislation, income taxation, social protection or entitlement to certain employment benefits (advance notice of dismissal, severance pay, paid annual or sick leave, etc.). The reasons may be the following: non-declaration of the jobs or the employees; casual jobs or jobs of a limited short duration; jobs with hours of work or wages below a specified threshold (e.g. for social security contributions); employment by unincorporated enterprises or by persons in households; jobs where the employee's place of work is outside the premises of the employer's enterprise (e.g. outworkers without employment contract); or jobs for which labour regulations are not applied, not enforced, or not complied with for any other reason. The operational criteria for defining informal jobs of employees are to be determined in accordance with national circumstances and data availability.

(6) For purposes of analysis and policy-making, it may be useful to disaggregate the different types of informal jobs listed in paragraph 3(2) above, especially those held by employees. Such a typology and definitions should be developed as part of further work on classifications by status in employment at the international and national levels.

4. Where they exist, employees holding formal jobs in informal sector enterprises (cell 7 of the attached matrix) should be excluded from informal employment.

5. *Informal employment outside the informal sector* comprises the following types of jobs:

- (i) employees holding informal jobs (as defined in paragraph 3(5) above) in formal sector enterprises (cell 2) or as paid domestic workers employed by households (cell 10);
- (ii) contributing family workers working in formal sector enterprises (cell 1);

- (iii) own-account workers engaged in the production of goods exclusively for own final use by their household (cell 9), if considered employed according to paragraph 9(6) of the resolution concerning statistics of the economically active population, employment, unemployment and underemployment adopted by the 13th ICLS.

6. Countries which do not have statistics on employment in the informal sector or for which a classification of employment by type of production unit is not relevant, may develop statistics on informal employment, if desired, specifying appropriate definitions of informal jobs of own-account workers, employers and members of producers' cooperatives. Alternatively, they may limit the measurement of informal employment to employee jobs.

7. Countries which exclude agricultural activities from the scope of their informal sector statistics should develop suitable definitions of informal jobs in agriculture, especially with respect to jobs held by own-account workers, employers and members of producers' cooperatives.

Annex

Conceptual Framework: Informal Employment

Production units by type	Jobs by status in employment									
	Own-account workers		Employers		Contributing family workers	Employees		Members of producers' cooperatives		
	Informal	Formal	Informal	Formal	Informal	Informal	Formal	Informal	Formal	
Formal sector enterprises					1	2				
Informal sector enterprises ^(a)	3		4		5	6	7	8		
Households ^(b)	9					10				

- (a) As defined by the Fifteenth International Conference of Labour Statisticians (excluding households employing paid domestic workers).
- (b) Households producing goods exclusively for their own final use and households employing paid domestic workers.

Note: Cells shaded in dark grey refer to jobs, which, by definition, do not exist in the type of production unit in question. Cells shaded in light grey refer to formal jobs. Un-shaded cells represent the various types of informal jobs.

Informal employment: Cells 1 to 6 and 8 to 10.

Employment in the informal sector: Cells 3 to 8.

Informal employment outside the informal sector: Cells 1, 2, 9 and 10.

APPENDIX B1 – Proposed layouts for tabulations

GROUP A. Tabulations dealing with total population

Table A. Total population by sex and household composition according to activity status and age group

Activity status and age group	Total	Male				Female			
		All	Married or cohabiting with small children	Other married or cohabiting	Not married or cohabiting with small children	Other married or cohabiting	Married or cohabiting with small children	Not married or cohabiting with small children	Other not married or cohabiting
Total population (all ages)									
Working age population									
In the labour force									
Unemployed									
Employed									
Employed in agriculture									
Formal employment									
Informal employment									
Employed in non-agriculture									
Formal employment									
Informal employment									
Not in the labour force									
Under 15 years									
15-24 years									
<activity status categories>									
25 – 54 years									
<activity status categories>									
...									
55 years or more									
<activity status categories>									

GROUP B. Tabulations dealing with employed persons

Tables B.1- B.3. Employed persons by status in employment and nature of the job, according to type of production unit, sex and type of area

Type of production unit, sex and type of area	Total			Own-account workers, employers, members of producers' cooperatives		Contributing family workers		Employees	
	Total employment	Formal employment	Informal employment	Formal employment	Informal employment	Informal employment	Informal employment	Formal employment	Informal employment
Total									
Formal sector units									
Public ownership									
Private ownership				n.a.	n.a.	n.a.			
Other form of ownership									
Informal sector units									
Households				n.a.	n.a.				
Producing goods exclusively for own final use		n.a.		n.a.		n.a.		n.a.	n.a.
Employing paid domestic workers									
Male				n.a.	n.a.	n.a.			
Type of production unit									
Female									
Type of production unit									
Urban									
Type of production unit									
Rural									
Type of production unit									

1. All kinds of economic activity
2. Agriculture, forestry and fishing
3. Other kinds of economic activity

Table B.4. Employed persons by type of production unit and nature of the job, according to kind of economic activity and type of institutional unit

Kind of economic activity and type of institutional unit	Total			Formal sector enterprises			Informal sector enterprises			Households producing goods for own final use			Households employing paid domestic workers		
	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Informal employment	Informal employment	Total employment	Formal employment	Informal employment
Total															
Corporation															
Financial							n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Non-financial							n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Government							n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
NPISH*							n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Household															
Kind of activity 1															
Institutional unit															
Kind of activity 2															
Institutional unit															
...															

* Non-profit institution serving households.

Tables B.5-B.16. Employed persons by type of production unit and nature of the job, according to <variable>, sex and type of area

<variable>, sex and type of area	Total			Formal sector enterprises			Informal sector enterprises			Households producing goods for own final use			Households employing paid domestic workers		
	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Informal employment	Household employment	Total employment	Formal employment	Informal employment
Total															
<variable>															
Male															
<variable>															
Female															
<variable>															
Urban															
<variable>															
Rural															
<variable>															

<variables>

5. Type of institutional unit
6. Kind of economic activity
7. Occupation
8. Number of persons engaged in the production unit
9. Type of workplace
10. Duration of employment
11. Number of usual hours of work per week
12. Number of hours actually worked during the reference week
13. Level of monthly employment-related income (in categories)
14. Age groups
15. Educational level
16. Method of training

Tables B.17-B.18. Employed persons wanting to work more hours by type of production unit and nature of the job, according to <variable>, sex and type of area

<variable>, sex and type of area	Total			Formal sector enterprises			Informal sector enterprises			Households producing goods for own final use			Households employing paid domestic workers		
	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Informal employment	Formal employment	Total employment	Formal employment	Informal employment
Total															
<variable>															
Male															
<variable>															
Female															
<variable>															
Urban															
<variable>															
Rural															
<variable>															
<variables>															

17. Reason for wanting to work more hours

18. Number of hours actually worked during the reference week

Table B.19. Employed persons seeking another job by type of production unit and nature of the job, according to reason for seeking another job, sex and type of area

Reason for seeking another job, sex and type of area	Total			Formal sector enterprises			Informal sector enterprises			Households producing goods for own final use	Households employing paid domestic workers		
	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment		Total employment	Formal employment	Informal employment
Total													
Higher income													
Lack of job security or tability													
reason													
Male													
Reasons													
Female													
Reasons													
Urban													
Reasons													
Rural													
Reasons													

GROUP C. Tabulations dealing with employees

Table C.1. Employees by type of production unit and nature of the job, according to conditions of employment, sex and type of area

Conditions of employment, sex and type of area	Total			Formal sector enterprises			Informal sector enterprises			Households employing paid domestic workers		
	Total employ- ment	Formal employ- ment	Informal employ- ment	Total employ- ment	Formal employ- ment	Informal employ- ment	Total employ- ment	Formal employ- ment	Informal employ- ment	Total employ- ment	Formal employ- ment	Informal employ- ment
Total												
Contract without limit of time												
Yes												
No												
Written employment contract												
Yes												
No												
Employers' social contribution												
Yes												
No												
Paid annual leave												
Yes												
No												
Paid sick leave												
Yes												
No												
Male												
Conditions of employment												
Female												
Conditions of employment												
Urban												
Conditions of employment												
Rural												
Conditions of employment												

Table C.2-C.7. Employees by type of production unit and nature of the job, according to <variable> and conditions of employment

<variables> and conditions of employment	Total			Formal sector enterprises			Informal sector enterprises			Households employing paid domestic workers		
	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment	Total employment	Formal employment	Informal employment
Total												
<variable>												
Contract without limit of time (yes/no)												
<variable>												
Written employment contract (yes/no)												
<variable>												
Employers' social contribution												
<variable>												
Paid annual leave												
<variable>												
Paid sick leave												
<variable>												

<variables>

- Age group
- Educational level
- Method of training
- Kind of economic activity
- Occupation
- Level of monthly earnings (category of earnings)

GROUP D. Tabulations dealing with persons in informal employment

Tables D.1-D.7. Persons in informal employment by status in employment and sex, according to kind of economic activity and <variable>

Kind of economic activity <variables>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
Kind of economic activity 1												
<variable>												
Kind of economic activity 2												
<variable>												
...												

<variables>

1. Educational level
2. Method of training
3. Number of persons engaged
4. Type of workplace
5. Duration of employment
6. Usual hours of work
7. Level of monthly employment-related income

Tables D.8-D.11. Persons in informal employment by status in employment and sex, according to occupation and <variable>

Occupation <variable>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
Occupation 1												
<variable>												
Occupation 2												
<variable>												
...												

<variables>

8. Educational level
9. Method of training
10. Usual hours of work
11. Level of monthly employment-related income

Tables D.12-D.13. Persons in informal employment by status in employment and sex, according to type of workplace and <variable>

Type of workplace and <variables>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
At own home												
<variable>												
Client or employer's home												
<variable>												
Other fixed premises												
<variable>												
Agricultural land												
<variable>												
Construction site												
<variable>												
Market or street stall												
<variable>												
Without fixed location												
<variable>												

<variables>
12. Number of persons engaged
13. Duration of employment

Tables D.14-D.15. Persons in informal employment by status in employment and sex, according to duration of employment, <variable> and level of monthly employment-related income

Duration of employment, <variable> and level of monthly employment-related income	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
Less than 3 months												
<variable>												
3 to under 6 months												
<variable>												
6 to under 12 months												
<variable>												
1 to under 5 year												
<variable>												
5 to under 10 years												
<variable>												
Monthly employment-related income												
Category 1												
Duration of employment and <variable>												
Category 2												
Duration of employment and <variable>												
....												
<variables>												
14. Kind of economic activity												
15. Occupation												

Tables D.16-D.18. Persons in informal employment by status in employment and sex, according to level of monthly employment-related income and <variable>

Level of monthly employment-related income <variable>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
Monthly employment-related income – category 1												
<variable>												
Monthly employment-related income – category 2												
<variable>												
...												
<variables>												
16. Educational level												
17. Usual hours of work												
18. Type of workplace												

GROUP E. Tabulations dealing with persons employed in the informal sector

Tables E.1-E.7. Persons employed in the informal sector by status in employment and sex, according to kind of economic activity and <variable>

Kind of economic activity <variable>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
SECTION A												
<variable>												
SECTION B												
<variable>												
...												
<variables>												
1. Educational level												
2. Method of training												
3. Number of persons engaged												
4. Type of work-place												
5. Duration of employment												
6. Usual hours of work												
7. Level of monthly employment-related income												

Tables E.8-E.11. Persons employed in the informal sector by status in employment and sex, according to occupation and <variable>

Occupation <variable>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
Occupation 1 <variable>												
Occupation 2 <variable>												
...												

- <variables>
- 8. Educational level
 - 9. Method of training
 - 10. Usual hours of work
 - 11. Level of monthly employment-related income

Tables E.12-E.13. Persons employed in the informal sector by status in employment and sex, according to type of workplace and <variable>

Type of workplace <variable>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
At own home												
<variable>												
Client or employer's home												
<variable>												
Other fixed premises												
<variable>												
Agricultural land												
<variable>												
Construction site												
<variable>												
Market or street stall												
<variable>												
Without fixed location												
<variable>												

<variables>
12. Number of persons engaged
13. Duration of employment

Tables E.14-E.18. Persons employed in the informal sector by status in employment and sex, according to level of monthly employment-related income, <variable 1> and <variable 2> plain 2

Level of monthly employment-related income, <variable 1> and <variable 2>	Total			Own-account workers, employers, members of producers' cooperatives			Contributing family workers			Employees		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total												
Level of monthly employment-related income												
Category 1												
<variable 1> category 1												
<variable 2>												
<variable 1> category 2												
<variable 2>												
...												
Category 2												
<variable 1> category 1												
<variable 2>												
<variable 1> category 2												
<variable 2>												
...												

- <variables>
- 14. Educational level and method of training
 - 15. Duration of employment and kind of economic activity
 - 16. Duration of employment and occupation
 - 17. Usual hours of work
 - 18. Type of workplace

GROUP F. Tabulations dealing with informal sector units

Tables F.1-F.17. Informal sector units by sex of the entrepreneur and status in employment, according to type of area (urban/rural), kind of economic activity and <variable>

Kind of economic activity and <variable>	Total			Male			Female		
	Total	Own account workers	Employers	Total	Own account workers	Employers	Total	Own account workers	Employers
Total									
<variable>									
Manufacturing									
<variable>									
...									
<variable>									

<variables>

1. Type of ownership and number of partners, if any
2. Duration of operation
3. Main problems faced
4. Type of workplace
5. Number of persons engaged in the production unit and status in employment
6. Bookkeeping practices
7. Relation with other enterprises (independent or producing for other enterprises as subcontracting)
8. Whether credit was obtained and type of credit
9. Number and type of customers
10. Membership of associations or cooperatives, by type
11. Availability of public utilities
12. Participation in support programmes by type
13. Number of employees engaged
14. Number of contributing family workers
15. Range of value added during the reference period
16. Type of assets bought or rented during the reference period
17. Type of assets sold or leased during the reference period

Table F.18. Average output sold, output produced, output produced for own final use, intermediate consumption, change in inventories and value added, per day of business operation during the reference period, according to kind of economic activity and sex of the entrepreneur

Kind of economic activity Sex	Output sold	Average gross output	Output produced for own final use	Intermediate consumption	Change in inventories	Value added
Total						
Kind of economic activity 1						
Male						
Female						
Kind of economic activity 2						
Male						
Female						
...						

GROUP G. Tabulations dealing with informal sector entrepreneurs

Tables G.1-G.13. Informal sector entrepreneurs by sex and status in employment, according to <variable>

<variable>	Total			Male			Female		
	Total	Own account workers	Employers	Total	Own account workers	Employers	Total	Own account workers	Employers
Total									
<variable>									
<variables>									
1. Age group									
2. Level of education									
3. Marital status									
4. Place or country of origin									
5. Whether has a bank account									
6. Member of a cooperative by type (consumer, producer)									
7. Hours actually worked									
8. Occupation									
9. Whether has other jobs and status in employment in other jobs									
10. Main source of income									
11. Plans for the future									
12. Participation in training programs by type (formal/informal)									
13. Whether covered by social security scheme									

GROUP H. Tabulations dealing with members of households with informal sector entrepreneurs

Tables H.1 – H.5. Members of households with informal sector entrepreneurs by sex and activity status, according to <variable>

<variable>	Total			Male			Female		
	Employed	Unemployed	Not in the labour force	Employed	Unemployed	Not in the labour force	Employed	Unemployed	Not in the labour force
Total									
<variable>									

<variables>

1. Age groups
2. Marital status
3. Type of production unit (if employed)
4. Nature of the job (if employed)
5. Status in employment (if employed)

APPENDIX B2 – Proposed tabulation variables and categories

The tabulation variables and possible categories are presented in Table 7.3. Countries may adapt them using more or less detail, depending on the descriptive and analytical needs and the limits imposed by the sample.

Table B2.1. Tabulation categories

VARIABLE	TABULATION CATEGORIES
Type of production unit	<ul style="list-style-type: none"> Formal sector units Public ownership Private ownership Other form of ownership Informal sector units Households Producing goods exclusively for their own final use Employing paid domestic workers
Status in employment	<ul style="list-style-type: none"> Own-account worker, employer, member of producers' cooperative Own-account worker Employer Member of a producers' cooperative Contributing family worker Employee
Nature of the job	<ul style="list-style-type: none"> Formal employment Informal employment
Sex	<ul style="list-style-type: none"> Male Female
Marital status and household composition	<ul style="list-style-type: none"> Married/cohabiting with children below school age Married/cohabiting with children beyond school age Married/cohabiting without children Single/widowed/divorced/separated with children below school age Single/widowed/divorced/separated with children beyond school age Single/widowed/divorced/separated without children
Type of area	<ul style="list-style-type: none"> Urban Rural
Type of institutional unit	<ul style="list-style-type: none"> Corporation Financial Non-financial Government Non-profit institution serving households Household

VARIABLE	TABULATION CATEGORIES
Kind of economic activity	ISIC rev. 4 tabulation categories or alternative aggregation for the informal sector (UN, 2008c, Table 4.5.). The alternative aggregation, reproduced as Table E2.2 below, consists of 11 categories, designated by the Roman numerals I to XI. This is a smaller number of categories at the highest level than the standard ISIC rev.4. The objective of this alternative aggregation is to reflect better the high concentration of informal sector activities in such groups as: A (Agriculture, forestry and fishing), C (Manufacturing), F (Construction), G (Wholesale and retail trade; repair of motor vehicles and motorcycles), H (Transportation and storage), I (Accommodation and food service activities), and S (Other service activities). While grouping together or excluding certain activities where the informal sector is largely absent (i.e. public administration activities and activities of extraterritorial organizations and bodies), this alternative aggregation also provides sufficient detail in those activities most relevant to the informal sector. For example, manufacturing, repair services and trade are presented separately. Likewise, retail trade activities via stalls and markets, as well as door-to-door and other direct forms of retail sale, are identified separately.
Occupation	ISCO-08 major groups (ILO, 2012)
Number of persons engaged in the production unit	<ul style="list-style-type: none"> ■ 1 ■ 2-4 ■ 5-9 ■ 10-19 ■ 20-49 ■ 50-99 ■ 100-199 ■ 200 or more
Type of work place	<ul style="list-style-type: none"> ■ At own home ■ Client's or employer's home ■ Other fixed premises ■ Agricultural land ■ Construction site ■ Market or street stall ■ Without fixed location (mobile)
Number of usual hours of work per week	<ul style="list-style-type: none"> ■ under 20 hours ■ 20-29 hours ■ 30-39 hours ■ 40-44 hours ■ 45-49 hours ■ 50 hours or more

VARIABLE	TABULATION CATEGORIES
Number of hours actually worked during the reference week	<ul style="list-style-type: none"> ■ under 20 hours ■ 20-29 hours ■ 30-39 hours ■ 40-44 hours ■ 45-49 hours ■ 50 hours or more
Level of monthly employment-related income/earnings	Employment-related income/earnings classes to be determined according to national currencies and income distribution
Age groups	<ul style="list-style-type: none"> ■ under 15 years (if applicable) ■ 15-19 years ■ 20-24 years ■ 25-29 years ■ 30-34 years ■ 35-39 years ■ 40-44 years ■ 45-49 years ■ 50-54 years ■ 55-59 years ■ 60-64 years ■ 65 years or more
Educational level	ISCED or national classification
Method of training	<ul style="list-style-type: none"> ■ No training received ■ Apprenticeship ■ On the job/informal apprenticeship ■ Correspondence course ■ Virtual/internet learning ■ Private study ■ Institution full-time ■ Institution part-time ■ Other
Duration of employment (job turnover)	<ul style="list-style-type: none"> ■ Less than 3 months ■ 3 to under 6 months ■ 6 to under 12 months ■ 1 to under 5 years ■ 5 to under 10 years ■ 10 years or more
Reason for wanting to work more hours	<ul style="list-style-type: none"> ■ To have a higher income ■ Other reason
Reason for looking for another job	<ul style="list-style-type: none"> ■ To have a higher income ■ Lack of job security or stability ■ Other reason

VARIABLE	TABULATION CATEGORIES
Conditions of employment (other than hours of work and earnings)	<ul style="list-style-type: none"> ■ Contract without limit of time (yes/no) ■ Written employment contract (yes/no) ■ Employers' social contributions (yes/no) ■ Paid annual leave or compensation (yes/no) ■ Paid sick leave (yes/no) ■ Paid maternity leave (yes/no/not applicable)
Type of ownership	<ul style="list-style-type: none"> ■ Individual ownership ■ Household ownership ■ Business partners with members of other households
Book-keeping practices	<ul style="list-style-type: none"> ■ The unit keeps complete written accounts ■ The unit keeps partial written accounts ■ The unit does not keep accounts
Main problems faced	<ul style="list-style-type: none"> ■ Lack of clients/markets ■ Lack of skilled staff ■ Lack of regular staff ■ Lack of management skills ■ Labour problems ■ Lack of infrastructure ■ Lack of transport ■ Lack of raw materials ■ Lack of space/land ■ Lack of access to electricity ■ Electricity cuts ■ High cost of electricity ■ Security problems ■ Corruption ■ Non-payment of debts ■ High taxes ■ Strict regulations ■ Too much competition ■ Other problems ■ No problems

Table B2.2. Alternative ISIC aggregation for analysis and reporting on informal sector statistics (cf., UN 2008c, Table 4.5, page 281)

Category	Title	ISIC sections	ISIC divisions	ISIC groups	ISIC classes
I	Agriculture, forestry and fishing	A	01–03	011–032	0111–0322
II	Mining and quarrying, manufacturing, electricity, gas and water supply, waste management	B, C, D, E	05–39	051–390	0510–3900
II a	<i>of which: Manufacturing</i>	C	10–33	101–332	1010–3320
III	Construction	F	41–43	410–439	4100–4390
IV	Wholesale and retail trade	G*	45,* 46, 47	451, 453, 461–479	4510, 4530, 4610–4799
IV a	<i>of which: Retail trade not in stores*</i>	G*	47*	478, 479*	4781–4789, 4799
V	Repair of motor vehicles and motorcycles; repair of computers and personal and household goods	G,* S*	45,* 95	452, 454, 951–952	4520, 4540, 9511–9529
VI	Transportation and storage	H	49–53	491–532	4911–5320
VII	Accommodation and food service activities	I	55–56	551–563	5510–5630
VII a	<i>of which: Restaurants, mobile food service activities and event catering</i>	I*	56*	561, 562*	5610, 5621
VIII	Professional, scientific and technical activities; administrative and support service activities; arts, entertainment and recreation	M, N, R	69–82, 90–93	691–829, 900–932	6910–8299, 9000–9329
IX	Education; human health and social work activities	P, Q	85–88	851–889	8510–8890
X	Other personal service activities	S*	96	960	9601–9609
XI	Other activities	J, K, L, S*	58–68, 94	581–682, 941–949	5811–6820, 9411–9499

* Denotes a split of a section, division or group.

* Not including retail trade via mail order houses or via Internet.

Section B. Characteristics of main job/activity

The following questions refer to the respondent's main job/activity (if more than one) during the last week. The main job/activity is the one in which the respondent usually works the greatest number of hours per week. If the usual hours of work are the same in each job/activity, the main job/activity is the one that generates the highest income.

B1	What kind of work do you usually do in the job/activity that you had last week? <i>Examples: street seller, subsistence farmer, primary school teacher, registered nurse, domestic worker, truck driver</i> Occupational title: _____			
B2	What are your main tasks or duties? Short description of the main tasks or duties: _____ ISCO Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
B3	What kind of industry, business, service or activity is carried out at your place of work? <i>Examples: Write the main industry, economic activity, product or service of the person's employer or company (e.g. supermarket, police service). If self-employed, write the activity of the person (e.g. subsistence farming, fishing). If paid domestic work in private household, write Domestic Service</i>			
B4	What are the main goods or services produced at your place of work or its main functions? <i>Examples: selling fish, raising cattle, teaching children, caring for the sick</i>	ISIC Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
B5	In this job/activity, were you ... ?	READ Employee (working for someone else for pay in cash or in kind) 1 <input type="checkbox"/> Employer (employing one or more employees) 2 <input type="checkbox"/> → B16 Own-account worker (not employing any employee) 3 <input type="checkbox"/> → B16 Helping without pay in the business or farm of another household/family member 4 <input type="checkbox"/> → B16 Member of a producers' cooperative 5 <input type="checkbox"/> → B16 Other (specify): _____ 6 <input type="checkbox"/>		
B6	Were you employed on the basis of... ?	READ A written contract 1 <input type="checkbox"/> An oral agreement..... 2 <input type="checkbox"/>		
B7	Was your contract or agreement of ... ?	READ Limited time duration 1 <input type="checkbox"/> Unlimited time duration 2 <input type="checkbox"/> → B10		

ID	QUESTIONS & INSTRUCTIONS	CODING CATEGORIES	SKIPS
B8	Why is your contract or agreement of limited duration?	On-the-job training, internship..... 1 <input type="checkbox"/> Probation period 2 <input type="checkbox"/> Seasonal work 3 <input type="checkbox"/> Occasional/daily work 4 <input type="checkbox"/> Work as a replacement/substitute 5 <input type="checkbox"/> Public employment programme 6 <input type="checkbox"/> Specific service or task..... 7 <input type="checkbox"/> Chain contract 8 <input type="checkbox"/> Other (specify): 9 <input type="checkbox"/>	
B9	What is the duration of your contract or agreement?	Daily contracts/agreements 1 <input type="checkbox"/> Less than 1 month 2 <input type="checkbox"/> 1 month to less than 3 months..... 3 <input type="checkbox"/> 3 months to less than 6 months..... 4 <input type="checkbox"/> 6 months to less than 12 months..... 5 <input type="checkbox"/> 12 months or more..... 6 <input type="checkbox"/>	
B10	Does your employer pay contributions to social security for you?	Yes..... 1 <input type="checkbox"/> No..... 2 <input type="checkbox"/> Don't know 3 <input type="checkbox"/>	
B11	Do you get paid annual leave or payment for leave not taken?	Yes..... 1 <input type="checkbox"/> No..... 2 <input type="checkbox"/> Don't know 3 <input type="checkbox"/>	
B12	Would you get paid sick leave in case of illness or injury?	Yes..... 1 <input type="checkbox"/> No..... 2 <input type="checkbox"/> Don't know 3 <input type="checkbox"/>	
B13	Do you get medical benefits from your employer?	Yes..... 1 <input type="checkbox"/> No..... 2 <input type="checkbox"/> Don't know 3 <input type="checkbox"/>	
B14	Does your employer deduct income tax from your salary/wage?	Yes..... 1 <input type="checkbox"/> No..... 2 <input type="checkbox"/> Don't know 3 <input type="checkbox"/>	
B15	On this job, are you a member of a trade union or a similar employee association?	Yes..... 1 <input type="checkbox"/> No..... 2 <input type="checkbox"/>	
B16	Do you work in a ...?	<i>READ</i> Government institution..... 1 <input type="checkbox"/> → B20 State-owned enterprise 2 <input type="checkbox"/> → B20 Non-governmental/non-profit organization 3 <input type="checkbox"/> → B20 Private business or farm 4 <input type="checkbox"/> Private household 5 <input type="checkbox"/> → B23 Embassy, international organization 6 <input type="checkbox"/> → B20 Other (specify): 7 <input type="checkbox"/> → B20	
B17	What is the type of ownership of your business/farm (or the business/farm where you worked)?	Individual owner (or with other household members)..... 1 <input type="checkbox"/> Partnership with members of other households 2 <input type="checkbox"/> Incorporated enterprise (ltd., plc., inc.) 3 <input type="checkbox"/> → B20 Other (specify): 4 <input type="checkbox"/>	

ID	QUESTIONS & INSTRUCTIONS	CODING CATEGORIES	SKIPS
B18	Was your business/farm (or the business/farm where you worked) registered at the [RELEVANT GOVERNMENT ENTITY]?	Yes..... 1 <input type="checkbox"/> In the process of becoming registered 2 <input type="checkbox"/> No..... 3 <input type="checkbox"/> Don't know 4 <input type="checkbox"/>	
CHK1	CHECK B5	If B5=1 or B5=6 → B20 If B5=2, 3, 4 or 5 → B19	
B19 (*)	Does your business/farm keep a complete record of accounts (assets and expenditures)?	Yes..... 1 <input type="checkbox"/> No..... 2 <input type="checkbox"/> Don't know 3 <input type="checkbox"/>	
B20	How many persons, including yourself, work at your place of work?	1-4 1 <input type="checkbox"/> 5-9 2 <input type="checkbox"/> 10-19 3 <input type="checkbox"/> → B22 20-49 4 <input type="checkbox"/> → B22 50-99 5 <input type="checkbox"/> → B22 100 or more 6 <input type="checkbox"/> → B22 Don't know 8 <input type="checkbox"/> → B22	
B21	Please specify the exact number of workers	Number of workers <input type="text"/>	

NATIONAL SURVEY OF OCCUPATION AND EMPLOYMENT (ENOE)

OCCUPATION AND EMPLOYMENT QUESTIONNAIRE (Long version)

ONLY FOR PEOPLE 12 YEARS OLD AND OVER

INFORMATION CONFIDENTIALITY POLICY

Regarding the disposition on Article 37, first paragraph of the Law on the National System on Statistical and Geographical Information in effect: "The data provided for statistical use by the Informants of the System to the Units in terms of the present Law will be strictly confidential and may not be used for some other reasons than statistics".

COMPULSORY

Regarding Article 45, first paragraph of the Law on the National System on Statistical and Geographic Information in effect: "It is compulsory for all respondents to answer truthfully and timely to the questions asked by the authorities. This information shall be used for statistical and geographic purposes only".

Transcribe information from the social and demographic questionnaire

CONTROL NUMBER	SELECTED DWELLING	HOUSEHOLD NUMBER	MOVED HOUSEHOLD
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

RESPONDANT			INFORMANT
LINE NUMBER	NAME	AGE	LINE NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

REMARKS

I. ACTIVE CONDITION

1. Now, I am going to ask you for your labor condition. Did you work at least one hour last week?

- 1 Yes → Go to 3
- 2 No

1a. Besides what you have told me, did you dedicate during the last week at least one hour to ...

(Read the options and circle the selected ones)

- 1 Do an activity that provided you an income?
 - 2 Help to a relative or another person in their farm or business?
 - 3 You did not work last week
 - 0 To be used only for data capture
- Go to 3

1b. Although you have told me that you didn't work last week, did you have any job or business, or did you perform any work on your own?

- 1 Yes
- 2 No → Go to 2

1c. What is the main reason you didn't work last week?

(Listen and circle the selected option)

- 01 Strike or labor stoppage
 - 02 Technical break
 - 03 Temporarily suspended (wage-earning employee)
 - 04 Job training
 - 05 Vacation
 - 06 Licenses, illness or personal reasons
 - 07 Lack of vehicle or machinery breakdowns
 - 08 Lack of raw materials, financial shortage or lack of customers
 - 09 Bad weather or natural phenomena
 - 10 End of work or farming season
 - 11 About to start a new job or business → Go to 2
 - 12 Other reason _____ Specify
 - 99 Doesn't know
- Go to 3

1d. During this absence period, did you receive any wages or profits?

- 1 Yes → Go to 3
- 2 No
- 9 Doesn't know

1e. How long will it take you to get back to this job?

(Read the options and circle the selected one)

- 1 Already reincorporated or will be back this same week? → Go to 3
- 2 In four weeks or less
- 3 More than 4 weeks
- 4 Can't be certain when he/she will be back to work or when he/she will return to the job
- 5 Will not return
- 9 Doesn't know

II. NON WORKING CASES

2. Have you tried to...

(Read the options and circle the selected ones)

- 1 look for a job in another country or have you made arrangements to cross the border?
- 2 look for a job in this country?
- 3 set up a business, or work in your own business, without being able to start yet?
- 4 So, you have not looked for a job? Go to 2e
- 9 Doesn't know
- 0 To be used for data capture

2a. When did you start looking for a job (or when did you start setting up a business)?

____ or ____ of ____ of ____
day week month year

2b. What date did you look for a job for the last time (or when was the last time you made arrangements to start running a business)?

____ or ____ of ____ of ____
day week month year

(Classify according to the day of the interview)

- 1 Up to 1 month
- 2 More than 1 and up to 2 months
- 3 More than 2 and up to 3 months
- 4 More than 3 months Go to 2e
- 9 Doesn't know

ATTENTION: Verify that the searching time is continuous. If it has been interrupted for two weeks or longer, please register in question 2a the date when the search started again.

2c. Were you willing to work last week?

- 1 Yes
2 No
9 Doesn't know } Go to 2e

2d. Where did you go, or what did you do in order to find a job (or to start running a business or an activity on your own)?

(Listen, write and circle the selected option specified by the informant)

- 01 Did you directly attend to the workplace
(*factory, shop, facility*)
02 Did you make arrangements in a private
employment agency?
03 Did you make arrangements in the Public
Employment Service?
04 Did you make arrangements for a governmental
temporary job program (*at federal, state or
local level*)
05 Did you make arrangements or any other
activity to start running your own business?
06 Did you advertise for a job in the WEB (Internet)?
07 Did you advertise your services in public places
or looked for a job in the media
(*Newspaper, radio, etc*)
08 Did you contact a union or an employee
association?
09 Did you ask your family or friends to recommend
you in a job or to keep you informed about any?
10 Did you only look up in the newspaper
advertisements?
11 Other
99 Doesn't know
00 To be used only for data capture

Go to
2h

2e. Are you...

(Read the options and draw a circle in the selected one)

- 1 temporary absent from work? → Go to 9f
2 retired?
3 a student?
4 a person that does the household chores?
5 a person with a physical or mental disease
that prevents you from working for the rest
of your life? → Go to 2h
6 Other condition? _____
9 Doesn't know Specify

2f. At the present time, do you need to work?

(Listen and circle the selected option specified by the informant)

- 1 Yes
2 Only wishes to work
3 Doesn't need nor desire to work → Go to 2h
9 Doesn't know

2g. Is there any other reason besides (please mention what was answered in 2e) **why you are not looking for a job?**

(Listen, write and circle the selected option specified by the informant)

- 1 Yes
01 You are waiting for an answer regarding a work
application or the employer will hire you at a
future date
02 There is no work for your speciality, occupation nor
profession
03 You do not have the required scholarship,
certificates nor the experience required to
perform a job
04 You think due to your age or appearance there is
no job for you
05 There is no work in your locality or there is only in
certain seasons
06 The public insecurity or too many arrangements
discourages you to start an activity
07 You are waiting to recover from an illness or an
accident
08 You are pregnant
09 You don't have someone to take care of your
children, elder or illness relatives
10 A member of your family doesn't allow you to work
11 Other market reasons
12 Other personal reasons

- 2 No
9 Doesn't know

2h. Have you ever work...

(Read the options and circle the specified by the informant)

- 1 for a payment or salary?
2 on your own?
3 helping someone else in a business
or in an economic activity? } Go to 9a
4 Never worked } Go to 10
9 Doesn't know }
0 To be used only for data captured

III. LABORAL CONTEXT

3. If you have more than one job, let's talk about the most important one. What are the main functions or tasks that you perform at work?

(Detail the mentioned tasks)

What is the name of your current position at work?

ATTENTION: If the answer in question 3 matches with:

Household chores
Beggar
To sell or pawn their goods

Corret the sequence of the battery question 1 and go to question 2.

3a. At work, do you have a boss or a supeior?

- 1 Yes —→ Go to 3h
2 No

3b. So, you are running a business or any activity on your own?

- 1 Yes
2 No —→ Go to 3h

3c. Do you offer products or services to...

(Read the options and draw a circle in the selected ones specified by the informant)

- 1 a single enterprise, business or an intermediary?
2 several enterprises, businesses or intermediaries?
3 directly to the public?
4 It is self consumption of farm products
9 Doesn't know
0 To be used only for data capture

3d. Do you have employees or does someone help you in your business?

- 1 Yes
2 No
9 Doesn't know } Go to 3r

3e. Do you have...?

(Read the options and circle the selected one specified by the informant)

- 1 only one business (or economic activity)?
2 several businesses? —→
(in different locations and with different activities)

From this point forward we will refer to the main business

3f. How many establishments (or vehicles if it is the case) do you have in this enterprise or business?

(Read the options and circle the selected one)

- 1 Only one?
2 More than one? How many?
3 Doesn't have any (nor vehicle)
9 Doesn't know

3g. Regarding your employees or the people that help you in your business, how many are...

(Read, draw a circle and write the amount in the options specified by the informant)

- 1 employees that receive payment?
2 parthners?
3 unpaid workers?
4 Doesn't know what kind of workers they are
9 Doesn't know
0 To be used only for data capture
- Go to 3r

3h. In this work ...

(Read the options and circle the specified by the informant)

- 1 do you receive any payment?
2 are you a non-relative worker without payment?
3 are you a contributing family worker?
9 Doesn't know
- Go to 3q

3i. In this job, are you a member of any labor union?

- 1 Yes
2 No
9 Doesn't know

3j. At work, do you have an official written contract of employment?

- 1 Yes
2 No
9 Doesn't know } Go to 3l

3k. Is your contract of employment ...

(Read the options and circle the specified by the informant)

- 1 for a temporary work or for an accomplished task contract?
1 Less than two months
2 From two to six months
3 More than six months and up to one year
4 Until the whole task has been concluded
2 A permanent contract, a long term contract or an unspecified term contract?
9 Doesn't know

3l. For your work, do you receive ...

(Read the options and circle the selected ones specified by the informant)

- 1 the payment of year-end-bonus?
- 2 paid vacations?
- 3 profit sharing?
- 4 None of the above
- 5 Nothing
- 9 Doesn't know

Go to 3n

0 To be used only for data capture

3m. In this work, do you have access to... (even though you don't use it)

(Read the options and circle in the selected ones specified by the informant)

- 1 housing credits (*Infonavit, Fovissste*)?
- 2 day care center?
- 3 maternity or paternity care time?
- 4 retirement allowances (*SAR o Afore*)?
- 5 life insurance?
- 6 private medical insurance?
- 7 personal loans and/or bank savings?
- 8 None of the above
- 9 Doesn't know

0 To be used only for data capture

3n. How did you know of this job?

(Listen, write and circle the option specified by the informant)

- 01 Attended to the working place directly
(*factory, shop, facility, plant, etc*)
- 02 In a private employment agency
- 03 In the government employment service
- 04 Through a governmental temporary job program
(at federal, state or local level)
- 05 Attended to a union or an employee association
- 06 Through the WEB (internet)
- 07 Through a paper advertisement in public places
or through the media (newspaper, radio, etc.)
- 08 Through a member of your family or friends
- 09 They offered you the job
- 10 Other
- 99 Doesn't know

3o. In order to get and/or to keep your job, were you compelled to move from, or to change your residence?

- 1 Yes
- 2 No → Go to 3q

3p. Before your change of residence, in which state of the Mexican Republic or country did you live?

(Listen, write and circle the answer from the informant)

- 1 Same state
- 2 Other state
- 3 Other country
- 9 Doesn't know

3q. Approximately, how many people work at your job, including the owner?

(Listen and circle the option specified by the informant)

- 01 1 person
- 02 2 to 5 people
- 03 6 to 10 people
- 04 11 to 15 people
- 05 16 to 20 people
- 06 21 to 30 people
- 07 31 to 50 people
- 08 51 to 100 people
- 09 101 to 250 people
- 10 251 to 500 people
- 11 501 and more people
- 99 Doesn't know

3r. In which year...

(Question regarding the kind of worker, please write the year and circle the option)

did you start working for the first time at your current company, institution or employer? } Worker

in charge or start running a business (or activity)? } Self employed

____ Year

ATTENTION: If the answer is the current or past year, please ask for the month it happened and write it down. Please classify in all cases.

____ Month

- 1 Current year } Go to 4
- 2 Last year }
- 3 Before last year
- 9 Doesn't know → Go to 4

3s. Since then...

(Question regarding the kind of worker and circle the indicated option)

have you been working all this years for your current company, institution or employer } Worker

have you been working all this years in your current business (or economic activity)? } Self employed

- 1 Yes → Go to 4
- 2 No
- 9 Doesn't know → Go to 4

3t. In which year...

(Ask regarding the type of worker and write down the year)

did you return to work } Worker

re-start your current business } Self employed
(or activity)?

____ Year

ATTENTION: If the answer is the current or past year, ask for the month it happened and write it down.

____ Month

IV. CHARACTERISTICS OF THE ECONOMIC UNIT

4. What is the name of the enterprise, business or institution you are working for?

(Listen and circle the option specified by the informant)

1 _____

(Write the complete name of the enterprise, business or institution)

- 2 The business doesn't have a trade name
- 3 It is a domestic unit or works for another worker → Go to 5
- 4 Works abroad → Go to 8
- 9 Doesn't know

4a. What does the enterprise, business or institution do?

(Ask for details about the materials and type of goods produced or services provided)

4b. ONLY FOR INTERVIEWERS

(Classify according to answers given in 4 and 4a)

- 1 It is an agricultural or farming activity → Go to 5
- 2 It is an educational institution, a hospital or a clinic
- 3 It is a public institution or a non-profit organization
- 4 It is a private activity or firm
- 5 Can't be determined yet
- Go to 4d

4c. So, this business is...

(Listen and circle the option specified by the informant)

- 1 An independent, personal or family business? → Go to 4e
- 2 A private firm or enterprise?
(trading company: corporation or corporations under other modality, commercial firm, banking company, service industry) → Go to 4h
- 3 None of the above

4d. So, do you work for...

1 a government agency?

(Based on the information given in questions 4 and 4a, please circle the corresponding option and verify it with the informant)

- 1 The Judiciary or the Legislature?
- 2 A Public enterprise or a governmental agency?
- 3 Schools, hospitals, clinics or assistencial services managed by the Government?
- 4 Federal Government Offices?
- 5 State Government Offices (including the Federal District)
- 6 State Government Offices (including The Federal District Delegations)
- 7 None of the above
- 9 Doesn't know

2 an institution non-managed by the Government?

(Based on the information given in questions 4 and 4a, please circle the corresponding option and verify it with the informant)

- 1 Private educative institution, hospital or clinic?
- 2 Autonomous and public Universities (UNAM, UAM, UACH)
- 3 Autonomous organizations (Federal and State Electoral Institutes, National Commission of Human Rights)
- 4 Church, Professional Associations, Chambers, Unions
- 5 Civil Associations (not classified in the above mentioned options)
- 6 International Organization
- 7 Political Organization (Party)
- 8 None of the above
- 9 Doesn't know

Go to 5

4e. The business or economic activity...

(Read the options and circle the specified by the informant)

- 1 Has a premise and an office? → Go to 4h
(doesn't matter if they are integrated or in different locations)
- 2 Only has an office? } Go to 4g
- 3 Only has a site? }
- 4 Doesn't have a site, nor office nor premise?
- 9 Doesn't know

4f. So, where do you perform your work?

(Listen, write down and circle the option specified by the informant)

- _____
- 01** At the countryside, at open, in a dyke, well, at the sea
 - 02** Door to door, or at the streets
 - 03** At no fixed place
 - 04** Non motor vehicle (*bicycle, tricycle, cart, boat, etc*)
 - 05** Motor vehicle, automobile, motorcycle, light truck, etc.
 - 06** At your own address without any special equipment
 - 07** At your own address with special equipment
 - 08** At the owner's address or the owner's property, or at the client's request place
 - 09** Semi-fixed premise
 - 10** Fixed premise
 - 11** Other site
 - 99** Doesn't know

4g. In this business or activity,

(Read the options and circle the one specified by the informant)

- 1 Does the accountant services are required?**
 - 2 Is it only used a notebook or a booklet to keep the business records?**
 - 3 Do you have a cash registering machine for small taxpayers provided by the Mexican Ministry of Treasure**
 - 4 Doesn't keep any accounting records**
 - 9 Doesn't know**
- Go to 5

4h. Where do you usually work?

(Read the options and circle the one specified by the informant)

- 1 At the facilities (or vehicles) of** (mention the firm's name given in question 4)?
- 2 At another firm or enterprise facilities, or at any institution they sent you?**
- 3 Visiting clients?**
- 4 At the construction site?**
- 5 None of the above**
- 9 Doesn't know**

4i. Does the firm you are working for, have offices or establishments...

(Read the options and circle the one specified by the informant)

- 1 Abroad?**
- 2 Only in Mexico, but in serveral cities of the country?**
- 3 Only in this city?**
- 4 It is a business or service run under franchise?**
- 9 Doesn't know**

V. WORK DAY AND LABOR REGULARITY**5. Your working day is...**

(Read the options and circle the one specified by the informant)

- 1 during the day?** (*between 6 am and 8 pm*)
- 2 during the night?** (*between 8 pm and 6 am*)
- 3 mixed working hours?**
- 4 work shifts?**
- 9 Doesn't know**

5a. During the last week was there little work to do?

(Were there times off)

(Listen and circle the option specified by the informant)

- 1 Yes**
- 2 Did not work last week** → **Go to 5e**
- 3 Did not face such situation** } **Go to 5c**
- 9 Doesn't know**

5b. Are you worried about this situation?

(Listen and circle the option specified by the informant)

- 1 Yes**
- 2 A little**
- 3 No, because the work is that way**
- 4 No, because the work is like this in this season**
- 5 No, because it is a temporary situation**
- 6 No, because other reasons**
- 9 Doesn't know**

5c. What days and how many hours did you devote to your work last week?

(Write day by day accordingly)

*From 00 to 24 hours**From 00 to 59 minutes**00 hours y 00 minutos.**98 hours and 00 minutes.**99 hours and 00 minutes.*

Did not work that day.

Worked but doesn't know how many hours.

Doesn't know if he or she worked that day.

<i>Hours</i>	<i>Minutes</i>	
<input type="text"/>	and/or <input type="text"/>	Monday
<input type="text"/>	and/or <input type="text"/>	Tuesday
<input type="text"/>	and/or <input type="text"/>	Wednesday
<input type="text"/>	and/or <input type="text"/>	Thursday
<input type="text"/>	and/or <input type="text"/>	Friday
<input type="text"/>	and/or <input type="text"/>	Saturday
<input type="text"/>	and/or <input type="text"/>	Sunday

5d. Is this the number of hours you usually work?

- 1 Yes** → **Go to 5g**
- 2 No**
- 9 Doesn't know**

5e. What days and how many hours do you usually devote to your work?

(Write day by day accordingly)

	<i>Hours</i>		<i>Minutes</i>	
1	<input type="text"/>	and/or	<input type="text"/>	Monday
	<input type="text"/>	and/or	<input type="text"/>	Tuesday
	<input type="text"/>	and/or	<input type="text"/>	Wednesday
	<input type="text"/>	and/or	<input type="text"/>	Thursday
	<input type="text"/>	and/or	<input type="text"/>	Friday
	<input type="text"/>	and/or	<input type="text"/>	Saturday
	<input type="text"/>	and/or	<input type="text"/>	Sunday

ATTENTION: If he/she didn't work last week (5a=2) → **Go to 5g**

2 Doesn't have a regular work day → **Go to 5g**

5f. What is the main reason you didn't work the usual working hours last week?

(Listen, write and circle the specified option indicated by the informant)

- _____
- 01** Due to extra work
 - 02** To earn more money
 - 03** Overtime
 - 04** Due to a peak season (*customers, sales, sow or harvest*)
 - 05** Work reduction or suspension (*lack of sales or customers shortage, off peak season, technical break*)
 - 06** End of an employment contract or end of the working season
 - 07** Because of the weather
 - 08** Vacation time or holidays
 - 09** Illness or accident
 - 10** Child care, elder care, sick people care
 - 11** Other personal or family reasons
 - 12** None of the above
 - 99** Doesn't know

5g. In which months do you perform this job?

(Listen and circle accordingly to the informant's answer)

- | | | |
|-------------------|--------------------|---------------------|
| 01 January | 02 February | 03 March |
| 04 April | 05 May | 06 June |
| 07 July | 08 August | 09 September |
| 10 October | 11 November | 12 December |
- 13** Working months vary
- 14** Works every month of the year
- 15** Started working a short time ago
- 99** Doesn't know
- 00** To be used only for data capture
- Go to 6**

5h. What is the main reason why you don't work every month of the year?

(Listen, write and circle the option specified by the informant)

- _____
- 1** You only work when your services are required
 - 2** There is work only in special seasons
 - 3** There is work only during school vacation seasons
 - 4** Doesn't need to work all year
 - 5** Personal or family reasons
 - 6** Other reason
 - 9** Doesn't know

VI. EARNINGS AND HEALTH CARE

6. Do you receive, or do you earn money...

(Listen, write and circle the option specified by the informant)

- 01** by commission?
 - 02** by piece, services or by an accomplished work?
 - 03** by fees?
 - 04** by tips?
 - 05** by compensation or productivity bonuses?
 - 06** by vouchers or trading products?
 - 07** Only receives wages or salaries
 - 08** Only business profits
 - 09** No payments nor incomes are received → **Go to 6d**
 - 10** None of the above
 - 99** Doesn't know
 - 00** To be used only for data capture
- Go to 6b**
- (includes self consumption farming activities)*

6a. Besides what you have told me, do you get money or obtain an income in ...

(Listen and circle the options specified by the informant)

- 1** a wage or salary?
 - 2** profits from your own business?
 - 3** Do not receive any payment nor earning → **Go to 6d**
 - 4** None of the above
 - 9** Doesn't know
 - 0** To be used only for data capture
- (includes self consumption farming activities)*

6b. When do you receive your earnings or payment?

(Listen, classify the period, ask for the income and write them down)

¿How much do you earn or what is the amount that you estimate as your earnings?

1 Every month \$ _____

2 Every 15 days \$ _____

3 Every week \$ _____

4 Daily \$ _____

5 Other payment period _____

Period

6 You are paid by produced or sold piece, or for an accomplished work

_____ \$ _____

Unit

Price per unit

Total units per week

Go to
6d

| | | | | | |

7 Doesn't know how to estimate

8 Refused to answer this question

6c. At the present time, the minimum monthly wage rate is \$ _____, your monthly earning is...

(Read the options and circle the specified by the informant)

1 less than above mentioned?

2 the same as above mentioned?

3 more than 1 minimum wage, up to 2?

4 more than 2 minimum wages, up to 3?

5 more than 3 minimum wages, up to 5?

6 more than 5 minimum wages, up to 10?

7 more than 10 minimum wages?

8 Didn't want to give information

9 Doesn't know

6d. Does this job give you access to health care at...

(Read the options and circle the specified by the informant)

1 the Social Security (*The Mexican Institute of Social Security IMSS*)?

2 the hospital or clinic of the Ministries of Navy and Defense, or the State Oil Company (PEMEX)?

3 the Institution devoted to the Social Security and Services for Local or Federal Workers (*ISSSTE*)?4 the Institution devoted to the Social Security and Services for Local or State Workers (*ISSSTELEÓN, ISSEMYM*)?

5 Other Health Care Institution? _____

Specify

6 Doesn't have health care

9 Doesn't know

VII. SECOND JOB OR ECONOMIC ACTIVITY**7. Besides the job we have been talking about, do you have any other job or working activity such as...**

(Read the options and circle the specified by the informant)

1 to sell or to produce goods for sale (*food, beauty products, clothes*)?2 services (*teaching lessons, cutting hair, washing clothes for another person*)?

3 farming works and breeding farming animals?

4 working for tips, commission, or piece work?

5 wage earner (*wages or salary*)?

6 helping for free in a family business or farm?

7 So, you don't have another job } Go to 8

9 Doesn't know

7a. What are the main functions or tasks that you perform at this second job?

(Give details of the tasks mentioned)

What is the name of your position at this job?**7b. What is the name of the firm business or institution you are working for as a second job?**

(Listen and circle the option specified by the informant)

1 _____

(Write down the complete name of the firm, business or institution)

2 The business doesn't have a trade mark

3 It is a domestic unit or he/she works for other worker

4 Works abroad → Go to 7d

9 Doesn't know → Go to 8

7c. What is the activity of the firm, business or institution you are working for as your second job?

(Ask for details about the materials and type of goods produced or services provided)

7d. Does this second job give you access to health care at...

(Read the options and circle the specified by the informant)

- 1 the Social Security (IMSS)?**
- 2 the Institution devoted to the Social Security and Services for Local or Federal Workers (ISSSTE)?**
- 3 other health care Institution?**
- 4 Don't have health care**
- 9 Doesn't know**

7e. In your second job, approximately how many people work?

(Listen and circle the option specified by the informant)

- 01 1 person**
- 02 2 to 5 people**
- 03 6 to 10 people**
- 04 11 to 15 people**
- 05 16 to 20 people**
- 06 21 to 30 people**
- 07 31 to 50 people**
- 08 51 to 100 people**
- 09 101 to 250 people**
- 10 251 to 500 people**
- 11 501 and more people**
- 99 Doesn't know**

7f. In your second job, how many days and how many hours did you devote to your work last week?

(Listen, circle and write down the information specified by the informant)

*If the total of days and hours are unknown, assign 9 or 99 accordingly.
Assign 98 in hours, when the labor hours are 98 or more.*

1
days hours

2 Didn't work last week

7g. In your second job, approximately how much do you earn monthly?

(Listen and circle the option specified by the informant and write down the amount in the correspondant space)

1 In cash \$

2 In kind \$

3 Nor payments nor incomes received
(including self consumption farming activities)

9 Doesn't know

0 To be used by data capture

VIII. SEARCHING FOR ANOTHER WORK

8. During the last three months, have you tried to...

(Read the options and circle the specified by the informant)

- 1 look for a job in other country or make arrangements to cross the border?**
- 2 look for a job here in the country?**
- 3 start running a business or work in your own business without being able to start yet?**
- 4 So, you haven't looked for another job?** } Go to 9
- 9 Doesn't know**
- 0 To be used only for data capture**

8a. Are you trying to...

(Read the options and circle the specified by the informant)

- 1 have more than one job?**
- 2 have a full-time job?**
- 3 have an activity in which you can work more hours so to earn more money?** } Go to 9
- 4 None of the above**
- 9 Doesn't know**

8b. What is the main reason why you are looking for another job?

(Listen, write down and circle the option specified by the informant)

- _____
- _____
- 01 Affraid of losing your actual job, personnel cuts or your employment contract is going to end**
 - 02 To improve your income, without working additional hours**
 - 03 To improve your working conditions (work time, benefits, working environment, etc.)**
 - 04 To have health care coverage (IMSS or ISSSTE)**
 - 05 To have a job that suits your educational background experience or skills**
 - 06 To have an independent job**
 - 07 To have time to look or to share with your family**
 - 08 To have time to study or to do other activities**
 - 09 None of the above**
 - 99 Doesn't know**

IX. WORKING BACKGROUND

9. Have you ever lost your job or business and had to seek for another one?

- 1 Yes
 - 2 No
 - 9 Doesn't know
- Go to 10

9a. The last time you lost your job, what was the situation?

(Read the options and circle the specified by the informant)

- 1 Did you lose your job or did you finish the work?
 - 2 Did you resign? → Go to 9d
 - 3 Did you close or leave your own business? → Go to 9e
 - 4 Did you retire?
 - 5 Were you arrested?, Did you have an accident?, Did you get sick for a long time?
 - 6 Did you get back from USA or, you were deported?
 - 7 Did a natural phenomena or disaster damaged your working place?
 - 8 None of the above
 - 9 Doesn't know
- Go to 9f

9b. In that occasion...

(Read the options and circle the specified by the informant)

- 1 did the employment source close or was the company declared in bankruptcy?
 - 2 were there personnel layoffs?
 - 3 did the company change its location to another city or country?
 - 4 was not your contract renewed?
 - 5 didn't they call you again?
 - 6 did you get fired?
 - 7 None of the above → Go to 9d
 - 9 Doesn't know → Go to 9f
- Go to 9f

9c. What was the main reason?

(Listen, write down and circle the option specified by the informant)

- 01 Labor-management dispute
 - 02 Conflicts with your boss
 - 03 Lack of qualifications or training
 - 04 There was no more work
 - 05 Failed working duties
 - 06 Discrimination for your physical appearance
 - 07 Age (*too young or too old*)
 - 08 Illness or disability
 - 09 Pregnancy, maternity leave
 - 10 None of the above
 - 99 Doesn't know
- Go to 9f

9d. What was the main reason for leaving from this work?

(Listen, write down and circle the option specified by the informant)

- 01 To earn more money
- 02 To run a business of your own
- 03 Undesired changes in your working conditions (*wages, earnings, and/or working days*)
- 04 Risky job or unhealthy working conditions
- 05 Forced to resign the job or to retire
- 06 Lack of self-improvement opportunities
- 07 Harassment or disrespect at work
- 08 Disputes or disagreements with the boss
- 09 Marriage, pregnancy and/or family reasons
- 10 A relative didn't let you work
- 11 You wanted to continue studying
- 12 None of the above
- 99 Doesn't know

Go to 9f

9e. What was the main reason for leaving your own business?

(Listen, write down and circle the option specified by the informant)

- 01 Many unpaid debts or bankruptcy
- 02 Input prices or facility rent increments
- 03 Sales reduction, or excessive competition
- 04 The business was less profitable than expected
- 05 Failing customers (*a lot of receivable accounts*)
- 06 Lack of credit to continue operating
- 07 Lack of skilled personnel, absenteeism, or many turnovers
- 08 Due to unreliable suppliers
- 09 Insecurity problems
- 10 Problems with some authorities (*extortions, fines*)
- 11 Marriage, pregnancy and/or family reasons
- 12 A relative didn't let you work
- 13 You wanted to continue studying
- 14 None of the above
- 99 Doesn't know

9f. In which year did you leave that job?

____ Year

ATTENTION: If current year or last year, please ask for the month and write it down; classify in all cases.

____ Month

- 1 Current year
 - 2 Last year
 - 3 Before last year
 - 9 Doesn't know
- Go to 9n

9g. What were the main activities you performed in this job?

(Detail the tasks or activities performed)

What was the name of you position at work?

9h. What is the name of the firm business or institution you used to work for?

(Listen and circle the option specified by the informant)

1

(Write down the complete name of the business or institution)

- 2** The business doesn't have a trade name
- 3** It was a domestic unit or he/she worked for another worker
- 4** He/she was working abroad
- 9** Doesn't know

Go to 9n

9i. What is/was the activity for the firm, enterprise or institution you worked for?

(Detail the kind and material of the goods produced or services provided)

9j. ONLY FOR INTERVIEWERS

(Classify according to answers given for questions 9h and 9i)

- 1** Public sector
- 2** Private sector
- 9** Doesn't know

9k. Does this job give you access to health care at...

(Read the options and circle the specified by the informant)

- 1** the Social Security (*The Mexican Institute of Social Security, IMSS*)?
- 2** the hospital or clinic of the Ministries of Navy and Defense, or the State Oil Company (PEMEX)?
- 3** the Institution devoted to the Social Security and Services for Local or Federal Workers (*ISSSTE*)?
- 4** the Institution devoted to the Social Security and Services for Local or State Workers (*ISSSTELEÓN, ISSEMYM*)?
- 5** other Health Care Institution? _____ Specify
- 6** Doesn't have health care
- 9** Doesn't know

9l. In this job, did... receive

(Read the options and circle the specified by the informant)

- 1** the payment of year-end-bonus?
- 2** paid vacations?
- 3** profit sharing?
- 4** None of the above
- 5** Nothing
- 9** Doesn't know
- 0** To be used only for data capture

9m. Approximately, how much did you earn on a monthly basis in that job?

(Listen, circle the options specified by the informant and write down the amount in the correspondent space)

1 In cash \$ _____

2 In kind \$ _____

- 3** Didn't receive earnings
- 9** Doesn't know
- 0** To be used only for data capture

9n. At the present time do you receive or counts on some earnings from ...

(Read the options and circle the specified by the informant)

- 1** job loss indemnity or severance payment?
- 2** sale, conveyance or business final settlement?
- 3** retirement pension?
- 4** unemployment insurance?
- 5** non-labor contract fulfillment insurance?
- 6** Doesn't have earnings derived from a former job
- 9** Doesn't know
- 0** To be used only for data capture

X. ECONOMICAL SUPPORTS	XI. OTHER ACTIVITIES																								
<p>10. During the last three months, have you received from the government...</p> <p>(Read the options and circle the specified by the informant)</p> <p>1 a trainee scholarship or economic aid to find a job?</p> <p>2 support to perform an economic activity on your own (<i>Government programme to increase farmers productivity (Procampo), micro credits</i>)?</p> <p>3 aid from another Government Programme (<i>scholarship, food</i>)?</p> <p>4 Haven't receive any government aid.</p> <p>9 Doesn't know</p> <p>0 To be used only for data capture</p>	<p>11. During last week, how much time did you devote to the following activities:</p> <p>(Read the options, circle the selected ones, ask and write down the time)</p> <p>98 hours and 00 minutes. Performed an activity, but doesn't know for how long</p> <p>99 hours and 00 minutes. Doesn't know if he/she performed an activity</p> <table border="0"> <thead> <tr> <th></th> <th>Hours</th> <th>Minutes</th> </tr> </thead> <tbody> <tr> <td>1 studying or taking training courses? (includes the time devoted to teaching and to school tasks or duties)</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>2 <u>exclusively</u>, children care, sick, elderly or disabled people without payment (bathing, change their clothes, take them to the doctor, etc)?</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>3 to build or to enlarge your dwelling?</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>4 to repair or to give mantainance to your dwelling, furniture, domestic appliances or vehicles?</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>5 to realize domestic chores (<i>to wash, to iron, to prepare and serve meals, to sweep</i>)</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>6 to provide voluntary community services (to get food, to take care of sick people at the hospital, etc)?</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>0 To be used only for data capture</td> <td></td> <td></td> </tr> </tbody> </table>		Hours	Minutes	1 studying or taking training courses? (includes the time devoted to teaching and to school tasks or duties)	<input type="text"/>	<input type="text"/>	2 <u>exclusively</u>, children care, sick, elderly or disabled people without payment (bathing, change their clothes, take them to the doctor, etc)?	<input type="text"/>	<input type="text"/>	3 to build or to enlarge your dwelling?	<input type="text"/>	<input type="text"/>	4 to repair or to give mantainance to your dwelling, furniture, domestic appliances or vehicles?	<input type="text"/>	<input type="text"/>	5 to realize domestic chores (<i>to wash, to iron, to prepare and serve meals, to sweep</i>)	<input type="text"/>	<input type="text"/>	6 to provide voluntary community services (to get food, to take care of sick people at the hospital, etc)?	<input type="text"/>	<input type="text"/>	0 To be used only for data capture		
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0 To be used only for data capture																									
<p>10a. During the last three months, have you received (or was sent) any economical support from someone who works or lives...</p> <p>(Read the options and circle the specified by the informant)</p> <p>1 abroad?</p> <p>2 in another state of this country?</p> <p>3 in the same state?</p> <p>4 Haven't received anything</p> <p>9 Doesn't know</p> <p>0 To be used only for data capture</p>																									
<p>10b. Do you count with the Popular Health Insurance?</p> <p>1 Yes</p> <p>2 No</p> <p>9 Doesn't know</p>																									
<p align="center">END</p>																									

PRE-CRITIC RESULTS

Code List of Mistakes	
1. Wrong sequency	5. Omitted household (CS)
2. Question or data omitted	6. Omitted minor (CS)
3. Didn't follow the fulfilling instructions	7. Omitted mayor (CS)
4. Insufficient description	8. Mistakes in ID data
	9. Other

[illegible]

* The critic will write down codes 3 or 4 in case of finding errors in the questionnaire, for reporting those that haven't been registered by the supervisor.

→

11

?

	Wage Jobs: (All types) payment in cash or kind e.g.: food								
	Permanent							01	
	Temporary/Casual							02	
	Part time							03	
	Agriculture:								
	Ploughing, Planting/Weeding/Harvesting								
	Cash crops: e.g. Coffee.....							04	
	Cotton.....							05	
	Sisal.....							06	
	Tobacco.....							07	
	Tea.....							08	
	Other Cash Crops.....							09	
	Food Crops e.g. Maize.....							10	
	Sorghum.....							11	
	Cassava.....							12	
	Fruits, Vegetables.....							13	
	Beans and Pees.....							14	
	Other food Crops.....							15	
	Keeping birds/other pests away from crops.....							16	
	Activities related to the storage of crops.....							17	
	Herdng.....							18	
	Milk, making butter, etc.....							19	
	Shearing/Slaughtering.....							20	
	Activities related to poultry products.....							21	
	Other agricultural activities including hunting/forestry/fishing.....							22	
	Manufacturing/processing:								
	Making charcoal.....							23	
	Milling (incl. Hand milling).....							24	
<hr/>									
	Construction /major repair or maintenance:								
	Farm buildings or fences.....							30	
	Own dwellings.....							31	
	Access roads.....							32	
	Other construction activities/mining.....							33	
	Trading/Sales:								
	Retail shop.....							34	
	Engaged in tea shops/street vending etc.....							35	
	Assisting in sales of agriculture products and other retail trades.....							36	
	Transport:								
	Carrying loads to market for sale.....							37	
	Carrying grain to /from mil/shamba.....							38	
	Other transport activities.....							39	
	Services:								
	Giving tuition to students for payment.....							40	
	Repair services; tool, shoes, etc. (not for own household).....							41	
	Collection of firewood, fetching water.....							42	
	Any other business or income generation activity.....							43	
<hr/>									
ENTER PERSON NUMBER FROM LFS I PAGE 2									
	[] []	[] []	[] []	[] []	[] []	[] []			
INT: If YES to any activity..... If NO to all activities.....	1 2	1 2	1 2	1 2	1 2	1 2			
OTHERWISE Go to Q.3 (iii) and ask that question for each month, starting with last month and work backwards for 12 months.									
2. Did you work all weeks every month in the last 12 months? (include all types of work, paid leave and temporary absences) YES..... 1 GO TO Q.5 NO..... 2	1 2	1 2	1 2	1 2	✓ 2	1 2			

Identification:

A. USUAL ACTIVITIES (CONTINUED)

INT: This is a major question and must be done slowly and thoroughly. Ask the questions below for each month, starting with last month and work backwards for 12 months

3. (i) In.....(month) did you work
- The whole month GO TO BOX "A" and print (✓) for that month
 - Part of the month GO TO (ii)
 - Not at all GO TO (iii)
- INTI: INCLUDE TEMPORARY ABSENCES (E.G. LEAVE) AS WORK.

- (ii) Were you available for work in most days which you didn't work (in reference month)
- YES - GO TO BOX "B" and print (✓) for that month
NO - GO TO BOX "C" and print (✓) for that month
- (iii) Were you available for work most of.....(month)
- YES - GO TO BOX "D" and print (✓) for that month
NO - GO TO BOX "E" and print (✓) for that month

Q.3 MONTHLY ACTIVITIES														
ACTIVITY	PERSON NUMBER	J	F	M	A	M	J	J	A	S	O	N	D	TOTAL
Worked Whole month A	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
Worked part of month and Available for work B	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
Worked part of Month and Not Available for work C	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
No work at all And available For work D	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
No work at all And not Available for work E	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
	<input type="checkbox"/>													
		GRAND TOTAL=12												
		GRAND TOTAL=12												
		GRAND TOTAL=12												
		GRAND TOTAL=12												
		GRAND TOTAL=12												

INT: ASK FOR EACH MONTH AND THERE MUST BE ONE TICK AND ONE TICK ONLY IN ONE BOX FOR EACH MONTH
IF ANY TICK IN C AND E ASK Q.4(a) OTHERWISE GO TO Q.4(b)

Identification:

		ENTER PERSON NUMBER FROM LFS 1 PAGE 2				
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4(a) What was your main activity when you were not doing economic activity and not available for work during that period? Attending school..... 1 Household Duties (owing to): - lack of capital..... 2 - bereaved/attending funeral..... 3 - unable to hire paid helper..... 4 - to take care those who need assistance/Household chores except fetching water and collecting firewood..... 5 - relieved from work by spouse..... 6 - too old..... 7 - too young..... 8 - sick..... 9 - disabled..... 10 Other (specify)..... 11						
(b) INT: DID THE PERSON DO NO WORK AT ALL IN ALL MONTHS (Q3 BOXES D & E). YES 1 GO TO Q.6 NO 2		1 2	1 2	1 2	1 2	1 2
5(a) When working what was the economic activity in which you spent most of your time? Employee in a wage job (paid in cash or kind) with: Central Government..... 01 Local Government..... 02 Parastatal organisation..... 03 Political Party..... 04 Co-operatives..... 05 NGO..... 06 International organisation..... 07 Religious organisation..... 08 Private Sector (include private apprentices)..... 09 Self Employed (other than agriculture): Self employed in a business with employees..... 10 Self employed in a business without employees..... 11 Working on your own or family farm or shamba..... 12 Unpaid work in family business..... 13 Other, describe..... 96 12 } GO TO Q.6 13 }						
(b) In which year did you start working in economic activities for the first time? <i>Write year '9998' for Don't know</i>		Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

ENTER PERSON NUMBER FROM LFS 1 PAGE 2

INT: REMIND THE RESPONDENT THE LIST OF WORK ACTIVITIES ON PAGE 1. CHECK THROUGH

1	1	1	1	1
2	2	2	2	2

- WAGE JOBS - LEAVE, STOOD DOWN UP TO FOUR MONTHS AND DEFINITE RETURN.
- BUSINESS/AGRIC. - TEMPORARY ABSENCES UP TO ONE MONTH AND BUSINESS/AGRIC. CONTINUING DURING ABSENCE.
- UNPAID HELPERS AND CASUAL WORKERS CANNOT BE CALLED TEMPORARY ABSENCE.

YES.....1. GO TO Q.17(a)
NO.....2. GO TO Q.8

YES.....1. GO TO Q.17(a) RECORD CURRENT ACTIVITIES AS APPROPRIATE

NO.....2. GO TO Q.17(a) RECORD USUAL MAIN ACTIVITY AND CURRENT ACTIVITY IN Q.34(a)

YES.....1. GO TO Q.10
NO.....2.

Attending school	1
Engaged in household duties (owing to):	
- lack of capital	2
- bereaved/attending funeral	3
- unable to hire paid helper	4
- to take care those who need assistance/household chores except fetching water and collecting firewood	5
- relieved from work by spouse	6
- too old	7
- too young	8
- sick	9
- disabled	10
Other (specify)	11

END OF INTERVIEW

10. For what sort of work were you available last week? Full time work.....1 Part time work.....2	1 2	1 2	1 2	1 2	1 2
11. Have you taken any steps within the past 4 weeks to look for work? YES.....1 NO.....2 GO TO Q.13	1 2	1 2	1 2	1 2	1 2
12. What did you do in the past 4 weeks to look for work? (CIRCLE MOST IMPORTANT ONLY IF NO STEPS, CHANGE Q.11) Applied to prospective employers.....1 Checked at farms, factories or work sites.....2 Asked friends and relatives.....3 Took action to start business (usual small scale).....4 Took action to start agriculture.....5 Other (specify).....6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6
13. Why didn't you look for work within the past 4 weeks? (CIRCLE MOST IMPORTANT ONLY. FOR STUDENTCODE 7, CHECK Q.8 AND Q.10 CHANGE ANSWER) Thought no work available.....1 Awaiting reply for earlier enquires.....2 Waiting to start arranged job, business or agriculture.....3 Off season in agriculture.....4 Occupied with home duties.....5 Temporary illness.....6 Full time student.....7 Other (specify).....8	1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 8
14. What sort of work did you do in your last job? What were your main tasks or duties? IN7: DESCRIBE ACTIVITY FULLY IN AT LEAST 2 WORDS [TASCO]					
15. What sort of work do you think you could do now? Paid Employment – Wage job.....1 Self Employment – Business (all types).....2 Self employment – Agriculture incl. Livestock and fishing.....3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
16 (a) For how long have you been available for work? Less than 1 month.....1 1 month but less than 3 months.....2 3 months but less than 6 months.....3 6 months but less than 1 year.....4 1 year but less than 2 years.....5 2 years or more.....6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6
16 (b) What was the main reason for failing to secure work during this period? Stiff competition.....1 Not having enough experience for available jobs.....2 Not having enough skills for available jobs.....3 Not having enough education for available jobs.....4 Favoritism/corruption.....5 Lack of information about available jobs.....6 No jobs were available.....7 Failed to secure start up capital or working tools.....8 Failed to secure work place.....9 Other (specify).....10	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10
END OF INTERVIEW FOR THIS PERSON					

THE FOLLOWING SET OF QUESTIONS REFER TO THE ECONOMIC ACTIVITY ON WHICH YOU SPEND MOST OF YOUR TIME IF YOU HAVE MORE THAN ONE ACTIVITY.

[illegible]

ENTER PERSON NUMBER FROM LFS 1 PAGE 2

D. CONTINUED		ENTER PERSON NUMBER FROM LFS 1 PAGE 2				
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
22. Is this enterprise:-	Central Government.....01 Local Government.....02 Parastatal.....03 Political party.....04 Partnership Registered.....05 Non Governmental Organization.....06 Religion Organization.....07 Co – operative - Registered.....08 International/Regional organization.....09 Household -fatching water/ collecting firewood.....10 Other household economic activities.....11 Co – operative - Unregistered.....12 Private own account.....13 Private Sector employed.....14 Partnership Un-Registered.....15 Other private, specify.....96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96
23. How many people are paid by working in your/this enterprise on continuous basis?	I don't know.....1 Less than 10 (employees).....2 10 and above (employees).....3 Don't know.....4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
24. In order to be able to monitor the activities of the Enterprise, do you/does your employer keep any written records or accounts?	I Don't know.....1 NO.....2 YES, Order Book/record.....3 Sales book/records.....4 Accountancy book.....5 Final accounts for Business year.....6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6
25. Do the accounts show all of the following Balance sheets of assets and liabilities, investment/ withdraw of capital by the Business Owner(s), withdrawals of income by the Business Owner(s), earnings Retained within the Business as saving ?.	YES.....1 NO.....2 Don't know.....3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3

E: INFORMAL SECTOR – MAIN

ENTER PERSON NUMBER FROM LFS 1 PAGE 2

INTERVIEWER: QUESTION 26 – 32 ASK BUSINESS OWNERS ONLY, OTHERWISE GO TO SECTION F (Q.33).

	Write Month & Year (98 99 98 for don't know)						
26. When was the business started?							
27. Why do you conduct this kind of business?	Can't find other work.....01 Released from other employment or reduction of working time.....02 Retirement from other employment.....03 Family needs additional income.....04 Business provides good income opportunities.....05 Business does not require much capital.....06 Can keep production costs low.....07 Wants to be independent or his/her own master.....08 Can choose his/her own hours and place of work.....09 Can combine businesses with household or family responsibilities.....10 Traditional line of business of respondent or family/tribe.....11 Other reasons specify.....96	01 02 03 04 05 06 07 08 09 10 11 96	01 02 03 04 05 06 07 08 09 10 11 96	01 02 03 04 05 06 07 08 09 10 11 96	01 02 03 04 05 06 07 08 09 10 11 96	01 02 03 04 05 06 07 08 09 10 11 96	
28. Where do you conduct your present business?	Within own or business partner's home – with special business space.....01 Within own or business partner's home – without special business space.....02 Structure attached to/outside own or business partner's house.....03 Permanent building other than home.....04 Fixed stall/kiosk – market.....05 Vehicle, cart, temporary stall – market.....06 Fixed stall/kiosk – street.....07 Vehicle, cart, temporary stall – street.....08 Other temporary structure.....09 Construction site.....10 Customer/employer's house.....11 No fixed location/mobile.....12	01 02 03 04 05 06 07 08 09 10 11 12	01 02 03 04 05 06 07 08 09 10 11 12	01 02 03 04 05 06 07 08 09 10 11 12	01 02 03 04 05 06 07 08 09 10 11 12	01 02 03 04 05 06 07 08 09 10 11 12	01 02 03 04 05 06 07 08 09 10 11 12
29. Did this enterprise operate all year around?	YES.....1 Go To Q.31 NO.....2	1 2	1 2	1 2	1 2	1 2	
30. Why did the business not operate all the year around?	Business created during the last 12 months.....01 Too much competition.....02 Lack of customers or order.....03 Lack of raw materials or supplies.....04 Lack of workers.....05 Break down of vehicles, machinery or equipment.....06 No power.....07 Seasonal nature of activity.....08 Temporary operation to meet special objectives/expenses/Casual activity (e.g. building funds).....09 Respondent was engaged in other work (e.g. agriculture).....10 Respondent was busy with household or family duties.....11 Personal reasons (e.g. sickness).....12 Others.....96	01 02 03 04 05 06 07 08 09 10 11 12 96	01 02 03 04 05 06 07 08 09 10 11 12 96	01 02 03 04 05 06 07 08 09 10 11 12 96	01 02 03 04 05 06 07 08 09 10 11 12 96	01 02 03 04 05 06 07 08 09 10 11 12 96	
31. During the last 12 months, have you received any loan or obtained any credit for business purposes from any source?	YES.....1 NO.....2 GO TO Q.33	1 2	1 2	1 2	1 2	1 2	
32. Who gave you the loan/credit?	Relative or friend.....01 Rotating savings & credit group (UPATU).....02 Saving & credit co – operative (SACCO).....03 Co – operative.....04 Business association, NGO, donor project etc.....05 Private money lender.....06 Customer, contractor ?, middle person/agent, supplier.....07 Government institution.....08 Bank or financial institution.....09 Social security scheme.....10 Other source, specify.....96	01 02 03 04 05 06 07 08 09 10 96	01 02 03 04 05 06 07 08 09 10 96	01 02 03 04 05 06 07 08 09 10 96	01 02 03 04 05 06 07 08 09 10 96	01 02 03 04 05 06 07 08 09 10 96	

ENTER PERSON NUMBER FROM LFS 1 PAGE 2

THE FOLLOWING SET OF QUESTIONS REFER TO THE OTHER ECONOMIC ACTIVITY ON WHICH YOU SPEND MOST OF YOUR TIME IF YOU HAVE MORE THAN ONE ACTIVITY.

2-

2

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1 2

5432

2.1

12

95431

32 -

2-

22 -

432-

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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Identification:

F. CONTINUED

		ENTER PERSON NUMBER FROM LFS 1 PAGE 2				
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
39.	Is this enterprise:- Central Government.....01 Local Government.....02 Parastatal.....03 Political party.....04 Partnership Registered.....05 Non Governmental Organization.....06 Religion Organization.....07 International/Regional organization.....08 Co-operative - Registered.....09 Household - Fetching water/ collecting firewood.....10 Other household economic activities.....11 Co-operative - Unregistered.....12 Private own account.....13 Private Sector employed.....14 Partnership Un-Registered.....15 Other private, specify.....96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 96
40.	How many people are paid by working in your/this enterprise on continuous basis? I don't know.....1 Less than 10 (employees).....2 10 and above (employees).....3 Don't know.....4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
41.	In order to be able to monitor the activities of the Enterprise, do you/does your employer keep any written records or accounts? I Don't know.....1 NO.....2 YES, Order Book/record.....3 Sales book/records.....4 Accountancy book.....5 Final accounts for Business year.....6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6
42.	Do the accounts show all of the following Balance sheets of assets and liabilities, investment/withdraw of capital by the Business Owner(s), withdrawals of income by the Business Owner(s), earnings Retained within the Business as saving? YES.....1 NO.....2 Don't know.....3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3



**SISTEMA INTEGRADO DE ENCUESTAS DE HOGARES
SIEH - ENEMDU - SEPTIEMBRE - 2006**

INFORMACIÓN GENERAL

CONFIDENCIALIDAD:

LOS DATOS PROPORCIONADOS POR EL INFORMANTE SON Estrictamente CONFIDENCIALES Y SERÁN UTILIZADOS ÚNICAMENTE CON FINES ESTADÍSTICOS DE ACUERDO AL ARTÍCULO 21 DE LA LEY DE ESTADÍSTICA

FORMULARIO

DE

1. UBICACIÓN GEOGRÁFICA Y MUESTRAL

Provincia:				
Cantón:				
Cabecera cantonal o parroquial:				
Zona:			Sector:	
			Panel:	
No. de Vivienda en el Panel:			Hogar:	

ENCUESTA EFECTIVA: La encuesta fue efectiva en la vivienda?

SI	1	<div style="text-align: center;"> → Vivenda original: </div>		
NO	2			

Si es vivienda de reemplazo (cod. 4) y la encuesta fue efectiva, registre el número de la vivienda a la que reemplaza (1 - 2 - 3) :

2. IDENTIFICACIÓN Y UBICACIÓN DE LA VIVIENDA

Manzana:	<input type="text"/>	<input type="text"/>	Edificio:	<input type="text"/>	<input type="text"/>
Calle:					
Lote No.		Bloque No.		Patio No.	
Piso No.		Casa No.		Depart. No.	
Teléfono Conventional No:					

3. DATOS DEL INFORMANTE Y DEL HOGAR

Nombre del Informante:	<input type="text"/>
Relación de parentesco con el jefe/a del hogar:	<input type="text"/>
Número de Miembros del hogar:	<input type="text"/>

4. RESULTADO DE LA ENTREVISTA

Resultado de la Entrevista	
1. COMPLETA	
2. INCOMPLETA	
3. RECHAZO	
4. NADIE EN CASA	
5. VIV. TEMPORAL	
6. VIV. DESOCUPADA	
7. VIV. CONSTRUCCIÓN.	
8. VIV. INHABITABLE O DESTRUIDA	
9. VIV. CONVERTIDA EN NEGOCIO	
10. OTRA RAZÓN	

5. RESUMEN GENERAL DE LA ENTREVISTA

NÚMERO DE MIEMBROS DEL HOGAR				POBLACIÓN DE 5 AÑOS Y MÁS				
EDAD SEXO		MENORES DE 5 AÑOS	POBLACIÓN DE 5 AÑOS Y MÁS	TOTAL	OCUPADA Preg. 20 — 21 — 22 — Cod. 1 — 1-10 — 1	DESOCUPADA (Preg. 35)	INACTIVA (Preg. 34)	TOTAL
HOMBRES								
MUJERES								
TOTAL								

6. PERSONAL RESPONSABLE

COORDINADOR REGIONAL:																			
SUPERVISOR:	COD. <table border="1"><tr><td></td><td></td></tr></table>																		
ENCUESTADOR:	COD. <table border="1"><tr><td></td><td></td></tr></table>																		
CODIFICADOR:	COD. <table border="1"><tr><td></td><td></td></tr></table>																		
DIGITADOR:	COD. <table border="1"><tr><td></td><td></td></tr></table>																		
<table border="1"> <tr> <td rowspan="2">AÑO</td> <td>2</td> <td>0</td> <td>0</td> <td>6</td> <td rowspan="2">MES</td> <td>0</td> <td>9</td> <td rowspan="2">DÍA</td> <td></td> <td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		AÑO	2	0	0	6	MES	0	9	DÍA									
AÑO	2		0	0	6	MES		0	9		DÍA								

7. OBSERVACIONES DE SUPERVISIÓN

[illegible]

SECCIÓN 1: INFORMACIÓN DE LOS MIEMBROS DEL HOGAR

[illegible]

SECCIÓN 1: INFORMACIÓN DE LOS MIEMBROS DEL HOGAR

MIGRACIÓN: PARA PERSONAS DE 5 AÑOS Y MÁS

OBSERVACIONES

[illegible]

SECCIÓN 2: CARACTERÍSTICAS OCUPACIONALES - PARA PERSONAS DE 5 AÑOS Y MÁS

REGISTRE EL CÓDIGO DE LA PERSONA QUE INFORMA		¿Qué hizo (.....) la semana pasada: <div>Trabajó al menos una hora? 1</div> <div>Pase a 24</div> <div>No trabajó? 2</div>	¿Realizó (.....) la semana pasada alguna actividad dentro o fuera de su casa para ayudar al mantenimiento del hogar, tal como: <div>Atender negocio propio?..... 1</div> <div>Labores agrícolas o cuidado de animales?..... 2</div> <div>Fabricar algún producto?..... 3</div> <div>Hacer algo en casa por un ingreso?..... 4</div> <div>Brindar algún servicio?..... 5</div> <div>Ayudar en algún negocio familiar?..... 6</div> <div>Como aprendiz remunerado en dinero o en especie?..... 7</div> <div>Estudiante que realizó algún trabajo?..... 8</div> <div>Trabajar para otra familia?..... 9</div> <div>Otra actividad por un ingreso? 10</div> <div>No realizó ninguna actividad? 11</div> <div>Pase a 22</div>	Aunque (.....) no haya trabajado la semana pasada, ¿tenía algún trabajo en esa semana del cual estubo ausente? <div>Si 1</div> <div>No 2</div> <div>Pase a 28</div>	¿Por qué razón (.....) no trabajó la semana pasada? <div>Vacaciones o días feriados..... 1</div> <div>Enfermedad o accidente..... 2</div> <div>Huelga o paro..... 3</div> <div>Licencia con sueldo..... 4</div> <div>Licencia sin sueldo..... 5</div> <div>Suspensión temporal del trabajo 6</div> <div>Otro, cuál? 7</div>	¿Cuántas horas trabajó (.....) la semana pasada o la última semana que trabajó? <div>En todos sus trabajos</div> <div>Si es menos de 40 horas</div> <div>Pase a 25</div> <div>Si es 40 horas o más</div> <div>Pase a 26</div> <div>No. de horas</div>	¿Por qué razón (.....) trabajó menos de 40 horas? <div>No pudo conseguir trabajo en otra parte... 1</div> <div>No pudo conseguir más trabajo..... 2</div> <div>Reducción de las actividades económicas 3</div> <div>Por falta de materia prima..... 4</div> <div>Horario normal..... 5</div> <div>Motivos de salud, personales o familiares 6</div> <div>Por estudios..... 7</div> <div>Otro, cuál? 8</div> <div>Pase a 27</div>	¿Por qué razón (.....) trabajó la semana pasada 40 horas o más? <div>Horario normal..... 1</div> <div>Horas extras..... 2</div> <div>Exceso de trabajo o clientes. 3</div> <div>Horas de trabajo necesarias para obtener un ingreso suficiente..... 4</div> <div>Otro, cuál? 5</div> <div>Pase a 38</div>	¿Desearía (.....) trabajar más horas de las que trabaja? <div>Si 1</div> <div>No 2</div>
COD. PER. INF.	20	21	22	23	24	25	26	27	COD. PER. INF.
01									01
02									02
03									03
04									04
05									05
06									06
07									07
08									08
09									09
10									10
11									11
12									12

SECCIÓN 2: BÚSQUEDA DE TRABAJO - PARA PERSONAS DE 5 AÑOS Y MÁS

¿Buscó (.....) la semana pasada?	Si 1 Pase a 30	No 2									
¿(.....) estuvo buscando trabajo las cuatro semanas anteriores a la semana pasada?	Si 1 No 2 Pase a 32										
¿(.....) para buscar trabajo acudió a:	REGISTRE LAS DOS PRINCIPALES Sitios de contratación temporal?..... 1 Amigos o parientes?..... 2 Directo a empleadores?..... 3 Prensa, radio?..... 4 Agencia pública de empleo?..... 5 Agencia privada de empleo?..... 6 Está tratando de establecer su propio taller, empresa o negocio?..... 7 Internet?..... 8 Ninguna..... 9	¿Hace cuánto tiempo busca trabajo (.....)? Pase a 35									
¿Por qué razón no buscó trabajo (.....):	Tiene un trabajo esporádico u ocasional?..... 1 Pienso que no le darán trabajo o se cansó de buscar?..... 2 No cree poder encontrar?..... 3 Su cónyuge o su familia no le permiten?..... 4 Espera respuesta a una gestión para empresa o negocio propio?..... 5 Espera respuesta de un empleador u otras gestiones para conseguir empleo?..... 6 Espera cosecha o temporada de trabajo?..... 7 No tiene necesidad o deseos de trabajar?..... 8 No tiene tiempo?..... 9 Está enfermo/incapacitado?..... 10 No está en edad de trabajar?..... 11	¿(.....) desea trabajar y está disponible para hacerlo? Si 1 Pase a 35 No 2									
¿(.....) es:	Rentista? 1 Jubilado o pensionado? 2 Estudiante? 3 Ama de casa? 4 Incapacitado? 5 Otro, cuál? 6 Pase a 58	¿Trabajó (.....) anteriormente? Si 1 No 2 Pase a 58									
¿Por qué motivos dejó de trabajar (.....)?	Liquidación de la empresa..... 1 Despido intempestivo..... 2 Renuncia voluntaria..... 3 Supresión de partidas del sector público..... 4 Terminación de contrato..... 5 Le fue mal en el negocio..... 6 Se terminó ciclo agrícola o temporada de trabajo..... 7 Se jubiló o le pensionaron..... 8 Otro, cuál?..... 9	¿Hace cuánto tiempo (.....) no trabaja?									
No. Semanas											
COD PER	28	29	30	31	32	33	34	35	36	37	COD PER
01											01
02											02
03											03
04											04
05											05
06											06
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09											09
10											10
11											11
12											12

SECCIÓN 2: OCUPACIÓN PRINCIPAL - OCUPADOS Y DESOCUPADOS - PARA PERSONAS DE 5 AÑOS Y MÁS

RAMA DE ACTIVIDAD		GRUPO DE OCUPACIÓN	CATEGORÍA DE OCUPACIÓN		En este trabajo (.....) ¿tiene o tenía :		¿(.....) recibe o recibía por parte de su patrono o empleador:		¿Cuántos trabajos tuvo (.....) en la semana pasada?		¿Cuántos años trabaja (.....) como (preg. 39)?		
¿A qué se dedica principalmente la empresa o negocio donde trabaja(ba) (.....)?		¿En relación a su ocupación, que trabajo realiza(ba) (.....)?	¿En esta ocupación (.....) es o era:		Nombramiento?..... 1 Contrato Indefinido escrito?..... 2 Contrato Indefinido verbal?..... 3 Contrato Temporal o por obra cierta escrito?..... 4 Contrato Temporal o por obra cierta verbal?..... 5		SI 1 NO 2		Uno..... 1 Más de uno..... 2 Ninguno 3 Pase a 58		Si es menos de un año, registre 00		
DESCRIBA LAS ACTIVIDADES PRINCIPALES		REGISTRE LAS TAREAS PRINCIPALES	Empleador/Obrero de Gobierno?..... 1 Empleador/Obrero Privado?..... 2 Empleador/Obrero Tercerizadora?..... 3 Empleador/Obrero Maquila?..... 4 Jornalero o Peón?..... 5 Patrono o Socio?..... 6 Cuenta Propia?..... 7 Trab. Fam. No Remunerado?..... 8		43								
USO INEC		USO INEC		Empleado(a) Doméstico(a)?.. 9									
38		39		40		41		42		43		44	
COD PER		COD PER		COD PER		COD PER		COD PER		COD PER		COD PER	
01												01	
02												02	
03												03	
04												04	
05												05	
06												06	
07												07	
08												08	
09												09	
10												10	
11												11	
12												12	

SECCIÓN 2: OCUPACIÓN PRINCIPAL - CARACTERÍSTICAS DEL ESTABLECIMIENTO

HORAS HABITUALES		SITIO DE TRABAJO	TAMAÑO DEL ESTABLECIMIENTO	PARA TODOS LOS TRABAJADORES EXCEPTO LOS ASALARIADOS DE GOBIERNO, EMPLEADOS/AS DOMÉSTICOS/AS O QUE EN PREGUNTA 47 REGISTRARON CÓDIGO 2				
¿Cuántas horas trabaja (.....) habitualmente a la semana en su:	<div>Marque todas las alternativas que sean necesarias</div>	¿En cuál de los siguientes sitios o lugares trabaja (.....): Local de una empresa o del patrono?..... 1 Una obra en construcción?..... 2 Se desplaza?..... 3 Al descubierto en la calle?..... 4 Kiosko en la calle?..... 5 Local propio o arrendado?..... 6 Vivienda distinta a la suya?..... 7 Su vivienda?..... 8 Su finca o terreno?..... 9 Finca o terreno ajeno?..... 10	¿Cuántas personas trabajan usualmente en la empresa o negocio? Menos de 100 1 100 y más 2 <div>No realice las preguntas 48 y 49</div>	¿El establecimiento o lugar donde trabaja (.....) lleva: Registros contables completos?..... 1 Sólo un cuaderno de cuentas?..... 2 No lleva contabilidad?..... 3 No sabe?..... 4	¿El establecimiento o lugar donde trabaja (.....) tiene Registro Único de Contribuyentes RUC? SI 1 NO 2 No Sabe 3			
						COD. PER	COD. PER	
OCUPACIÓN PRINCIPAL?	OCUPACIÓN SECUNDARIA?	OTRAS OCUPACIONES?	45	46	47	48	49	COD. PER
01								01
02								02
03								03
04								04
05								05
06								06
07								07
08								08
09								09
10								10
11								11
12								12

SEÑOR

ENCUESTADOR:

LAS PREGUNTAS

QUE A

CONTINUACIÓN SE

PRESENTAN ESTÁN

REFERIDAS AL

TRABAJO

SECUNDARIO Y

SATISFACCIÓN EN

EL TRABAJO

Recuerde que las

preguntas 50 a 56

deberán ser

realizadas, si en la

pregunta 43 se ha

registrado código 2,

caso contrario pase a

SATISFACCIÓN EN

EL TRABAJO

pregunta S.T.1

SECCIÓN 2: OCUPACIÓN SECUNDARIA - CARACTERÍSTICAS DEL ESTABLECIMIENTO

RAMA DE ACTIVIDAD		GRUPO DE OCUPACIÓN	CATEGORÍA DE OCUPACIÓN	SITIO DE TRABAJO	TAMAÑO DEL ESTABLECIMIENTO		PARA TODOS LOS TRABAJADORES EXCEPTO LOS ASALARIADOS DE GOBIERNO, EMPLEADOS/AS DOMÉSTICOS/AS O QUE EN PREGUNTA 54 REGISTRARON CÓDIGO 2		
¿A qué se dedica principalmente la empresa o negocio donde trabaja (.....)?		¿En relación a su ocupación, que trabajo realiza (.....)?	En esta ocupación (.....) es : <div>Empleado/Obrero de Gobierno?..... 1 Empleado/Obrero Privado?..... 2 Empleado/Obrero Tercerizadora?.. 3 Empleado/Obrero Maquila?..... 4 Jornalero o Peón?..... 5 Patrono o Socio?..... 6 Cuenta Propia?..... 7 Trab. Fam. No Remunerado?..... 8</div>	¿En cuál de los siguientes sitios o lugares trabaja (.....): <div>Local de una empresa o del patrono?..... 1 Una obra en construcción?..... 2 Se desplaza?..... 3 Al descubierto en la calle?..... 4 Kiosko en la calle?..... 5 Local propio o arrendado?..... 6 Vivienda distinta a la suya?..... 7 Su vivienda?..... 8 Su finca o terreno?..... 9 Finca o terreno ajeno?..... 10</div>	¿Cuántas personas trabajan usualmente en la empresa o negocio? <div>Menos de 100 1 100 y más 2</div>	COD.	CUÁNTAS?	¿El establecimiento o lugar donde trabaja (.....) lleva: <div>Registros contables completos?..... 1 Sólo un cuaderno de cuentas?..... 2 No lleva contabilidad?... 3 No sabe? 4</div>	¿El establecimiento o lugar donde trabaja (.....) tiene Registro Único de Contribuyentes RUC?
DESCRIBA LAS ACTIVIDADES PRINCIPALES		REGISTRE LAS TAREAS PRINCIPALES	Empleado(a) Doméstico(a)?....9						
USO INEC		USO INEC							
COD PER	50	51	52	53	54	55	56	COD PER	
01								01	
02								02	
03								03	
04								04	
05								05	
06								06	
07								07	
08								08	
09								09	
10								10	
11								11	
12								12	

SECCIÓN 2: SATISFACCIÓN EN EL TRABAJO

SOLO INFORMANTES DIRECTOS DE 15 AÑOS Y MÁS QUE RESPONDIERON EN PREGUNTA 43 CÓDIGO 1 ó 2
REFIÉRASE SOLO A LA OCUPACIÓN PRINCIPAL

¿Cómo se siente Usted en su trabajo:

Contento?.....1

Poco contento?.....2

Descontento pero conforme?.....3

Totalmente descontento?.....4

Pase a pregunta 57

Indique el por qué y pase a pregunta 57

Pase a pregunta S. T. 2

¿El motivo de su descontento es:

SI1

NO 2

COD PER	S.T.1	S.T.2	COD PER
01			01
02			02
03			03
04			04
05			05
06			06
07			07
08			08
09			09
10			10
11			11
12			12

Las siguientes preguntas tienen como objetivo captar el grado de satisfacción con relación a su situación laboral

SECCIÓN 3: INGRESOS – PARA PERSONAS DE 5 AÑOS Y MÁS

O C U P A C I Ó N P R I N C I P A L				OCUPACIÓN SECUNDARIA							
PATRONOS Y CUENTA PROPIA (Si en la Preg. 40 registraron las alternativas 6 ó 7)				ASALARIADOS Y EMPLEADOS DOMÉSTICOS (Si en pregunta 40 registraron códigos 1,2,3,4,5 ó 9)		ASALARIADOS E INDEPENDIENTES					
En su ocupación como (.....) ¿cuánto ganó en total, es decir, cuánto le quedó después de descontar los costos de producción en el mes de AGOSTO?		En el mes de AGOSTO ¿retiró de su negocio o tomó de lo que produce, bienes o productos para el consumo del hogar?		En su ocupación como (.....) ¿cuánto dinero líquido recibió por concepto de sueldo o salario y otros ingresos en el mes de AGOSTO?		En el mes de AGOSTO ¿cuánto le descontaron en total por las aportaciones al IESS, impuesto a la renta, comisariatos, almacenes, cooperativas, asociaciones, etc.?		Además de su ingreso monetario, en el mes de AGOSTO ¿recibió por su trabajo especies o servicios tales como: alimentos, vivienda, vestido, etc.?		En su (s) otra (s) ocupaciones, ¿cuál fue su ingreso monetario total, ya sea como asalariado o por concepto de ganancia en el mes de AGOSTO?	
<div>SI 1</div> <div>NO 2</div>		<div>SI 1</div> <div>NO 2</div>		<div>SI 1</div> <div>NO 2</div>		<div>SI 1</div> <div>NO 2</div>		<div>SI 1</div> <div>NO 2</div>		<div>SI 1</div> <div>NO 2</div>	
MONTO		COD		MONTO		COD		MONTO		COD	
MONTO		MONTO		MONTO		MONTO		MONTO		MONTO	
61		62		63		64		65		66	
COD PER		COD PER		COD PER		COD PER		COD PER		COD PER	
67		67		67		67		67		67	
01		01		01		01		01		01	
02		02		02		02		02		02	
03		03		03		03		03		03	
04		04		04		04		04		04	
05		05		05		05		05		05	
06		06		06		06		06		06	
07		07		07		07		07		07	
08		08		08		08		08		08	
09		09		09		09		09		09	
10		10		10		10		10		10	
11		11		11		11		11		11	
12		12		12		12		12		12	

SECCIÓN 1: REGISTRO DE LOS MIEMBROS DEL HOGAR

PARA TODAS LAS PERSONAS						
MIEMBROS DEL HOGAR	SEXO	EDAD	PARENTESCO	ESTADO CIVIL	SEGURO	
Registre el nombre de todas las personas que comen y duermen habitualmente en este hogar.	<div>Hombre... 1</div> <div>Mujer..... 2</div>	<div>Cuántos años cumplidos tiene?</div> <div>Si tiene menos de un año, registre 00</div> <div>Años</div>	<div>Qué relación de parentesco tiene con el jefe del hogar?</div> <div>Jefe..... 1</div> <div>Cónyuge..... 2</div> <div>Hijo ó hija..... 3</div> <div>Yerno ó nuera..... 4</div> <div>Nieto ó nieta..... 5</div> <div>Padres ó suegros... 6</div> <div>Otros parientes..... 7</div> <div>Empleado(a)..... 8</div> <div>Doméstico(a)..... 8</div> <div>Otros no parientes... 9</div>	<div>¿Cuál es su estado civil ó conyugal actual?</div> <div>Para personas de 12 años o más</div> <div>Casado (a)?.... 1</div> <div>Separado (a)?.. 2</div> <div>Divorciado (a)? 3</div> <div>Viudo (a)?..... 4</div> <div>Unión Libre?... 5</div> <div>Soltero (a)?.... 6</div>	<div>(.....) está afiliado o cubierto por:</div> <div>Seguro de salud privado?..... 1</div> <div>IESS, Seguro General?..... 2</div> <div>IESS, Seguro Voluntario?..... 3</div> <div>IESS, Seguro Campesino?..... 4</div> <div>Seguro del ISSFA ó ISSPOL?..... 5</div> <div>Medicina Preventiva..... 6</div> <div>Ninguno?..... 7</div> <div>Altern. 1</div> <div>Altern. 2</div>	
COD PER	1	2	3	4	4 A	5
01				1		
02						
03						
04						
05						
06						
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09						
10						
11						
12						

REPUBLIQUE DU MALI
Un Peuple – Un But – Une Foi

**MINISTERE DU TRAVAIL ET
DE LA FONCTION PUBLIQUE**

PRIMATURE

**MINISTERE DELEGUE CHARGE DE L'EMPLOI ET DE
LA FORMATION PROFESSIONNELLE**

**CABINET DU MINISTERE DELEGUE AUPRES DU
PREMIER MINISTRE CHARGE DU PLAN**

AGENCE NATIONALE POUR L'EMPLOI (ANPE)

**DIRECTION NATIONALE DE LA STATISTIQUE ET
DE L'INFORMATIQUE (DNSI)**

**OBSERVATOIRE DE L'EMPLOI
ET DE LA FORMATION (OEF)**

ENQUETE PERMANENTE EMPLOI AUPRES DES MENAGES 2004

QUESTIONNAIRE INDIVIDU

N° du Questionnaire :

<u>R</u>	<u>C</u>	<u>COM</u>	<u>S</u>	<u>E</u>	<u>Conc</u>	<u>Men</u>	<u>Ind</u>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I - IDENTIFICATION GEOGRAPHIQUE

Ville / Région :

Commune / cercle :

Quartier :

Rue : Porte :

Emplacement :

Section d'Enumération :

Concession :

Ménage :

Numéro individu :

Prénoms et Nom de l'individu :

(À ne pas saisir)

Prénoms et Nom de l'enquêteur :

Prénoms et Nom du contrôleur :

Observations de l'enquêteur :

N° du Questionnaire : **R C COM SE Conc Men Ind**

MODULE EMPLOI ACTUEL (EA)

EA1. Au cours de la semaine dernière, avez-vous effectué une ou plusieurs des activités suivantes ?

(énumérez les options EA1a à EA1e et notez les nombres d'heures correspondant)

EA1a. Etudes

EA1b. Travaux domestiques dans sa propre maison, garde d'enfants, de personnes âgées, de malades, sans rémunération

EA1c. Construction de sa propre maison

EA1d. Prestation gratuite de services à sa communauté

EA1e. Aucune de ces activités

EA2a. Au cours du mois dernier avez-vous travaillé, ne serait-ce qu'un jour ?

1. Oui 2. Non

EA2b. Au cours de la semaine dernière avez-vous travaillé, ne serait-ce qu'une heure ?

1. Oui 2. Non (Si oui passez à AP1)

EA3. Bien que vous ayez déclaré ne pas avoir travaillé, la semaine dernière, avez-vous réalisé l'une des activités suivantes la semaine dernière, à domicile ou à l'extérieur ?

(Si code <10, passez à AP1)

1. En travaillant dans une affaire personnelle
2. En fabriquant un produit pour la vente
3. En faisant quelque chose à la maison pour un revenu
4. En délivrant un service rémunéré
5. En aidant dans une entreprise familiale
6. Comme apprenti rémunéré ou non
7. Comme étudiant qui réalise un travail
8. En travaillant pour une autre famille pour un revenu
9. N'importe quelle autre activité pour un revenu
10. Aucune activité de ce genre

EA4. Bien que vous n'ayez pas travaillé la semaine dernière, avez-vous un emploi ?

1. Oui 2. Non (Si non, passez à EA7a)

EA5. Pourquoi n'avez-vous pas travaillé la semaine dernière? (Si code <6 passez à AP1)

1. Vacances ou jours fériés ; 2. Maladie ; 3. Congés de maternité ; 4. Grève ; 5. Arrêt provisoire du travail ;
6. Licenciement ; 7. Fin de contrat ; 8. Démission ; 9. Autres

EA6. Dans combien de temps allez-vous reprendre le travail ou commencer à travailler?

..... (Si code = 1 passez à AP1)

1. Moins de 4 semaines ; 2. Plus de 4 semaines ;
3. Ne sait pas

EA7a. Avez-vous cherché un emploi la semaine dernière ?

1. Oui 2. Non (Si oui, passez à EA7c)

EA7b. Avez-vous cherché un emploi au cours des 4 dernières semaines

1. Oui 2. Non (Si non passez à EA8a)

EA7c. Quand serez-vous disponible pour travailler ?

1. Tout de suite ; 2. D'ici 15 jours (Si 1 ou 2 Passez à C1)
3. 15 jours à un mois ; 4. Dans plus d'un mois

EA8a. Est-ce que vous voulez travailler?

1. Oui 2. Non (Si non, passez à EA8b3)

EA8b1. Pourquoi n'avez-vous pas cherché de travail ?

Involontaire

1. Il n'existe pas d'emploi convenable
2. Ne pense pas pouvoir obtenir d'emploi pour sa qualification
3. Ne sait pas comment effectuer une recherche d'emploi

Volontaire

4. Attend la réponse à une demande d'emploi
5. N'a pas besoin pour vivre ou n'a pas envie de travailler
6. Dispose d'un emploi qui commence plus tard
7. Est impliqué dans un emploi qui commence plus tard
8. Autres, précisez

EA8b2. Si on vous proposait un emploi êtes-vous disponible pour travailler tout de suite ?

1. Oui 2. Non (Si oui, passez à C1)

EA8b3. Vous ne travaillez pas parce que vous êtes :

1. Invalide ou en maladie de longue durée ; 2. En cours de scolarité, étudiant ; 3. Retraité / vieillard ; 4. Grossesse ; 5. Femme au foyer ; 6. Rentier ; 7. Autres

EA8c1. Avez-vous une pension d'un travail précédent?

1. Oui 2. Non (Si non, passez à EA8c3)

EA8c2. Est ce que cette pension est votre ressource principale?

1. Oui 2. Non (Si oui, passez à EA8c4)

EA8c3. Comment faites-vous pour subvenir à vos besoins (ressources principales)

1. Perçoit une pension (veuvage, divorce, orphelinat)
2. Perçoit des revenus de sa (ses) propriété (s), vit de ses rentes
3. Vit de son épargne
4. Mendie
5. Boursier
6. Est pris en charge par sa famille, ou une autre personne

EA8c4. Combien percevez-vous par mois ?

(en milliers de FCFA)

**SI 15 ANS ET PLUS
PASSEZ AU MODULE
TRAJECTOIRE ET
PERSPECTIVES (TP).**

SINON FIN

MODULE ACTIVITE PRINCIPALE (AP)

Je vais maintenant vous interroger sur votre EMPLOI PRINCIPAL
(soit celui qui a le plus grand revenu ou le plus grand nombre d'heures travaillées)

- AP1.** Quel est le nom du métier, de la profession, du poste, de la tâche que vous avez exercé la semaine dernière ?
1. Oui 2. Non/___
- AP2.** Quelle est l'activité principale de l'entreprise dans laquelle vous avez exercé votre emploi principal, ou quel type de produits fabrique-t-elle ?
- AP3.** Quelle est votre catégorie socioprofessionnelle ?
- Salarié
1. Cadre supérieur, ingénieur et assimilé
2. Cadre moyen, agent de maîtrise ; 3. Employé ;
4. Ouvrier ; 5. Manœuvre
- Non salarié
6. Patron, employeur ; 7. Travailleur à son propre compte
8. Associé ; 9. Apprenti ; 10. Aide familial
- AP4.** L'entreprise dans laquelle vous avez exercé votre emploi principal (ou que vous dirigez) est une :
- (Si 1, 2 ou 5 passez à AP8a)
1. Administration publique ; 2. Entreprise publique et parapublique ; 3. Entreprise privée ; 4. ONG ;
5. Organisation internationale ; 6. Entreprise associative (coopérative, syndicat, église etc.) ; 7. Personnel de maison.
- AP5.** Combien de personnes au total travaillent dans cet établissement (y compris vous-même) ?
1. 1 seule personne (auto-emploi) ; 2. 2 personnes ;
3. 3-5 personnes ; 4. 6-10 personnes ; 5. 11-20 personnes ; 6. 21-50 personnes ; 7. 51-100 personnes ;
8. 101-500 personnes ; 9. Plus de 500 personnes.
- AP6.** L'entreprise dans laquelle vous avez exercé votre emploi principal (ou que vous dirigez) est-elle enregistrée ?
- AP6a.** INPS 1.Oui ; 2.Non ; 3.Ne sait pas
- AP6b.** N° Statistique 1.Oui ; 2.Non ; 3.Ne sait pas
- AP6c.** N° RC 1.Oui ; 2.Non ; 3.Ne sait pas
- AP6d.** Direction Nationale des Impôts
1.Oui ; 2.Non ; 3.Ne sait pas
- AP7.** Dans quel type de local avez-vous exercé votre emploi principal ?
1. Ambulant ;
2. Poste improvisé sur la voie publique ;
3. Poste fixe sur la voie publique ;
4. Véhicule ;
5. Domicile du client ;
6. Dans votre domicile sans installation particulière ;
7. Dans votre domicile avec installation particulière
8. Marché public
9. Local professionnel (bureau, usine, magasin, entrepôt...)
- AP8a1.** Depuis combien d'années exercez-vous votre emploi actuel ?
- (Années).....
- AP8a2.** Depuis combien de temps travaillez-vous dans cette entreprise ?
- (Années).....
- AP8a3a.** Dans cette entreprise, avez-vous connu une promotion ?
- AP8a3b.** Avez-vous bénéficié d'une ou de plusieurs formations continues dans cette entreprise 1. Oui 2. Non/___
- AP8a3b1.** Si oui quelle est la durée cumulée de ces formations (en nombre de jours)/___/___
- AP8a4.** Vous avez déclaré exercer le métier de (AP1) dans votre emploi principal. Combien de temps avez-vous exercé ce métier dans votre vie active ? (années).....
- AP8a5.** Depuis le début de votre vie active, combien de temps avez-vous effectivement travaillé (en excluant les périodes d'inactivité et de chômage) ? Années
- AP8b.** Comment avez-vous obtenu votre emploi ?/___
1. Relations personnelles (parents ou amis) ; 2. Directement auprès de l'employeur ; 3. Petites annonces, médias ; 4. ANPE ; 5. Bureau de placement privé (BPP) ; 6. Concours ; 7. J'ai créé moi-même mon emploi ; 8. Autres (précisez)
- AP8c.** L'entreprise dans laquelle vous avez exercé votre emploi principal (ou que vous dirigez) tient-elle une comptabilité ?
1. Oui 2. Non 3. Ne sait pas/___
- AP8d.** (Pour les salariés) : Avez-vous un bulletin de paie ? 1. Oui 2. Non/___
- AP8e.** (Pour les salariés) Avez-vous un contrat ?/___
1. Contrat écrit à durée indéterminée ; 2. Contrat écrit à durée déterminée ; 3. Accord verbal ; 4. Rien du tout
- AP9a.** Le travail que vous avez exercé dans cette entreprise est-il :/___
1. Continu ; 2. Irrégulier (Si 1, passez à AP10)
- AP9b.** S'agit-il d'un travail :/___
1. Occasionnel à la journée
2. Occasionnel à la tâche
3. Occasionnel saisonnier
- AP10.** Combien de jours avez-vous consacré à votre emploi principal au cours de la semaine dernière ou y consacrez-vous habituellement ?/___
- AP11.** Combien d'heures par semaine consacrez-vous habituellement à votre emploi principal?/___/___
- AP11a.** Si vous avez travaillé moins de 35 heures, quel en est le motif ?/___
1. Ne veut pas travailler plus
2. Imposé par la réglementation ou le patron
3. Réduction du temps de travail due à la mauvaise situation économique
4. Problème personnel
5. Autre.....

AP11b. Si vous avez travaillé plus de 48 heures, quel en est le motif ? /
 1. Horaire normal ;
 2. Excès de travail dû à la bonne conjoncture
 3. Doit travailler plus pour maintenir son pouvoir d'achat
 4. Autre.....

AP12. Sous quelle forme êtes-vous payé, ou obtenez-vous vos revenus, dans votre emploi principal ? /
 1. Salaire fixe (par mois, par quinzaine, par semaine)
 2. Au jour ou à l'heure de travail ; 3. A la tâche ; 4. Commission ; 5. Bénéfices ; 6. En nature ; 7. N'est pas rémunéré.

AP13a. Dans votre emploi principal, combien avez-vous gagné le mois dernier (ou à combien estimez-vous vos revenus mensuels pour ce travail ?)

AP13a1. Montant (en milliers de FCFA) /
 (Si montant >0, passez à AP14)

AP13b. Actuellement le salaire minimum est environ de 21 000 FCFA par mois. Quel est le montant de votre rémunération mensuel par rapport au salaire minimum ?/.....
 1. Moins de 21 000 FCFA ; 2. [21 000, 42 000] ;
 3. [42 000, 84 000] ; 4. [84 000, 168 000] ; 5. [168 000, 336 000] ; 6. [336 000, 672 000] ; 7. 672 000 et plus ; 8 Rien du tout

AP14. Votre rémunération a-t-elle changé par rapport à la même période de l'année dernière (pour ceux qui avaient le même emploi) ? 1.Oui ; 2.Non /

AP14a. Si oui en AP14, combien gagniez-vous par mois l'année dernière ?
 (en milliers de CFA) /

AP15a. Y a-t-il un syndicat dans l'entreprise où vous exercez votre emploi principal?
 1.Oui ; 2.Non (Si non, passez à AP15c) /

AP15b. Appartenez-vous à ce syndicat ?
 1.Oui ; 2.Non (Si oui, passez à AP16) /

AP15c. Si non y a-t-il un comité d'entreprise ? 1.Oui ; 2.Non ... /

AP16. Dans votre emploi principal, bénéficiez-vous des prestations suivantes :

AP16a. Prestations déjà incluses dans le revenu déclaré en AP13a

AP16a1. Allocation familiale 1.Oui ; 2.Non /

AP16a11. Montant par année (en milliers de CFA) /

AP16a2. Avantages en espèces (logement, électricité, transport, téléphone) 1.Oui ; 2.Non /

AP16a21. Montant par année (en milliers de CFA) /

AP16b. Prestations non incluses dans le revenu déclaré en AP13a

AP16b1 Primes de fin d'années 1.Oui ; 2.Non /

AP16b11. Montant par année (en milliers de CFA) /

AP16b2. INPS et Autres primes (à préciser): /
 1.Oui ; 2.Non /

AP16b21. Montant par année (en milliers de CFA) /

AP16b3. Participation aux bénéfices 1.Oui ; 2.Non /

AP16b31. Montant par année (en milliers de CFA) /

AS6. Combien de personnes au total travaillent dans cet établissement (y compris vous même)..... /

AP16b4. Congés Payés 1.Oui ; 2.Non /

AP16b5. Congés maladies 1.Oui ; 2.Non /

AP16b6. L'employeur paye-t-il des contributions sociales pour vous ?
 1.Oui ; 2.Non ; 3.Ne sait pas /

AP16b7. Service médical particulier 1.Oui ; 2.Non /

AP16b71. Montant par année (en milliers de CFA) /

AP16b8. Avantages en nature (logement, électricité, transport, téléphone) 1.Oui ; 2.Non /

AP16b81. Montant par année (en milliers de CFA) /

ACTIVITE SECONDAIRE (AS)

AS1a En plus de votre emploi principal, avez-vous exercé d'autres emplois, de quelque type que ce soit (salarier, indépendant, non rémunéré, etc) au cours de l'année dernière ?
 1.Oui ; 2.Non..... (Si non, passez à RHAI) /

AS1b. Donnez par ordre d'importance (nombre d'heures) la liste de ces autres emplois :

AS1b 1. /

AS1b 2. /

AS1b 3. /

AS1b 4. /

AS1c. Nombre d'emplois secondaires : /

Nous allons maintenant vous interroger sur le plus important de ces emplois secondaires que vous avez exercé la semaine dernière

AS2. Quel est le nom du métier, de la profession, du poste, de la tâche de l'emploi secondaire que vous avez exercé la semaine dernière ? /

AS3. A quelle branche appartient l'entreprise dans laquelle vous avez exercé votre emploi secondaire, ou quel type de produits fabrique – t-elle ? /

AS4. Quelle est votre catégorie socio -professionnelle, dans cet emploi secondaire ? /

Salarier

1. Cadre supérieur, ingénieur et assimilé

2. Cadre moyen, agent de maîtrise

3. Employé,

4. Ouvrier

5. Manœuvre

Non salarier

6. Patron 7. Travailleur à son propre compte ; 8. Associé;

9. Apprenti ; 10. Aide familial.

AS5. L'entreprise dans laquelle vous avez exercé votre emploi secondaire ou que vous dirigez est une : /
 (Si 1 ou 5 ou 7, passez à AS9)

1. Administration publique ; 2. Entreprise publique et parapublique ; 3. Entreprise privée ; 4. ONG ; 5. Organisation internationale ; 6. Entreprise associative (coopérative, syndicat, église etc.) ; 7. Personnel de maison.

1.1 seule personne (auto-emploi) ;

2. 2 personnes ; 3. 3-5 personnes

4. 6-10 personnes ; 5. 11-20 personnes ; 6. 21-50 personnes
7. 51-100 personnes ; 8. 101-500 personnes ;
9. Plus de 500 personnes

- AS7. L'entreprise dans laquelle vous avez exercé votre emploi secondaire (ou que vous dirigez) est -elle enregistrée.
- AS7a. INPS : 1. Oui ; 2. Non ; 3. Ne sait pas..... / ☐
- AS7b. N° Statistique : 1. Oui ; 2. Non ; 3. Ne sait pas..... / ☐
- AS7c. N° RC : 1. Oui ; 2. Non ; 3. Ne sait pas..... / ☐
- AS7d. Direction Nationale des Impôts : 1. Oui ; 2. Non ; 3. Ne sait pas..... / ☐
- AS7e. Tenue d'une comptabilité : 1. Oui ; 2. Non ; 3. Ne sait pas..... / ☐
- AS8. Dans quel type de local avez-vous exercé votre emploi secondaire ?..... / ☐
1. Ambulant ; 2. Poste improvisé sur la voie publique
3. Poste fixe sur la voie publique ; 4. Véhicule ; 5. Domicile du client ; 6. Dans votre domicile sans installation particulière ; 7. Dans votre domicile avec installation particulière ; 8. Marché public ; 9. Local professionnel (bureau, usine, magasin, entrepôt, etc)
- AS9. Combien d'heures par semaine consacrez -vous habituellement à tous vos emplois (emploi principal + secondaire) ?..... / ☐
- AS10. Si vous avez travaillé plus de 48 heures, quel en est le motif ? / ☐
1. Horaire normal ; 2. Excès de travail dû à la bonne conjoncture 3. Doit travailler plus pour maintenir son pouvoir d'achat ; 4. Autre
- AS11. Dans votre emploi secondaire, combien avez -vous gagné le mois dernier (ou à combien estimez -vous vos revenus mensuels pour ce travail) ?
- AS11a. Montant (en milliers de FCFA) / ☐
- AS11b. Actuellement le salaire minimum est environ de 21 000 FCFA par mois. Quel est le montant de votre rémunération mensuel par rapport au salaire minimum ? / ☐
1. Moins de 21 000 FCFA ;
2. [21 000, 42 000[; 3. [42 000, 84 000[;
4. [84 000, 168 000[; 5. [168 000, 336 000[
6. [336 000, 672 000[; 7. 672 000 et plus ; 8- Rien du tout.
- AS12. (Pour les salariés)
Avez-vous un bulletin de paie ? 1. Oui ; 2. Non / ☐

REVENUS HORS ACTIVITE (RHA)

Quels revenus réguliers autres que ceux de vos activités avez-vous perçus ?

- RHA1. Pension de travail : 1. Oui ; 2. Non..... / ☐
- RHA1a. Périodicité 1. Mois ; 2. Trimestre ; 3. Année..... / ☐
- RHA1b. Montant (en milliers de FCFA) / ☐
- RHA2. Autres pensions : 1. Oui ; 2. Non..... / ☐
- RHA2a. Périodicité 1. Mois ; 2. Trimestre ; 3. Année..... / ☐
- RHA2b. Montant (en milliers de FCFA) / ☐
- RHA3. Rentes, revenus de la propriété : 1. Oui ; 2. Non..... / ☐
- RHA3a. Périodicité 1. Mois ; 2. Trimestre ; 3. Année..... / ☐
- RHA3b. Montant (en milliers de FCFA) / ☐
- RHA4. Revenus financiers, placements : 1. Oui ; 2. Non..... / ☐
- RHA4a. Périodicité 1. Mois ; 2. Trimestre ; 3. Année..... / ☐
- RHA4b. Montant (en milliers de FCFA) / ☐
- RHA5. Bourses d'étude : 1. Oui ; 2. Non..... / ☐
- RHA5a. Périodicité 1. Mois ; 2. Trimestre ; 3. Année..... / ☐
- RHA5b. Montant (en milliers de FCFA) / ☐
- RHA6. Autres revenus réguliers : 1. Oui ; 2. Non / ☐
- RHA6a. Périodicité 1. Mois ; 2. Année ; 3. Semestre..... / ☐
- RHA6b. Montant (en milliers de FCFA) / ☐

Quels revenus irréguliers avez-vous perçus sur les 12 derniers mois

- RHA7. Don d'une personne hors ménage : 1. Oui ; 2. Non..... / ☐
- RHA7a. Montant (en milliers de FCFA) / ☐
- RHA8. Autres revenus irréguliers : 1. Oui ; 2. Non..... / ☐
- RHA8a. Montant (en milliers de FCFA) / ☐

RECHERCHE D'EMPLOI (R)

- R1. Durant les 4 dernières semaines, avez-vous cherché à obtenir un autre emploi (comme salarié, indépendant, ou sous quelque forme que ce soit) ? 1. Oui ; 2. Non..... / ☐
- R2. Pour quelle raison cherchez-vous un autre emploi ? / ☐
1. Accroître vos revenus
2. Améliorer vos conditions de travail
3. Trouver un travail plus intéressant
4. Autre (précisez)

- R3. Vous avez déclaré avoir travaillé (AP11) heures au cours de la semaine dernière dans votre emploi principal. Voudriez-vous travailler plus ? 1. Oui ; 2. Non..... / ☐
- R3a. Si oui, combien d'heures en plus / ☐

SI 15 ANS ET PLUS PASSEZ AU MODULE
PERSPECTIVES ET TRAJECTOIRES (TP)
SINON FIN

MODULE CHOMAGE (C)

- | | |
|---|--|
| <p>C1. Depuis combien de temps êtes -vous sans emploi, et à la recherche d'un emploi (Durée) ?</p> <p>Années.....\|_\|_\|</p> <p>Mois.....\|_\|_\|</p> | <p>C7c2. Si C7c1=2, laquelle.....\|_\|_\|_\|</p> |
| <p>C2. Pourquoi recherchez-vous un emploi ?(Si 2, passez à C4)\|_\|</p> <p>1. Perte de l'emploi précédent</p> <p>2. Nouvelle insertion sur le marché du travail (n'a jamais travaillé)</p> | <p>C7d. Où.....\|_\|</p> <p>1. Dans l'administration publique ;</p> <p>2. Dans une entreprise publique ou para publique</p> <p>3. Dans une grande société privée ; 4. Dans une PME/PMI</p> <p>5. ONG ; 6. Dans une micro entreprise ; 7. Indifférent</p> |
| <p>C3. Quelle est la raison principale qui a conduit à la perte de votre emploi ?.....\|_\|_\|</p> <p><u>Involontaire</u></p> <p>1. Compression de personnel (secteur privé) ;</p> <p>2. Fermeture d'entreprise (secteur privé) ;</p> <p>3. Restructuration, compression de personnel (Entreprise publique);</p> <p>4. Liquidation d'une entreprise publique</p> <p>5. Privatisation d'une entreprise publique</p> <p>6. Licenciement ;</p> <p>7. Compression de la Fonction Publique;</p> <p>8. Fin de contrat</p> <p><u>Volontaire</u></p> <p>9. Départ volontaire (rémunération insuffisante)</p> <p>10. Départ volontaire (conditions de travail insatisfaisantes)</p> <p>11. Départ volontaire (travail inintéressant)</p> <p>12. Autre raison</p> | <p>C8a. Si l'emploi recherché est salarié (C7a = 1), pourquoi ? .\|_\|</p> <p>1. N'a pas pu se mettre à son compte</p> <p>2. Espère gagner plus ;</p> <p>3. Sécurité de l'emploi et du salaire</p> <p>4. Possibilité de promotion ;</p> <p>5. Bénéficier de prestations sociales</p> <p>6. Autre raison :</p> |
| <p>C4. Comment faites-vous pour subvenir à vos besoins, pendant la période de chômage (ressource principale) .....\|_\|</p> <p>1. Perçoit une pension de travail</p> <p>2. Perçoit une pension (veuvage, divorce, orphelinat)</p> <p>3. Perçoit des revenus de sa (ses) propriété (s), vit de ses rentes ; 4. Vit de son épargne ; 5. Mendie ; 6. Boursier</p> <p>7. Est pris en charge par sa famille, ou une autre personne</p> <p>8. Autre :</p> | <p>C8b. Si l'emploi recherché est indépendant (C7a = 2), pourquoi ?</p> <p>1. N'a pas trouvé d'emploi salarié</p> <p>2. Espère gagner plus ; 3. Flexibilité des horaires</p> <p>4. Travail plus varié, plus intéressant</p> <p>5. Etre son propre chef</p> <p>6. Autre raison :</p> |
| <p>C4a. Combien percevez-vous par mois ? (en milliers de FCFA) .....\|_\|_\|_\|</p> | <p>C9. Combien d'heures par semaine désirez -vous travailler ?</p> |
| <p>C5. Quel moyen utilisez-vous pour rechercher un emploi (moyen principal).....\|_\|</p> <p>1. Relations personnelles (parents, amis)</p> <p>2. Directement auprès de l'employeur</p> <p>3. Petites annonces, médias</p> <p>4. ANPE.</p> <p>5. Bureau de Placement Privé</p> <p>6. Concours</p> <p>7. Cherche à créer une entreprise</p> <p>8. Autre moyen</p> | <p>C10a. Pour ce nombre d'heures, combien voulez-vous gagner ? (en milliers de FCFA par mois).....\|_\|_\|_\|</p> |
| <p>C6a. Pourquoi n'avez-vous pas exercé un petit boulot pour un revenu (pousse-pousse, vendeur ambulant, petit atelier improvisé, gardien, etc.).....\|_\|</p> <p>1. La rémunération est trop faible</p> <p>2. Ne correspond pas à ce que je veux faire</p> <p>3. Prend du temps, et rend difficile la recherche d'emploi</p> <p>4. C'est pas si facile de trouver un petit boulot</p> | <p>C10b. Etes-vous disposé à réviser vos prétentions si la période de chômage se prolonge ? 1. Oui 2. Non .....\|_\|</p> <p>(Si non, passez à C11)</p> |
| <p>C6b. Si la période de chômage se prolonge seriez -vous prêt à exercer ce type d'activité ? 1. Oui ; 2. Jamais \|_\|</p> | <p>C10c. Salaire ou revenu minimum Acceptable ? (En milliers de FCFA) .....\|_\|_\|_\|</p> |
| <p>C6b1. Si oui dans combien de mois.....\|_\|_\|</p> | <p>C11. Pour l'emploi que vous recherchez avez-vous une expérience professionnelle ? 1. Oui 2. Non .....\|_\|</p> |
| <p>C7. Quel type d'emploi recherchez-vous ?</p> | <p>C12a. Etes-vous inscrit à l'ANPE ? 1. Oui 2. Non .....\|_\|</p> |
| <p>C7a. 1. Salarié ; 2. Indépendant ; 3. Indifférent .....\|_\|</p> | <p>C12b. Etes-vous inscrit au moins dans un BPP ? 1. Oui 2. Non .....\|_\|</p> <p>(Si non à C12a et à C12b, passez à C12d)</p> |
| <p>C7b. 1. Permanent, à plein temps ; 2. Permanent, à temps partiel;</p> <p>3. Temporaire ; 4. Indifférent .....\|_\|</p> | <p>C12c. Qu'attendez-vous de l'ANPE et des BPP ? .....\|_\|</p> <p>(Passez à C13)</p> <p>1. Des propositions d'embauche ; 2. Une formation ;</p> <p>3. Stage ; 4. Autre :</p> |
| <p>C7c1. 1. Mon métier ou à ma qualification ;</p> | <p>C12d. Pourquoi n'êtes-vous pas inscrit à L'ANPE ou aux BPP ?</p> <p>1. Ne connaît pas L'ANPE ; 2. Ne connaît pas les BPP</p> <p>3. Ne sait pas comment s'inscrire</p> <p>4. Ne pense pas que L'ANPE ou les BPP puissent l'aider</p> <p>5. Autre :</p> |
| | <p>C13. Quel sorte d'appui attendez-vous pour sortir du chômage?</p> <p>1. Formation professionnelle ; 2. Stage de qualification</p> <p>3. Appui financier ; 4. Appui institutionnel</p> <p>5. Autre :</p> |

N° du Questionnaire :

MODULE TRAJECTOIRE ET PERSPECTIVES (TP)

Pour les personnes de 15 ans et plus

ACTIVITES DU PERE	
TP1.	Quand vous aviez 15 ans, votre père travaillait –t-il ?..... <input type="text"/> <i>(Si code >1, passez à TP6)</i> 1. Oui ; 2. Non ; 3. Père absent ; 4. Ne sait pas
TP2.	Quelle était sa catégorie socio-professionnelle ? <input type="text"/> <u>Salarié</u> 1. Cadre supérieur, ingénieur et assimilé 2. Cadre moyen, agent de maîtrise; 3. Employé, ouvrier 4. Manœuvre <u>Non salarié</u> 5. Patron ; 6. Travailleur à son propre compte 7. Associé ; 8. Apprenti ; 9. Aide familial ; 10. Ne sait pas
TP3.	Dans quel type d'entreprise travaillait –il ? <input type="text"/> 1. Administration publique ; 2. Entreprise publique et para-pub.; 3. Entreprise privée ; 4. ONG ; 5. Organisation internationale ; 6. Entreprise associative (coopérative, syndicat, église etc.) ; 7. Personnel de maison.; 8- Agro-Sylvo-Pastorale
TP4.	Dans quel secteur travaillait –il ? <input type="text"/> <i>(Se référer à l'annexe 2 du manuel intitulé « Nomenclature des branches d'activité ».)</i>
TP5.	Quelle est la dernière classe qu'il a suivi avec succès ? <i>(convertir en nombre d'années)</i> <input type="text"/>
EMPLOI ANTERIEUR	
TP6.	Vous êtes aujourd'hui (actif occupé, chômeur, inactif). Exerciez-vous un autre emploi antérieurement ? 1. Oui 2. Non <i>(Si non, passez à TP15)</i> <input type="text"/>
TP7.	Quel est le nom du métier, de la profession, du poste, de la tâche de votre emploi antérieur ? <input type="text"/>
TP8.	Quelle était la branche de l'entreprise dans laquelle vous avez exercé votre emploi antérieur ? <input type="text"/>
TP9.	Quelle était votre catégorie socio-professionnelle dans votre emploi antérieur ? <input type="text"/> <u>Salarié</u> 1. Cadre supérieur, ingénieur et assimilé ; 2. Cadre moyen, agent de maîtrise ; 3. Employé ; 4. Ouvrier ; 5. Manœuvre <u>Non salarié</u> 6. Patron ; 7. Travailleur à son propre compte ; 8. Associé; 9. Apprenti ; 10. Aide familial
TP10.	L'entreprise dans laquelle vous avez exercé votre emploi antérieur (ou que vous dirigez) est une : <input type="text"/> 1. Administration publique (Passez à TP13a) 2. Entreprise publique et para publique; 3. Entreprise privée; 4. ONG ; 5. Organisation internationale (Passez à TP13a) 6. Entreprise associative (coopérative, syndicat, église) 7. Personnel de maison (Passez à TP13a)
TP11.	Combien de personnes au total travaillaient dans cet établissement (y compris vous même) <input type="text"/> 1. 1 seule personne (auto-emploi) ; 2. 2 personnes ; 3. 3-5 personnes; 4. 6-10 personnes ; 5. 11-20 personnes 6. 21-50 personnes ; 7. 51-100 personnes ; 8. 101-500 personnes ; 9. Plus de 500 personnes.
TP12.	L'entreprise dans laquelle vous avez exercé votre emploi antérieur (ou que vous dirigez) est –elle enregistrée ? INPS 1.Oui ; 2.Non ; 3.Ne sait pas..... <input type="text"/> TP12a. N° Statistique 1.Oui ; 2.Non ; 3.Ne sait pas <input type="text"/> TP12b. N° RC 1.Oui ; 2.Non ; 3.Ne sait pas <input type="text"/> TP12c. Direction Nationale des Impôts 1.Oui ; 2.Non ; 3.Ne sait pas..... <input type="text"/> TP12d. Tenue d'une comptabilité : 1.Oui ; 2.Non ; 3.Ne sait pas..... <input type="text"/>
TP13a.	En quelle année avez-vous pris votre emploi antérieur ? Date (MM/AA) <input type="text"/> / <input type="text"/>
TP13b.	Combien d'années l'avez-vous exercé ? (Années) <input type="text"/>
TP14.	Pourquoi avez-vous quitté votre emploi antérieur ? <input type="text"/> <u>Départ involontaire</u> 1. Retraite ; 2. Licenciement, faillite, restructuration <u>Départ volontaire (passez à TP15)</u> 3. Pour une meilleure rémunération 4. Pour de meilleures conditions de travail 5. Pour un travail plus intéressant 6. Autre raison (à préciser).....
TP14b.	Après votre départ involontaire, quelle a été la durée totale de votre période de chômage TP14b1. Années..... <input type="text"/> TP14b2. Mois <input type="text"/>
PERSPECTIVES	
TP15.	Quels sont vos projets d'emploi pour l'avenir ? <input type="text"/> 1. Obtenir un premier emploi 2. Obtenir un nouvel emploi dans la même entreprise (promotion) 3. Obtenir un nouvel emploi dans une autre entreprise 4. Garder l'emploi que j'ai actuellement ou rester inactif 5. Créer sa propre entreprise. 6. Autres à préciser <i>(Si la réponse est 4 alors fin de l'enquête)</i>
TP16.	Type d'emploi désiré TP16a. Branche préférée <input type="text"/> 1. Agriculture ; 2. Industrie ; 3. BTP ; 4. Commerce 5. Banque, assurance ; 6. Service non financier
TP16b.	Type d'entreprise : <input type="text"/> 1. Administration publique ; 2. Entreprise publique et para publique ; 3. Entreprise privée ; 4. ONG ; 5. Organisation internationale ; 6. Entreprise associative (coopérative, syndicat, église) ; 7. Personnel de maison
TP16c.	Quelle catégorie socio-professionnelle pour cet emploi ? .. <input type="text"/> <u>Salarié</u> 1. Cadre supérieur, ingénieur et assimilé ; 2. Cadre moyen, agent de maîtrise ; 3. Employé, ouvrier qualifié ; 4. Employé, ouvrier semi-qualifié ; 5. Manœuvre <u>Non salarié</u> 6. Patron ; 7. Travailleur à son propre compte ; 8. Associé 9. Apprenti ; 10. Aide familial
TP17a.	Si l'emploi désiré est salarié, pourquoi ? <input type="text"/> 1. Ne peut pas se mettre à son compte dans de bonnes conditions ; 2. Espère gagner plus ; 3. Sécurité de l'emploi 4. Possibilité de promotion ; 5. Bénéficiaire de prestations sociales ; 6. Autre raison (précisez) :.....
TP17b.	Si l'emploi désiré est indépendant pourquoi ? <input type="text"/> 1. Ne pense pas trouver d'emploi salarié; 2. Espère gagner plus ; 3. Sécurité de l'emploi et du salaire ; 4. Possibilité de promotion ; 5. Bénéficiaire de prestations sociales ; 6. Autre raison (précisez):
TP18.	Dans combien de temps serez-vous disponible pour exercer cet emploi ? (Mois) <input type="text"/>

FIN

Department of Statistics and Sociology of the Republic of Moldova

Approved by the DSS of the Republic of Moldova by Order No.141, dated November,

STRICTLY CONFIDENTIAL!

“According to the Law regarding Official Statistics nr. 412-XV from the 9th of December 2004, art. 22, the official statistics bodies assure the confidentiality of individual data and their usage only for statistical purposes.

**LABOUR FORCE QUESTIONNAIRE
IN HOUSEHOLDS
Individual questionnaire**

CI

Questionnaire shall be filled in only for people born before **month** 1991 inclusively.

*Month from list of households **LG** shall be transcribed.*

- Questions generally refer to last week, from Monday to Sunday, inclusively.
- You may write down only one answer to the question.
- Answer the questions by marking closed boxes ☐ with “x”, inserting figures in open boxes and writing text in spaces marked by dotted line_____
- Figures following the mark ➞ rightwards a box shall indicate the number of the question which is supposed to follow after marking the answer into the respective box.
- In cases when there is no ➞ sign after the marked box, the following question shall be addressed.

IDENTIFICATION OF THE INTERVIEWEE

Data are taken from the Dwelling Questionnaire (CL)

Code of PSU..... CENTR

Code of dwelling..... LOC

Sequence number of the CL in the dwelling... CL

Number of the person from Questionnaire CL NRP

Number of the survey from CL..... NRA

Person's first and last names_____

Date of birth.....month year

LUNN

ANN

Notes

Interviewer's signature

INITIAL FILTER

1. Did you work during last week for a wage/salary or other monetary income or for payment in kind (inclusive in a private enterprise, farm and subsidiary plot, on compulsory military service)?

YES..... 1 210 345 1 ☐ 3

NO..... 1 439 100 2 ☐

LUCR

2. Last week, did you do any paid or unpaid work for at least one hour (even if you are student, unemployed, housewife or retired person and work only part-time or occasionally)?

ATTENTION! Activities, which are exclusively non-profit, charitable or voluntary, as well as household chores and recreation activities, should not be taken into consideration.

Examples:

- Paid work as part-time or temporary employee;
- Paid work as occasional worker, assistant, substitute;
- Unpaid work on subsidiary plot, in individual enterprise or on farm of another household member;
- Production or sale of agricultural or processed products from subsidiary plot;
- Sale of foodstuffs, beverages, clothes, books, etc. on the street, in the market or at home;
- Renovation of houses, flats, repair of cars or durable goods for other persons for payment;
- Transportation of passengers or goods for payment;
- Paid consultations, private tuition (foreign languages, computer etc.);
- House cleaning or baby-sitting for payment.

YES..... 234 752 1 ☐

NO..... 1 204 348 2 ☐ 6

LUCREX

3. Has this work been done on your own subsidiary plot (or that of another household member)?

(livestock farming, land plots cultivating and carrying out other agricultural works, selling products obtained from the own subsidiary plot)

YES..... 563 367 1 ☐

NO..... 881 729 2 ☐ 12

AGR

4. In general, are the (raw or processed) products obtained from this plot produced exclusively for your own consumption or also for sale?

• Only for own consumption..... 521 263 1 ☐

• For own consumption and for sale (including barter)..... 42 104 2 ☐ 12

.AGRV

5. How many hours did you work last week on the subsidiary plot?

• Less than 20 hours..... 448 248 1 ☐

• 20 hours and more..... 73 015 2 ☐ 12

6. Last week, did you have work from which you were temporarily absent because of vacation, illness, seasonal reasons, bad weather, etc.?

YES..... 135 697 1 ☐

NO..... 1 516 899 2 ☐ 67

LUCR1a

7. What was the main reason why you did not work last week?

- Vacation or studies..... 4 667 1 ☐
- Maternity leave 2 948 2 ☐ 12
- Medical (illness, injury)..... 7 388 3 ☐
- Care of children (up to 3 or 6 years) 8 266 4 ☐
- Unpaid leave..... 3 975 5 ☐
- Technical unemployment (lack of raw material or energy,
lack of orders or clients etc.)..... 5 048 6 ☐ 9
- Strike or labour conflict..... 7 ☐
- Schooling or training..... 253 8 ☐ 12
- Seasonal work (self-employment)..... 64 242 9 ☐ 67
- Seasonal work (wage employment)..... 29 816 10 ☐ 10
- Days off, holidays, variable timetable 4 064 11 ☐
- Family responsibilities (except for maternity leave)..... 345 12 ☐
- Bad weather conditions..... 4 685 13 ☐ 12
- Other _ _ _ _ _ 14 ☐

MODUREO

8. Were you on leave at the initiative of the administration of the enterprise (of the employer), because there was no work for you?

YES..... 3 331 1 ☐

NO..... 8 910 2 ☐

COS

9. Are you sure that you will have returned to work:

- Within 3 months? 5 244 1 ☐ 12
- After 3 months? 4 229 2 ☐
- Not sure to return..... 7 816 3 ☐ 67

LOCAS

10. Are you sure that you will have returned to work:

- Within 6 months? 25 117 1 ☐
- After 6 months? 2 623 2 ☐
- Not sure to return 2 076 3 ☐ 67

SEZON

11. Does your employer pay you a wage or salary during the off-season?

YES 393 1 ☐

NO 24 724 2 ☐ 67

PLAT

PERSON WHO WORKED

MAIN ACTIVITY

12. What was your status in employment?

Read

- Employee.....800 240 1 ☐
- Employer (was having employees)... 9 995 2 ☐ 22
- Own account worker..... 197 510 3 ☐
- Unpaid family worker..... 18 962 4 ☐ 23
- Member of a cooperative..... 130 5 ☐
- On compulsory military service..... 6 ☐ 89

STAP

13. Have you been employed on the basis of:

- a contract 716 004 1 ☐
- an agreement 84 236 2 ☐

CONTRACT

14. Is your contract or agreement of:

- a limited duration?..... 61 180 1 ☐ 16
- a unlimited duration?..... 739 060 2 ☐

ANGSAL

15. How long have you been employed in this job?

- Less than 1 year..... 95 946 1 ☐
- 1 to 2 years.....146 375 2 ☐
- 3 to 5 years..... 179 755 3 ☐
- 6 to 10 years..... 118 936 4 ☐ 18
- 11 to 20 years..... 104 309 5 ☐
- 21 to 30 years..... 80 562 6 ☐
- 31 or more years.....13 177 7 ☐

TIMPLU

16. Why is your contract or agreement of limited duration?

Suggest

- Apprenticeship or practice..... 1 608 1 ☐
- Probation period..... 7 478 2 ☐
- Seasonal work..... 8 701 3 ☐
- Occasional work..... 8 863 4 ☐
- Replacement job..... 2 965 5 ☐
- Public employment program
(for unemployed)..... 1 500 6 ☐
- Project work..... 1 962 7 ☐
- Specific service or task (teacher, artist, etc.)
.....4 656 8 ☐
- Chain contract..... 23 244 9 ☐
- Other..... 201 10 ☐

MOTEMP

17. What is the duration of your contract or agreement?

- Daily contracts/agreements..... 3 825 1 ☐

- Less than 1 month..... 4 593 2 ☐
- 1 to 2 months..... 4 255 3 ☐
- 3 to 6 months..... 8 599 4 ☐
- 7 to 12 months..... 15 004 5 ☐
- More than 12 months.....23 580 6 ☐
- I don't know..... 1 324 7 ☐

DURCONTR

18. Does your employer pay social contributions for you (pension fund and unemployment fund)?

- Yes, sure.....732 252 1 ☐
- Possibly..... 11 508 2 ☐
- No..... 42 384 3 ☐
- I don't know..... 14 097 4 ☐

CONTRIB

19. Do you benefit from paid annual leave or compensation for unused leave?

- Yes..... 683 594 1 ☐
- No..... 105 636 2 ☐
- I don't know..... 11 010 3 ☐

CONAN

20. Would you benefit from paid sick leave in case of illness?

- Yes..... 672 951 1 ☐
- No..... 106 351 2 ☐
- I don't know..... 20 938 3 ☐

CONBO

21. What ownership form had the enterprise where you worked?

- Public..... 327 632 1 ☐
- Private..... 637 485 2 ☐
- Joint venture (public and private) without
foreign share.....33 761 3 ☐ 23
- Foreign.....11 805 4 ☐
- Joint venture property (with foreign share)
.....16 153 5 ☐

PROP

22. How many employees...

Do you employ usually?..... ☐ ☐ ☐ NRSAL

Did you employ last week?..... ☐ ☐ ☐ NRSALT

23. Where is your place of work?

- At your home..... 12 569 1 ☐
- At the client's or employer's home..... 20 321 2 ☐
- Enterprise, plant, factory, office, shop, workshop etc. (separate from the house)..... 771 085 3 ☐
- On a farm or agricultural plot..... 158 471 4 ☐
- Construction site..... 4 700 5 ☐
- Fixed stall in the market or on the street
..... 44 657 6 ☐
- Without fixed location..... 14 664 7 ☐
- Other_____ 370 8 ☐

PLAS

24. Was your main activity carried out at...?

- An enterprise, organization, institution (as a legal entity)..... 718 981 1 ☐
- Private agricultural enterprise (farm)....29 433 2 ☐
- Private enterprise; private notaries' or lawyers' office, partnership (without the right of a legal entity) 75 528 3 ☐
- Individual work activity..... 82 462 4 ☐
- Paid domestic workers employed by households (activity 95)..... 3 771 5 ☐
- Auxiliary household 116 661 6 ☐ 26
- I don't know.....7 ☐

FOJ

25. Was the enterprise where you worked registered?

- Yes..... 857 519 1 ☐
- Is being registered..... 1 621 2 ☐
- No..... 46 153 3 ☐
- I don't know..... 4 881 4 ☐

REGIS

26. What occupation did you have?

a. Actually fulfilled profession or function

b. Short description-----

Code

OCUP

27. Does this type of work correspond to your field of training?

- Yes..... 850 787 1 ☐ 29
- No, is below 118 817 2 ☐
- No, is above 27 653 3 ☐
- No, is equivalent but unrelated.... 29 579 4 ☐

DOMEN

28. What is your field of training?

(To indicate until 3 fields)

1. -----
2. -----
3. -----

CODOOM

29. a) Give the full name of the establishment or enterprise where you worked last week (enterprise: *limited liability corporation, joint stock company, cooperative, state enterprise, etc., association, institution, organization*); establishment (plant, factory, shop, section, transportation company, etc.)

b) What is the main activity of the enterprise or establishment where you worked?-----CAEM

ACT

30. How many persons work at the enterprise (establishment) including yourself?

- 1-4 317 547 1 ☐
- 5-9..... 71 368 2 ☐
- 10-19..... 145 286 3 ☐
- 20-49..... 137 998 4 ☐
- 50-99..... 98 655 5 ☐
- 100-199..... 66 716 6 ☐ 32
- 200 and more..... 116 829 7 ☐
- more than 9 persons..... 38 578 8 ☐
- I don't know..... 33 859 9 ☐

NRLUCK

31. Specify the concrete number of workers*Attention! To be filled in by the interviewer* CONCRET**32. At your workplace, are you exposed to factors that have a negative impact on your health?**

- Yes 189 638 1 ☐
- No..... 837 199 2 ☐ 34

COND

33. Which factors are these?

1. -----
2. -----
3. -----

CONDL

34. Is your work full or part time:

- Full time 934 085 1 ☐ 36
- Part time 92 751 2 ☐

PROG

35. What is the main reason why you work part time?*Suggest*

- Education or retraining..... 2 307 1 ☐
- Disease or handicap..... 3 530 2 ☐
- Didn't find a full time job 47 867 3 ☐
- Transferred at the initiative of the administration/employer to a part time job
..... 6 307 4 ☐
- Lack of customers, orders..... 16 904 5 ☐
- Didn't want a full time job (including due to age reasons)..... 3 839 6 ☐
- Family responsibilities (including maternity leave)..... 11 997 7 ☐
- Other_____ 8 ☐

MOPAR

SECONDARY ACTIVITY

36. In current living conditions, with low incomes, high prices, many people carry out a secondary activity in addition to the main one. Last week did you perform any second (permanent, occasional or exceptional) activity for one hour at least, even for nonessential income in cash or in kind?

- Paid work as part-time or temporary employee;
- Paid work as occasional worker, assistant, substitute;
- Unpaid work on subsidiary plots, in individual enterprise or on farm of another household member;
- Sale or barter of agricultural or processed products from subsidiary plot;
- Sale of foodstuffs, beverages, clothes, books, etc. on the street, in the market or at home;
- Refurbishment of houses, flats, repair of cars or durable goods for other persons for payment;
- Transportation of passengers or goods for payment;
- Paid consultations, private tuition (foreign languages, computer etc.);
- House cleaning or baby-sitting for payment.

YES..... 104 271 1 ☐

NO..... 922 566 2 ☐ 54

ASEC

37. Has this work, in your secondary activity, been done on your own subsidiary plot (or that of another household member)?

YES..... 93 042 1 ☐

NO..... 11 229 2 ☐ 39

AGRS

38. In general, are the (raw or processed) products obtained from this plot exclusively for own consumption or also for sale?

- Only for own consumption..... 83 177 1 ☐ 54
- For own consumption and for sale (including barter)..... 9 864 2 ☐

AGRVS

39. What was your status in employment in your secondary activity?

Read

- Employee..... 6 800 1 ☐
- Employer 202 2 ☐
- Own account worker 9 382 3 ☐ 45
- Unpaid family worker 4 709 4 ☐
- Member of a cooperative..... 5 ☐

STAPS

40. Have you been employed, in your secondary activity, on the basis of:

- A contract 4 669 1 ☐
- An agreement 2 132 2 ☐

CONTRACTS

41. Does your employer pay social contributions for you (pension fund and unemployment fund) in your secondary activity?

- Yes, sure..... 5 808 1 ☐

- Possibly..... 2 ☐
- No..... 894 3 ☐
- I don't know..... 98 4 ☐

CONTRIBS

42. Do you benefit, in your secondary activity, from paid annual leave or compensation instead of it?

- Yes..... 4 627 1 ☐
- No..... 1 979 2 ☐
- I don't know..... 159 3 ☐

CONANS

43. Would you benefit, in your secondary activity, from paid sick leave in case of illness?

- Yes..... 4 529 1 ☐
- No..... 2 159 2 ☐
- I don't know..... 113 3 ☐

CONBOS

44. What ownership form had the enterprise where you worked in your secondary activity?

- Public..... 2 700 1 ☐
- Private..... 18 182 2 ☐
- Joint venture (public and private) without foreign share..... 3 ☐
- Foreign..... 4 ☐
- Joint venture property (with foreign share)..... 211 5 ☐

PROPS

45. Where is your work place in your secondary activity?

- At your home..... 905 1 ☐
- At the client's or employer's home... 1 599 2 ☐
- Enterprise, plant, factory, office, shop, workshop etc. (separate from the house)..... 6 695 3 ☐
- On a farm or on agricultural plot..... 9 956 4 ☐
- Construction site 5 ☐
- Fixed stall in the market or on the street..... 1 250 6 ☐
- Without fixed location..... 689 7 ☐
- Other..... 8 ☐

PLASS

46. Your secondary activity was carried out at:

- An enterprise, organization, institution (as a legal entity)..... 6 049 1 ☐
- Private agricultural enterprise (farm)..... 2 ☐
- Private enterprise; private notaries' or lawyers' office (without the right of a legal entity) 1 119 3 ☐
- Individual work activity 3 877 4 ☐
- Paid domestic workers employed by households (activity 95)..... 5 ☐
- Auxiliary household 10 049 6 ☐ 48
- I don't know..... 7 ☐

FOJS

47. Was the enterprise (establishment) where you worked in your secondary activity registered?

- Yes..... 7 696 1 ☐

<ul style="list-style-type: none"> Is being registered..... 2 <input type="checkbox"/> No..... 3 348 3 <input type="checkbox"/> I don't know.....4 <input type="checkbox"/>
REGISS
48. What occupation did you have in your secondary activity? a. Actually fulfilled profession or function ----- b. Short description----- ----- Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
OCUPS
49. a) Give the full name of the establishment or enterprise where you worked last week in your secondary activity (enterprise: <i>limited liability corporation, joint stock company, cooperative, state enterprise, etc., association, institution, organization</i>); establishment (plant, factory, shop, section, transportation company etc.) ----- ----- b) What is the main activity of the enterprise or establishment where you worked? ----- ----- Code CAEM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
ACTS
50. How many persons work at the enterprise (establishment) where you carry out the second activity (total number, including yourself)? <ul style="list-style-type: none"> 1-4 15 708 1 <input type="checkbox"/> 5-9..... 1 223 2 <input type="checkbox"/> 10-19..... 1 023 3 <input type="checkbox"/> 20-49..... 907 4 <input type="checkbox"/> 50-99..... 741 5 <input type="checkbox"/> 100-199..... 109 6 <input type="checkbox"/> 52 200 and more..... 705 7 <input type="checkbox"/> more than 9 persons..... 171 8 <input type="checkbox"/> don't know.....507 9 <input type="checkbox"/>
NRLUCRS
51. Specify the concrete number of employees <i>Attention! To be filled in by the interviewer</i> <input type="checkbox"/>
CONCRETS
52. Besides your main and secondary activity, did you work on a subsidiary plot owned by yourself (or by another member of your household)? YES..... 817 1 <input type="checkbox"/> NO.....20 276 2 <input type="checkbox"/> 54
AGRT
53. In general, are the (raw or processed) products obtained from this plot exclusively for own consumption or also for sale? <ul style="list-style-type: none"> Only for own consumption..... 817 1 <input type="checkbox"/> For own consumption and for sale (including barter).....2 <input type="checkbox"/>
AGRVT
54. Number of hours actually worked last week:

	Main job/act.	Other job(s)/act.(s)
Monday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Tuesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Wednesday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Thursday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Friday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Saturday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Sunday	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Total	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
a) Total actual hours...(DURECP+DURECS)..... <input type="text"/> <input type="text"/>		
55. Dear interviewer, how many hours did the interviewee work in the reference period according to the answer to the question 64a? <ul style="list-style-type: none"> 0 hours 30 325 1 <input type="checkbox"/> 58 Less than 40 hours..... 305 746 2 <input type="checkbox"/> 40 hours 394 254 3 <input type="checkbox"/> 58 41 hours and more 296 511 4 <input type="checkbox"/> 57 		
SUMORE		
56. What was the main reason why you worked less than 40 hours? <ul style="list-style-type: none"> Usually works less than 40 hours.... 149 109 1 <input type="checkbox"/> Technical unemployment (lack of raw material or energy, lack of orders or clients etc.). 22 677 2 <input type="checkbox"/> Strike or labour conflict.....3 <input type="checkbox"/> Schooling or training..... 2 208 4 <input type="checkbox"/> Seasonal work..... 43 372 5 <input type="checkbox"/> 58 Days off, holidays, variable timetable.40 474 6 <input type="checkbox"/> Family responsibilities 8 837 7 <input type="checkbox"/> Bad weather conditions.....36 222 8 <input type="checkbox"/> Start or change of job.....449 9 <input type="checkbox"/> Ended a job without starting a new one.108 10 <input type="checkbox"/> Illness or injury 2 290 11 <input type="checkbox"/> Other.....12 <input type="checkbox"/> 		
MODURE		
57. What is the main reason that you worked more than 40 hours <u>last week</u>? (read): <ul style="list-style-type: none"> To have a higher income 59 773 1 <input type="checkbox"/> Usually works more than 40 hours....156 085 2 <input type="checkbox"/> Exceptionally high workload during last week..... 29 036 3 <input type="checkbox"/> Seasonal work 4 593 4 <input type="checkbox"/> Variable timetable..... 47 025 5 <input type="checkbox"/> Other_ 6 <input type="checkbox"/> 		
MOT		

58. Last week, would you have liked to work more hours than you actually worked and get the extra hours paid? YES 145 921 1 <input type="checkbox"/> NO 880 915 2 <input type="checkbox"/> 61 <div style="text-align: right; font-size: small;">DORADIT</div>
59. How many additional hours did you have available for work last week? <input type="text"/> <input type="text"/> <div style="text-align: right; font-size: small;">OREADIT</div>
60. In which way would you have liked to work more hours? <ul style="list-style-type: none"> • Increase number of hours in current job(s)/activity(ies)..... 65 171 1 <input type="checkbox"/> • Take an additional job/activity..... 52 506 2 <input type="checkbox"/> • Replace current job(s)/activity(ies) by one(s) with more hours..... 28 244 3 <input type="checkbox"/> <div style="text-align: right; font-size: small;">MODADIT</div>
ANOTHER JOB
61. Would you like to change your current employment situation, taking account of your skills? YES 222 629 1 <input type="checkbox"/> NO 804 207 2 <input type="checkbox"/> 64 <div style="text-align: right; font-size: small;">SIT</div>
62. What is your main reason for wanting to change your current employment situation? <ul style="list-style-type: none"> • To work more hours with a corresponding increase in earnings..... 57 236 1 <input type="checkbox"/> • To have a higher remuneration per hour .....126 200 2 <input type="checkbox"/> • Fear or certitude to loose the present job...2 966 3 <input type="checkbox"/> • Present job is temporary or occasional.....13 860 4 <input type="checkbox"/> • To use qualifications/skills more adequately.....8 952 5 <input type="checkbox"/> • To have more convenient working time, shorter commuting time... .....6 989 6 <input type="checkbox"/> • Inadequate working conditions .....5 966 7 <input type="checkbox"/> • To work less hours with a corresponding reduction of earnings.....460 8 <input type="checkbox"/> • Other reason _ _ _ _ _ 9 <input type="checkbox"/> <div style="text-align: right; font-size: small;">MOCAUT</div>
63. Did you look for another job/activity during the last four weeks? YES .....25 327 1 <input type="checkbox"/> NO .....197 303 2 <input type="checkbox"/> <div style="text-align: right; font-size: small;">CAUTOC</div>
63a. Did you look for additional job/activity during the last four weeks? YES .....21 860 1 <input type="checkbox"/> NO .....200 770 2 <input type="checkbox"/> <div style="text-align: right; font-size: small;">CAUTOCA</div>
Attention! Verify the STATUS of person in the main and secondary activities and choose respective question

	Main activity	Secondary activity
64. Employees (Q12=1 and/or Q36=1). How much did you receive last month, (after deduction of taxes and social security contributions, but before any others deductions)? <div style="text-align: right; font-size: small;">SALARP SALARS</div>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei
65. Self-employed (Q12<>1 and/or Q39<>1) exclusive agricultural producers for own consumption. a. How much profit did you make last month from your enterprise, farm or activity?..... <div style="text-align: right; font-size: small;">PROFP PROFS</div> b. Last month, did you withdraw any merchandise, row materials or processed products from your enterprise, farm or activity in order to use them for own consumption by your household? <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> YES c NO d </div> <div style="width: 45%; text-align: right;"> 37 417 2 249 97 203 7 335 <div style="text-align: right; font-size: small;">MARFP MARFS</div> </div> </div> c. Purchase value of merchandise or row materials used for own consumption..... Local sales value of self raw or processed products use for own consumption..... <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="text-align: right; font-size: small;">CONSP</div> </div> <div style="width: 45%; text-align: right;"> <div style="text-align: right; font-size: small;">CONSS</div> </div> </div> d. Last month, have you made or received any payments in kind? <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> YES e NO Q.86 </div> <div style="width: 45%; text-align: right;"> 430 99 134 189 9 485 <div style="text-align: right; font-size: small;">NAT NATI</div> </div> </div> e. Value of payment made in kind: Value of payment received in kind: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="text-align: right; font-size: small;">NATP</div> </div> <div style="width: 45%; text-align: right;"> <div style="text-align: right; font-size: small;">NATS</div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="text-align: right; font-size: small;">NATURP</div> </div> <div style="width: 45%; text-align: right;"> <div style="text-align: right; font-size: small;">NATURS</div> </div> </div>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <div style="text-align: right; font-size: small;">CONSUMP</div>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <div style="text-align: right; font-size: small;">CONSUMP</div>
66. Agricultural producers for own consumption (Q.5=2) What is the net value of the self-produced agricultural products, which your household used for own consumption during the last month? 1. First product 2. Second product 3. Other products..... TOTAL <div style="text-align: right; font-size: small;">CONSUMP</div>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <div style="text-align: right; font-size: small;">CONSUMP</div>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> lei <div style="text-align: right; font-size: small;">CONSUMP</div>
GO TO Q.86		
PERSON LOOKING FOR A JOB		

67. Have you been looking for work or for another job during the last 4 weeks?

YES.....131 234 1 ☐

NO.....1 491 517 2 ☐ 69

CAUTNOC

68. What was the main method used during the last 4 weeks to find work or another job?

• Registration at the employment office.8 048 1 ☐

• Measures for starting an own business1 027 2 ☐

• Registration at private employment agencies
.....2 012 3 ☐

• Placement of announcements.....12 379 4 ☐

• Answering of announcements.....9 452 5 ☐ 72

• Personal visits to employers or decision
makers responsible for recruitment...25 775 6 ☐

• Asking friends, relatives, colleagues, trade
unions for assistance.....71 954 7 ☐

• Methods, other than the above-mentioned ones
.....109 8 ☐

• No method.....478 9 ☐ 70

METOD

69. Would you like to work, if a job opportunity were offered to you?

YES.....214 152 1 ☐

NO.....1 277 365 2 ☐ 76b

DOR

70. What was the main reason for not looking for work during the last 4 weeks?

Suggest

• Had already found a job and was supposed to start
working at a later date.....4 965 1 ☐

• Was waiting for the results of a
vacancy contest or an interview (no other
option available).....4 251 2 ☐ 72

• Will be re-employed at the previous workplace
(exclusive child care leave).....13 039 3 ☐

• Has undertaken all necessary steps to start
his own business at a later date5 089 4 ☐

Is starting the compulsory military service
.....435 5 ☐

Attended schooling or upgrading courses
.....5 386 6 ☐ 75

• Family responsibilities (including
child care leave).....16 830 7 ☐

• Disease or invalidity.....16 151 8 ☐

• Does not know how and where else
to look for a job.....45 428 9 ☐

• Does no longer or not yet feel
professionally ready.....9 580 10 ☐

• Too young or too old to find a job.15 354 11 ☐

• Had looked for a job before but had not
found any.....74 392 12 ☐

• Other reasons.....3 729 13 ☐ 75

MONCAUT

71. Have you been looking for a job during the last year using different methods in order to find a job?

YES.....66 501 1 ☐

NO.....78 253 2 ☐ 75

CAUT

72. What kind of job were you looking for or have you already found?

Read

• Wage employment.....116 252 1 ☐

• Self-employment.....7 495 2 ☐

• Any job.....100 853 3 ☐ 74

LOCM

73. What kind of working timetable were you looking for?

Read

• Only full time76 180 1 ☐

• Only part time3 569 2 ☐

• Any timetable.....36 503 3 ☐

PROGC

74. Since when are you without work and looking for a job (are you waiting to be re-employed or have undertaken steps to start your own business)?

Month..... ☐ ☐ LUNC

Year..... ☐ ☐ ☐ ☐ ANC

75. Could you start working in the next 15 days if you were offered now a job?

YES.....322 474 1 ☐ 77

NO.....22 912 2 ☐ 76a

DISP

76a. What is the main reason which prevents you from starting to work in the next 15 days?

MONDISP

76b. What is the main reason why you do not want to work?

• Attends a type of education or upgrading
courses.....2 899/ 368 170 1 ☐

• Starting the compulsory military service
.....564/ 5 621 2 ☐

• Family responsibilities (including
child car.....5 892/ 126 654 3 ☐ 86

• Disease.....5 937/ 65 766 4 ☐

• Pensioner (pension: age pension, disability pension,
loss of the bread-winner)...2 099/ 545 643 5 ☐

• Voluntary inactive.....5 257/ 147 292 6 ☐

• Other reason263/ 18 220 7 ☐

MONDISPD

77. Which of the following reasons would make you refuse a job?

Read

• Change of domicile.....57 171 1 ☐

• A long distance from house.....25 907 2 ☐

• Being separate from family.....22 017 3 ☐

- Job with low qualification.....6 537 4 ☐
- Re-qualification.....412 5 ☐
- Lack of an employment contract.....15 565 6 ☐
- Low remuneration.....113 712 7 ☐
- Inadequate work environment2 977 8 ☐
- Uninteresting work.....2 105 9 ☐
- Unfavourable work conditions.....26 223 10 ☐
- Would accept a job in any conditions..49 849 11 ☐

MOREF

PERSON WHO DIDN'T WORK

78. Have you ever worked for wages or other monetary income or payment in kind?

YES.....252 064 1 ☐

NO.....70 409 2 ☐ 86

LUCRU

79. What was the main reason for which you stopped working?

• Dismissal or staff reduction.....71 595 1 ☐

• Break up of the enterprise, bankrupt... .65 027 2 ☐

• End of a temporary activity......61 281 3 ☐

• Retirement.....3 573 4 ☐

• Disease or invalidity6 463 5 ☐

• Beginning of studies or preparing for studies......778 6 ☐

• Starting the compulsory military service. ..378 7 ☐

• Family responsibilities (including child care leave).....9 982 8 ☐

• Resignation from other reasons.....32 988 9 ☐

MONLUCRU

80. Did you stop working ...?

More than 8 years ago.....82 530 1 ☐ 86

Within the last 8 years.....169 534 2 ☐

INLUCRU

81. When did you stop working?

Month..... LUNU

Year..... ANU

82. What occupation did you have at your last work place?

a. Actually fulfilled profession or function

b. Short description

Code

OCUPU

83 a. Give the full name of the establishment or enterprise where you had the last job (enterprise: limited liability corporation, joint stock company, cooperative, state enterprise, etc., association, institution, organization);

establishment (plant, factory, shop, section, transportation company, etc.)

b) What was the main activity of the enterprise or establishment where you had the last job?

Code CAEM

ACTU

84. What was your status in employment at your last workplace?

Read

• Employee.....142 186 1 ☐

• Employer1 661 2 ☐

• Own account worker23 422 3 ☐ 86

• Unpaid family worker.....2 106 4 ☐

• Member of a cooperative.....159 5 ☐

STAPU

85. What ownership form had the enterprise where you had the last job?

• Public.....30 760 1 ☐

• Private.....131 389 2 ☐

• Joint venture (public and private) without foreign share.....4 216 3 ☐

• Foreign.....449 4 ☐

• Joint venture property (with foreign share).....2 720 5 ☐

PROPU

REGISTERING AT THE NATIONAL AGENCY FOR LABOUR FORCE EMPLOYMENT

86. Have you been registered at an office of the National Agency for Labour Force Employment during the last week?

YES.....14 616 1 ☐

NO.....2 634 828 2 ☐ 89

OFMS

87. Have you received unemployment compensation?

YES.....5 860 1 ☐

NO.....8 756 2 ☐

ALOC

88. Sînteți membru al sindicatului?

DA.....410 394 1 ☐

NU.....2 234 913 2 ☐

SIND

89. Who answered the questions?

• The person selected for the survey...1 911 848 1 ☐

• Another member of the household730 361 2 ☐

• Other person.....7 236 3 ☐

RASP

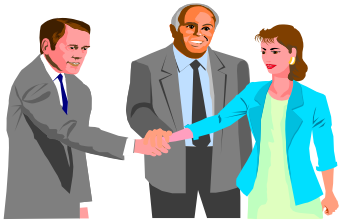
90. Date of questionnaire completion:

Day..... ZI

Month..... LUN

Year..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> AN
THANK YOU FOR YOUR SUPPORT AND

COOPERATION!



A. Particulars of the dwelling

Unique no.

A1. PSU number

A2. Dwelling unit Number

A3. Assignment number

A4. Survey Date 1 2 0 0 8

A5. Physical identification of the dwelling unit

A6. Telephone number for enumerated household (if any)

A7. Total number of persons in the household

A8. Total number of persons aged 15 years and above in the household

A9. Questionnaire no. for this household (for person no. 01-10=1, etc.)

B. Households at selected dwelling unit

B1. Household number for this household

B2. Total number of households at selected dwelling unit

C. Response details

Visit no.	Date (actual)								Result code	Next visit (planned)							
	d	d	m	m	y	y	y	y		d	d	m	m	y	y	y	y

C1.																	
C2.																	
C3.																	
C4.																	

C5. FINAL RESULT

C6. Comments and full details for result code 02-11

RESULT CODES

- | | |
|-------------------------------|--------------------------|
| 01 Completed | 07 Listing error |
| 02 Non-contact | 08 Demolished |
| 03 Refused | 09 Change of status |
| 04 Partly completed | 10 Other non response |
| 05 No usable information | 11 Ended at question 1.2 |
| 06 Vacant/unoccupied dwelling | |

Comment in C6 giving full details for result code 02-11

D. Field staff

			d	d	m	m	y	y	y	y
D1. SO	Persal number									
D2. DSC	Persal number									
D3. PQM	Persal number									
	Interview date									
	Date checked									
	Date checked									

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Person number						
04	05	06	07	08	09	10
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		Person number		
		01	02	03
1.7	What is the highest level of education that... has successfully completed? 00 = No SCHOOLING 01 = GRADE R/0 02 = GRADE 1/ SUB A 03 = GRADE 2 / SUB B 04 = GRADE 3/STANDARD 1 05 = GRADE 4/ STANDARD 2 06 = GRADE 5/ STANDARD 3 07 = GRADE 6/STANDARD 4 08 = GRADE 7/STANDARD 5 09 = GRADE 8/STANDARD 6/FORM 1 10 = GRADE 9/STANDARD 7/FORM 2 11 = GRADE 10/ STANDARD 8/ FORM 3 12 = GRADE 11/ STANDARD 9/ FORM 4 13 = GRADE 12/STANDARD 10/FORM 5/MATRIC 14 = NTC I 15 = NTC II 16 = NTC III 17 = CERTIFICATE WITH LESS THAN GRADE 12/STD 10 18 = DIPLOMA WITH LESS THAN GRADE 12/STD 10 19 = CERTIFICATE WITH GRADE 12/STD 10 20 = DIPLOMA WITH GRADE 12/STD 10 21 = BACHELORS DEGREE 22 = BACHELORS DEGREE AND DIPLOMA 23 = HONOURS DEGREE 24 = HIGHER DEGREE (MASTERS, DOCTORATE) 25 = OTHER, <i>specify in the box at the bottom</i> 26 = DON'T KNOW	<input type="text"/> 00 <input type="text"/> 01 <input type="text"/> 02 <input type="text"/> 03 <input type="text"/> 04 <input type="text"/> 05 <input type="text"/> 06 <input type="text"/> 07 <input type="text"/> 08 <input type="text"/> 09 <input type="text"/> 10 <input type="text"/> 11 <input type="text"/> 12 <input type="text"/> 13 <input type="text"/> 14 <input type="text"/> 15 <input type="text"/> 16 <input type="text"/> 17 <input type="text"/> 18 <input type="text"/> 19 <input type="text"/> 20 <input type="text"/> 21 <input type="text"/> 22 <input type="text"/> 23 <input type="text"/> 24 <input type="text"/> 25 <input type="text"/> 26	<input type="text"/> 00 <input type="text"/> 01 <input type="text"/> 02 <input type="text"/> 03 <input type="text"/> 04 <input type="text"/> 05 <input type="text"/> 06 <input type="text"/> 07 <input type="text"/> 08 <input type="text"/> 09 <input type="text"/> 10 <input type="text"/> 11 <input type="text"/> 12 <input type="text"/> 13 <input type="text"/> 14 <input type="text"/> 15 <input type="text"/> 16 <input type="text"/> 17 <input type="text"/> 18 <input type="text"/> 19 <input type="text"/> 20 <input type="text"/> 21 <input type="text"/> 22 <input type="text"/> 23 <input type="text"/> 24 <input type="text"/> 25 <input type="text"/> 26	<input type="text"/> 00 <input type="text"/> 01 <input type="text"/> 02 <input type="text"/> 03 <input type="text"/> 04 <input type="text"/> 05 <input type="text"/> 06 <input type="text"/> 07 <input type="text"/> 08 <input type="text"/> 09 <input type="text"/> 10 <input type="text"/> 11 <input type="text"/> 12 <input type="text"/> 13 <input type="text"/> 14 <input type="text"/> 15 <input type="text"/> 16 <input type="text"/> 17 <input type="text"/> 18 <input type="text"/> 19 <input type="text"/> 20 <input type="text"/> 21 <input type="text"/> 22 <input type="text"/> 23 <input type="text"/> 24 <input type="text"/> 25 <input type="text"/> 26
		<input type="text"/>	<input type="text"/>	<input type="text"/>

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Person number						
04	05	06	07	08	09	10
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Person no. Age

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INTERVIEW START TIME h m m

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SECTION 2

This section covers economic activities in the last week for persons aged 15 years and above

INDIVIDUAL 1

2.0	<p><i>Interviewer to answer</i> Is the person him/herself responding to questions?</p> <p>1 = YES → Go to Q 2.2 2 = No</p>	<input type="text"/> 1 <input type="text"/> 2
2.1	<p>Give person number for the proxy respondent</p>	<input type="text"/> <input type="text"/>
2.2	<p>Do you have a landline or cellular telephone where you can be contacted?</p> <p>1 = YES 2 = No 3 = DON'T KNOW } → Go to Q 2.4</p>	<input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 3
2.3	<p>May I please have a number where I can contact you at a later stage?</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	
2.4	<p>In the last week....</p> <p>(a) Did you work for a wage, salary, commission or any payment in kind (including paid domestic work), even if it was for only one hour?</p> <p><i>Examples: a regular job, contract, casual or piece work for pay, work in exchange for food or housing, paid domestic work.</i></p> <p>(b) Did you run or do any kind of business, big or small, for yourself or with one or more partners, even if it was for only one hour?</p> <p><i>Examples: Commercial farming, selling things, making things for sale, construction, repairing things, guarding cars, brewing beer, collecting wood or water for sale, hairdressing, crèche businesses, taxi or other transport business, having a legal or medical practice, performing in public, having a public phone shop, etc.</i></p> <p>(c) Did you help without being paid in any kind of business run by your household, even if it was for only one hour?</p> <p><i>Examples: Commercial farming, help to sell things, make things for sale or exchange, doing the accounts, cleaning up for the business, etc.</i></p> <p>If yes to any part of Q 2.4 go to Section 4, otherwise go to Q 2.5</p>	<p>YES NO</p> <p><input type="text"/> 1 <input type="text"/> 2</p> <p><input type="text"/> 1 <input type="text"/> 2</p> <p><input type="text"/> 1 <input type="text"/> 2</p>

2.5	<p>In the last week, even though you did not do any work for pay, profit or did not help without pay in a household business,.....</p> <p>(a) Did you have a paid job that you would definitely return to? → If yes, go to Q 2.7, otherwise continue</p> <p><i>Examples: a regular job, contract, casual or piece work for pay, work in exchange for food or housing, paid domestic work.</i></p> <p>(b) Did you have a business that you would definitely return to? → If yes, go to Q 2.7, otherwise continue</p> <p><i>Examples: Commercial farming, selling things, making things for sale, construction, repairing things, guarding cars, brewing beer, collecting wood or water for sale, hairdressing, crèche businesses, taxi or other transport business, having a legal or medical practice, performing in public, having a public phone shop, etc.</i></p> <p>(c) Did you have an unpaid job in any kind of business run by your household that you would definitely return to? → Go to Q 2.6</p> <p><i>Examples: Commercial farming, help to sell things, make things for sale or exchange, doing the accounts, cleaning up for the business, etc.</i></p>	<p>YES NO</p> <p><input type="text"/> 1 <input type="text"/> 2</p> <p><input type="text"/> 1 <input type="text"/> 2</p> <p><input type="text"/> 1 <input type="text"/> 2</p>
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2.6	In the last week,	YES	NO
	(a1) Did you do any work on your own or the household's plot, farm, food garden, cattle post or kraal or help in growing farm produce or in looking after animals for the household's own consumption?	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Examples: ploughing, harvesting, looking after livestock.</i>		
	(a2) If yes, for how many hours?	<input type="checkbox"/>	<input type="checkbox"/>
	(b1) Did you fetch water or collect wood/dung for household use?	<input type="checkbox"/>	<input type="checkbox"/>
	(b2) If yes, for how many hours?	<input type="checkbox"/>	<input type="checkbox"/>
	(c1) Did you produce any other goods for household use?	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Examples: clothing, furniture, clay pots, etc.</i>		
	(c2) If yes, for how many hours?	<input type="checkbox"/>	<input type="checkbox"/>
	(d1) Did you do any construction or major repair work on your own home, plot, cattle post or business or those of the household?	<input type="checkbox"/>	<input type="checkbox"/>
(d2) If yes, for how many hours?	<input type="checkbox"/>	<input type="checkbox"/>	
(e1) Did you catch any fish, prawns, shells, wild animals or other food for household consumption?	<input type="checkbox"/>	<input type="checkbox"/>	
(e2) If yes, for how many hours?	<input type="checkbox"/>	<input type="checkbox"/>	
→ Go to Section 3			

2.7	What was the main reason you were absent from your job/business in the last week?	
	01 = HEALTH REASONS	<input type="checkbox"/> 01
	02 = VACATION LEAVE	<input type="checkbox"/> 02
	03 = CARING FOR FAMILY OR OTHERS (EXCEPT MATERNITY/PATERNITY LEAVE)	<input type="checkbox"/> 03
	04 = MATERNITY OR PATERNITY LEAVE	<input type="checkbox"/> 04
	05 = OTHER FAMILY/COMMUNITY OBLIGATIONS (FUNERALS, MEETINGS)	<input type="checkbox"/> 05
	06 = STRIKE/STAY-AWAY/LOCKOUT	<input type="checkbox"/> 06
	07 = PROBLEMS WITH TRANSPORT	<input type="checkbox"/> 07
	08 = BAD WEATHER	<input type="checkbox"/> 08
	09 = STUDY OR TRAINING LEAVE	<input type="checkbox"/> 09
	10 = UNREST (VIOLENCE)	<input type="checkbox"/> 10
	11 = TEMPORARILY LAID OFF/REDUCTION IN ECONOMIC ACTIVITY	<input type="checkbox"/> 11
	12 = SEASONAL WORK → Go to Q 3.1	<input type="checkbox"/> 12
	13 = START A NEW JOB/BUSINESS AT A DEFINITE DATE IN THE FUTURE → Go to Q 3.1	<input type="checkbox"/> 13
14 = OTHER REASON, specify	<input type="checkbox"/> 14	
<div style="border: 1px solid black; height: 30px; width: 100%;"></div>		
For all reasons, except options 12 & 13, go to Section 4		

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Person no.

Age

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SECTION 3

This section covers unemployment and economic inactivity for persons aged 15 years and above

3.1	<p>In the last four weeks,.....</p> <p>a) Were you looking for any kind of job?</p> <p>1 = YES → Go to Q 3.2</p> <p>2 = No</p> <p>b) Were you trying to start any kind of business?</p> <p>1 = YES</p> <p>2 = No → Go to Q 3.3</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 2
3.2	<p>In the last four weeks what have you done to search for work or to start a business?</p> <p><i>Mark all applicable options</i></p> <p>01 = WAITED/REGISTERED AT EMPLOYMENT AGENCY/TRADE UNION</p> <p>02 = ENQUIRED AT WORKPLACES, FARMS, FACTORIES OR CALLED ON OTHER POSSIBLE EMPLOYERS</p> <p>03 = PLACED/ANSWERED ADVERTISEMENT(S)</p> <p>04 = SEARCHED THROUGH JOB ADVERTISEMENT(S) / SEARCHED THE INTERNET</p> <p>05 = SOUGHT ASSISTANCE FROM RELATIVES OR FRIENDS</p> <p>06 = LOOKED FOR LAND, BUILDING, EQUIPMENT OR APPLIED FOR PERMIT TO START OWN BUSINESS OR FARMING</p> <p>07 = WAITED AT THE STREET SIDE WHERE CASUAL WORKERS ARE FOUND</p> <p>08 = SOUGHT FINANCIAL ASSISTANCE TO LOOK FOR WORK OR START A BUSINESS</p> <p>09 = OTHER, <i>specify</i></p> <div style="border: 1px solid black; height: 30px; width: 250px; margin-top: 5px;"></div> <p>10 = NOTHING → Go back to Q 3.1</p> <p>→ Go to Q 3.6</p>	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10
3.3	<p>Was this because you had already arranged to take up a job or to start a business at some later date?</p> <p>1 = YES → Go to Q 3.6</p> <p>2 = No</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2
3.4	<p>Would you have liked to work for pay, profit or to help without pay in a household business last week?</p> <p>1 = YES → Go to Q 3.8</p> <p>2 = No</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2

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3.5	<p>What was the main reason you did not want to work last week?</p> <p>1 = SCHOLAR OR STUDENT</p> <p>2 = HOUSEWIFE/HOMEMAKER (FAMILY CONSIDERATIONS/CHILD CARE)</p> <p>3 = HEALTH REASONS</p> <p>4 = RETIRED OR TOO OLD FOR WORK</p> <p>5 = NO DESIRE TO WORK</p> <p>6 = TOO YOUNG TO WORK</p> <p>7 = OTHER, <i>specify</i></p> <div style="border: 1px solid black; height: 30px; width: 250px; margin-top: 5px;"></div> <p>→ Go to Q 3.12</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7
3.6	<p>For how long have you been without work and trying to find a job or start a business?</p> <p>01 = LESS THAN 3 MONTHS</p> <p>02 = 3 MONTHS - LESS THAN 6 MONTHS</p> <p>03 = 6 MONTHS - LESS THAN 9 MONTHS</p> <p>04 = 9 MONTHS - LESS THAN 1 YEAR</p> <p>05 = 1 YEAR - LESS THAN 3 YEARS</p> <p>06 = 3 YEARS - 5 YEARS</p> <p>07 = MORE THAN 5 YEARS</p> <p>08 = DON'T KNOW</p>	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08
3.7	<p>What was your main activity before you started looking for work?</p> <p>1 = WORKING</p> <p>2 = MANAGING A HOME</p> <p>3 = GOING TO SCHOOL</p> <p>4 = OTHER, <i>specify</i></p> <div style="border: 1px solid black; height: 30px; width: 250px; margin-top: 5px;"></div> <p>→ Go to Q 3.9</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4

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3.8	What was the main reason why you did not try to find work or start a business in the last four weeks?	
	01 = AWAITING THE SEASON FOR WORK	<input type="checkbox"/> 01
	02 = WAITING TO BE RECALLED TO FORMER JOB	<input type="checkbox"/> 02
	03 = HEALTH REASONS	<input type="checkbox"/> 03
	04 = PREGNANCY	<input type="checkbox"/> 04
	05 = DISABLED OR UNABLE TO WORK (HANDICAPPED)	<input type="checkbox"/> 05
	06 = HOUSEWIFE/HOMEMAKER (FAMILY CONSIDERATIONS/CHILD CARE)	<input type="checkbox"/> 06
	07 = UNDERGOING TRAINING TO HELP FIND WORK	<input type="checkbox"/> 07
	08 = NO JOBS AVAILABLE IN THE AREA	<input type="checkbox"/> 08
	09 = LACK OF MONEY TO PAY FOR TRANSPORT TO LOOK FOR WORK	<input type="checkbox"/> 09
	10 = UNABLE TO FIND WORK REQUIRING HIS/HER SKILLS	<input type="checkbox"/> 10
	11 = LOST HOPE OF FINDING ANY KIND OF WORK	<input type="checkbox"/> 11
	12 = NO TRANSPORT AVAILABLE	<input type="checkbox"/> 12
	13 = SCHOLAR OR STUDENT	<input type="checkbox"/> 13
	14 = RETIRED	<input type="checkbox"/> 14
	15 = TOO OLD / YOUNG TO WORK	<input type="checkbox"/> 15
	16 = OTHER REASON, SPECIFY	<input type="checkbox"/> 16
3.9	If a suitable job had been offered, would you have been able to start work last week?	
	1 = YES → Go to Q 3.12	<input type="checkbox"/> 1
	2 = No	<input type="checkbox"/> 2
	3 = DON'T KNOW	<input type="checkbox"/> 3
3.10	If circumstances had allowed, would you have started a business last week?	
	1 = YES → Go to Q 3.12	<input type="checkbox"/> 1
	2 = No	<input type="checkbox"/> 2
	3 = DON'T KNOW	<input type="checkbox"/> 3
3.11	What was the main reason why you were not available for work last week?	
	1 = SCHOLAR OR STUDENT	<input type="checkbox"/> 1
	2 = HOUSEWIFE/HOMEMAKER (FAMILY CONSIDERATION/CHILD CARE)	<input type="checkbox"/> 2
	3 = HEALTH REASONS	<input type="checkbox"/> 3
	4 = RETIRED OR TOO OLD FOR WORK	<input type="checkbox"/> 4
	5 = NO DESIRE TO WORK	<input type="checkbox"/> 5
	6 = TOO YOUNG TO WORK	<input type="checkbox"/> 6
	7 = OTHER, specify	<input type="checkbox"/> 7

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3.12	Have you ever worked for pay or profit or helped unpaid in a household business?	
	<p><i>Work could be:</i> <i>Formal work for salary, wage, profit or unpaid work in household business;</i> <i>informal work such as making things for sale, selling things or providing a service for payment; work on a farm or land for a wage or as part of the household's farming business</i></p> <p>1 = YES</p> <p>2 = No → Go to Q 3.18</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2
3.13	How long ago was it since you last worked?	
	01 = LESS THAN 3 MONTHS	<input type="checkbox"/> 01
	02 = 3 MONTHS - LESS THAN 6 MONTHS	<input type="checkbox"/> 02
	03 = 6 MONTHS - LESS THAN 9 MONTHS	<input type="checkbox"/> 03
	04 = 9 MONTHS - LESS THAN 1 YEAR	<input type="checkbox"/> 04
	05 = 1 YEAR - LESS THAN 3 YEARS	<input type="checkbox"/> 05
	06 = 3 YEARS - 5 YEARS	<input type="checkbox"/> 06
	07 = MORE THAN 5 YEARS → Go to Q 3.18	<input type="checkbox"/> 07
	08 = DON'T KNOW	<input type="checkbox"/> 08
3.14	What was the main reason you stopped working in your last job/business?	
	01 = HEALTH REASONS	<input type="checkbox"/> 01
	02 = CARING FOR OWN CHILDREN/RELATIVES	<input type="checkbox"/> 02
	03 = PREGNANCY	<input type="checkbox"/> 03
	04 = OTHER FAMILY/COMMUNITY RESPONSIBILITIES	<input type="checkbox"/> 04
	05 = GOING TO SCHOOL	<input type="checkbox"/> 05
	06 = LOST JOB/JOB ENDED/LAID OFF/ BUSINESS SOLD/CLOSED DOWN	<input type="checkbox"/> 06
	07 = CHANGED RESIDENCE	<input type="checkbox"/> 07
	08 = DISSATISFIED WITH THE JOB	<input type="checkbox"/> 08
	09 = RETIRED	<input type="checkbox"/> 09
	10 = OTHER, specify	<input type="checkbox"/> 10

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3.15.a	What kind of work did you do in your last job/business? <i>Work includes all the activities mentioned earlier.</i> <i>Record at least two words: Car sales person, Office cleaner, Vegetable farmer, Primary School teacher, etc.</i>	
3.15.b	What were your main tasks or duties in this work? <i>Examples: Selling fruit, repairing watches, keeping accounts feeding and watering cattle, teaching children.</i>	
CODE BOXES FOR OFFICE USE		
3.16.a	What was the name of your place of work? <i>For government or large organisations, give the name of the establishment and branch or division: e.g. Education Dept - Rapele Primary School; Harmony Gold Mining - Maintenance Div. Write "Own house" or "No fixed location", if relevant.</i>	
3.16.b	What were the main goods or services produced at your place of work or its main functions? <i>Examples: Repairing cars, Selling commercial real estate, Sell food wholesale to restaurants, Retail clothing shop, Manufacture electrical appliances, Bar/restaurant, Primary Education, Delivering newspapers to homes. For domestic workers write "private household"</i>	
CODE BOXES FOR OFFICE USE		

3.17	In your last job/business, were you..... 1 = Working for someone else for pay? (Including paid domestic workers, gardeners or security guards) <i>Payment in cash or in kind (e.g. food, accommodation).</i> <i>Option 1 includes all employees: Full-time, part-time, casual work and piecework.</i>	<input type="text"/> 1	
	2 = An employer (employing one or more employees)?	<input type="text"/> 2	
	3 = Own-account worker (not employing any employees)?	<input type="text"/> 3	
	4 = Helping without pay in a household business?	<input type="text"/> 4	
3.18	In the last week,..... a) Were you looking for any kind of job? 1 = YES 2 = No	<input type="text"/> 1 <input type="text"/> 2	
	b) Were you trying to start any kind of business? 1 = YES 2 = No	<input type="text"/> 1 <input type="text"/> 2	
	3.19	How do you support yourself? <i>Mark all applicable options</i>	YES NO <input type="text"/> <input type="text"/>
	a = Did you do odd jobs during the last week? → If yes, go back to Q 2.4, otherwise continue b = Are you supported by persons in the household? c = Are you supported by persons not in the household? d = Are you supported by charity, church, welfare, etc.? e = Do you receive Unemployment Insurance Fund (UIF)? f = From savings or money previously earned? g = Do you receive old age or disability pension? h = Do you receive child support/foster care grants? i = Do you receive any other welfare grants? j = Do you have other sources of support, e.g. bursary, study loan? → Go to Q5.0	<input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2	

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SECTION 4

This section covers main work activity in the last week for persons aged 15 years and above

4.1	In the last week did you have more than one job/business?	
	1 = YES	<input type="checkbox"/> 1
	2 = No	<input type="checkbox"/> 2
	3 = DON'T KNOW	<input type="checkbox"/> 3

If "yes", read out: The questions that follow refer to your main job/business. That is the one where you usually work the most hours per week, even if you were absent from it in the last week.

4.2.a	<p>What kind of work do you usually do in the main job/business that you had during the last week?</p> <p>Work includes all the activities mentioned earlier</p> <p>Record at least two words: Car sales person, Office cleaner, Vegetable farmer, Primary School teacher, etc.</p>	
4.2.b	<p>What are your main tasks or duties in this work?</p> <p>Examples: Selling fruit, repairing watches, keeping accounts feeding and watering cattle, teaching children.</p>	
CODE BOXES FOR OFFICE USE		

CODE BOXES FOR OFFICE USE

4.3.a	<p>What is the name of your place of work?</p> <p>For government or large organisations, give the name of the establishment and branch or division: e.g. Education Dept - Rapele Primary School; Harmony Gold Mining - Maintenance Div. Write "Own house" or "No fixed location", if relevant.</p>	
4.3.b	<p>What are the main goods or services produced at your place of work or its main functions?</p> <p>Examples: Repairing cars, Selling commercial real estate, Sell food wholesale to restaurants, Retail clothing shop, Manufacture electrical appliances, Bar/restaurant, Primary Education, Delivering newspapers to homes. For domestic workers write "private household"</p>	
CODE BOXES FOR OFFICE USE		
4.4.	<p>When did you start working for this employer or started running this business? Give year and month.</p> <p>State year in <u>four</u> figures, e.g. 2001</p> <p>State month in <u>two</u> figures, e.g. 08 for August</p>	

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<p>4.5</p>	<p>In the job/business, that you had during the last week were you.....</p> <p>1 = Working for someone else for pay? (Including paid domestic workers, gardeners or security guards)</p> <p><i>Payment in cash or in kind (e.g. food, accommodation).</i> <i>Option 1 includes all employees:</i> <i>Full-time, part-time, casual work and piecework.</i></p> <p>→ Go to Q 4.6</p> <p>2 = An employer (employing one or more employees)?</p> <p>→ Go to Q 4.13</p> <p>3 = Own-account worker (not employing any employees)?</p> <p>→ Go to Q 4.13</p> <p>4 = Helping without pay in a household business?</p> <p>→ Go to Q 4.13</p>	<p>1</p> <p>2</p> <p>3</p> <p>4</p>
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FOR EMPLOYEES ONLY (option 1 in Q 4.5)

4.6	<p>Does your employer contribute to any pension/retirement fund for you?</p> <p>1 = YES</p> <p>2 = No</p> <p>3 = DON'T KNOW</p>	<p><input type="checkbox"/> 1</p> <p><input type="checkbox"/> 2</p> <p><input type="checkbox"/> 3</p>
4.7	<p>Are you entitled to any paid leave?</p> <p>1 = YES</p> <p>2 = No</p> <p>3 = DON'T KNOW</p>	<p><input type="checkbox"/> 1</p> <p><input type="checkbox"/> 2</p> <p><input type="checkbox"/> 3</p>
4.8	<p>Does your employer pay UIF contributions for you?</p> <p>1 = YES</p> <p>2 = No</p> <p>3 = DON'T KNOW</p>	<p><input type="checkbox"/> 1</p> <p><input type="checkbox"/> 2</p> <p><input type="checkbox"/> 3</p>

4.9	<p>Are you entitled to medical aid benefits from your employer?</p> <p>1 = YES</p> <p>2 = No</p> <p>3 = DON'T KNOW</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
4.10	<p>Does your employer deduct income tax (PAYE / SITE) from your salary/wage?</p> <p>1 = YES</p> <p>2 = No</p> <p>3 = DON'T KNOW</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
4.11	<p>Are you employed on the basis of.....</p> <p>1 = A written contract?</p> <p>2 = A verbal agreement?</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2
4.12	<p>Is the contract/agreement of a.....</p> <p>1 = Limited duration?</p> <p>2 = Permanent nature?</p> <p>3 = Unspecified duration?</p>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3

→ **Go to Q 4.15**

FOR EMPLOYERS, OWN ACCOUNT WORKERS AND PERSONS HELPING UNPAID IN HOUSEHOLD BUSINESSES (options 2, 3 and 4 in Q 4.5)

<p>4.13</p>	<p>Is your business (or household business where you work) registered for VAT?</p> <p>1 = YES</p> <p>2 = No</p> <p>3 = DON'T KNOW</p>	<p><input type="radio"/> 1</p> <p><input type="radio"/> 2</p> <p><input type="radio"/> 3</p>
<p>4.14</p>	<p>Is the business (or household business where you work) registered for income tax?</p> <p>1 = YES</p> <p>2 = No</p> <p>3 = DON'T KNOW</p>	<p><input type="radio"/> 1</p> <p><input type="radio"/> 2</p> <p><input type="radio"/> 3</p>

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FOR ALL EMPLOYED PERSONS (employees, employers, own account workers and persons helping unpaid in household businesses)

4.15	Is your place of work..... 1 = National/Provincial/Local government? 2 = Government controlled business (e.g. Eskom,/Telkom)? 3 = A private enterprise? 4 = Non-profit organisation (NGO/CBO)? 5 = A private household? 6 = DON'T KNOW	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6
4.16	How many employees are there at your place of work? 01 = 0 02 = 1 03 = 2 - 4 04 = 5 - 9 05 = 10 - 19 06 = 20 - 49 07 = 50 OR MORE 08 = DON'T KNOW	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08
4.17	Is your place of work..... 1 = In the formal sector? 2 = In the informal sector? 3 = Private household? 4 = DON'T KNOW <i>Formal sector employment is where the business, institution or private individual is registered in some way with the government or statutory bodies to perform the activity. Registration may involve collecting taxes (e.g. PAYE), making UIF contributions or having a business licence.</i> <i>Informal sector employment is where the business or private individual is not registered with government or any statutory body in any way.</i>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4

FOR ALL EMPLOYED PERSONS
Ask for those with one job (Options 2 and 3 in Q 4.1)

4.18	How many hours do you <u>usually</u> work each week?	<input type="text"/> <input type="text"/> <input type="text"/>																		
4.19	Thinking of each day last week, how many hours did you <u>actually</u> work..... <table border="1"> <thead> <tr> <th>Day</th> <th>Hours</th> </tr> </thead> <tbody> <tr><td>On Monday?</td><td><input type="text"/></td></tr> <tr><td>On Tuesday?</td><td><input type="text"/></td></tr> <tr><td>On Wednesday?</td><td><input type="text"/></td></tr> <tr><td>On Thursday?</td><td><input type="text"/></td></tr> <tr><td>On Friday?</td><td><input type="text"/></td></tr> <tr><td>On Saturday?</td><td><input type="text"/></td></tr> <tr><td>On Sunday?</td><td><input type="text"/></td></tr> <tr> <td>Total hours actually worked</td> <td><input type="text"/></td> </tr> </tbody> </table> <p>→ Go to Q 4.22</p>	Day	Hours	On Monday?	<input type="text"/>	On Tuesday?	<input type="text"/>	On Wednesday?	<input type="text"/>	On Thursday?	<input type="text"/>	On Friday?	<input type="text"/>	On Saturday?	<input type="text"/>	On Sunday?	<input type="text"/>	Total hours actually worked	<input type="text"/>	
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On Saturday?	<input type="text"/>																			
On Sunday?	<input type="text"/>																			
Total hours actually worked	<input type="text"/>																			

Ask for those with more than one job (Option 1 in Q 4.1)

4.20	How many hours do you <u>usually</u> work each week.....	<input type="text"/> <input type="text"/> <input type="text"/>																																							
	1. In your first job/business? 2. In your second job/business? 3. In all other jobs/businesses? Total hours for all jobs/businesses	<input type="text"/> <input type="text"/> <input type="text"/>																																							
4.21	Thinking of each day last week, how many hours did you <u>actually</u> work.....																																								
	<table border="1"> <thead> <tr> <th rowspan="2">Day</th> <th colspan="3">Hours in</th> </tr> <tr> <th>First job/ business</th> <th>Second job/ business</th> <th>All other jobs/ businesses</th> </tr> </thead> <tbody> <tr><td>On Monday?</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td>On Tuesday?</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td>On Wednesday?</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td>On Thursday?</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td>On Friday?</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td>On Saturday?</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td>On Sunday?</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr> <td>Total hours</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>	Day	Hours in			First job/ business	Second job/ business	All other jobs/ businesses	On Monday?	<input type="text"/>	<input type="text"/>	<input type="text"/>	On Tuesday?	<input type="text"/>	<input type="text"/>	<input type="text"/>	On Wednesday?	<input type="text"/>	<input type="text"/>	<input type="text"/>	On Thursday?	<input type="text"/>	<input type="text"/>	<input type="text"/>	On Friday?	<input type="text"/>	<input type="text"/>	<input type="text"/>	On Saturday?	<input type="text"/>	<input type="text"/>	<input type="text"/>	On Sunday?	<input type="text"/>	<input type="text"/>	<input type="text"/>	Total hours	<input type="text"/>	<input type="text"/>	<input type="text"/>	
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Total hours	<input type="text"/>	<input type="text"/>	<input type="text"/>																																						

Person no. Age

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4.22	Last week, would you have liked to work more hours than you actually worked, provided the extra hours had been paid? 1 = YES, in the current job 2 = YES, in taking an additional job 3 = YES, in another job with more hours 4 = No 5 = DON'T KNOW	<div><div></div>1</div> <div><div></div>2</div> <div><div></div>3</div> <div><div></div>4</div> <div><div></div>5</div>
4.23	How many additional hours could you have worked last week?	<div><div></div><div></div></div>

4.24	Do you want to work more hours at your current rate of pay? 1 = YES 2 = No 3 = DON'T KNOW	<div><div></div>1</div> <div><div></div>2</div> <div><div></div>3</div>
4.25	If extra work became available, would you be able to start such work in the next four weeks? 1 = YES 2 = No 3 = DON'T KNOW	<div><div></div>1</div> <div><div></div>2</div> <div><div></div>3</div>

5.0INTERVIEW END TIME

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End of questions for individual 1

Thank the respondent for his/her co-operation

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ENCUESTA PERMANENTE DE HOGARES

ESTRICTAMENTE CONFIDENCIAL Ley 17.622

CUESTIONARIO INDIVIDUAL
POBLACIÓN DE 10 AÑOS Y MÁS

Aplicado a partir del tercer trimestre de 2003

Nº de componente ☐ ☐ Nombre

Respondente ☐ ☐

I. IDENTIFICACIÓN

Código de área	Nº en el listado	Semana	Trimes-tre	Año	Vivienda Nº	Hogar Nº

Entrevista realizada

SI ☐ 1

NO ☐ 2

1

1a. ¿En la semana pasada,_____ trabajó por lo menos una hora? (sin contar las tareas de su hogar)

Si ☐ 1

No ☐ 2

1b. En esa semana, ¿hizo alguna changa, fabricó algo para vender, ayudó a un familiar/amigo en su negocio?

Si ☐ 1

No ☐ 2

1e. ¿La semana pasada...

... no deseaba/no quería trabajar? ☐ 1

... no podía trabajar por razones personales? (cuidado del hogar, estudios, incapacidad) ☐ 2

... no tenía/no conseguía trabajo? ☐ 3

... no tuvo pedidos/clientes? ☐ 4

... tenía un trabajo/negocio al que no concurrió? ☐ 5

1f. ¿No concurrió por...

... vacaciones, licencia? (enfermedad, matrimonio, embarazo, etc.)----- ☐ 1

... causas personales? (viajes, trámites, etc.) ☐ 2

... huelga/conflicto laboral?----- ☐ 3

... suspensión?----- ☐ 4

... otras causas laborales? (rotura de equipos, falta de materias primas, mal tiempo)----- ☐ 5

1c. ¿Es un trabajo pago, en dinero o en especie?

Si ☐ 1 (a 3c)

No ☐ 2

1d. ¿Trabajó...

... con un familiar/amigo en su negocio, taller, chacra? ☐ 1

... como trabajador ad-honorem? (aprendiz, meritorio judicial, etc.) ☐ 2

...de otra forma? (especificar)..... ☐ 3 (a 2a)

1g. ¿Le mantienen el pago durante la suspensión?

Si ☐ 1 (a 3a)

No ☐ 2

Ns/Nr ☐ 9

1h. ¿Volverá a ese trabajo a lo sumo en un mes?

Si ☐ 1 (a 3a)

No ☐ 2

Ns/Nr ☐ 9

2a. Si la semana pasada conseguía un trabajo, ¿podía empezar a trabajar ya?
(o a más tardar en dos semanas) *(no lea, escuche la respuesta y **marque la** que corresponda)*

- Sí podía

☐ 1

- No podía por razones personales momentáneas

☐ 3

- Sí, pero con ciertas condiciones laborales
(horarios, tipo de trabajo, distancia, etc.)

☐ 2

- No, porque no desea trabajar

☐ 4

(a 2h)

2b. ¿Durante los últimos 30 días, estuvo buscando trabajo de alguna manera?

Si ☐ 1

No ☐ 2

2d. ¿Durante esos 30 días, consultó amigos / parientes, puso carteles, hizo algo para ponerse por su cuenta?

Si ☐ 1 (a 10a)

No ☐ 2

2c. ¿De qué manera estuvo buscando trabajo?
*(no lea, escuche las respuestas y **marque todas** las que correspondan)*

1- Hizo contactos, entrevistas----- ☐

2- Mandó currículum/ puso/contestó avisos
(diarios, internet)----- ☐

3- Se presentó en establecimientos----- ☐

4- Hizo algo para ponerse por su cuenta----- ☐

5- Puso carteles en negocios, preguntó en el barrio----- ☐

6- Consultó a parientes/amigos----- ☐

7- Se anotó en bolsas, listas, planes de empleo, agencias, contratistas, o alguien le está buscando----- ☐

8- De otra forma activa (especificar) ☐

(a 10a)

2e. ¿Durante esos 30 días, no buscó trabajo porque...

... está suspendido? ☐ 1

... ya tiene trabajo asegurado? ☐ 2

... se cansó de buscar trabajo? ☐ 3

... hay poco trabajo en esta época del año? ☐ 4

... por otras razones? (especificar) ☐ 5

(a 10a)

2f. ¿Durante los últimos 30 días, estuvo buscando trabajo de alguna manera?

Si ☐ 1

No ☐ 2

2h. En los últimos 12 meses ¿buscó trabajo en algún momento?

Si ☐ 1

No ☐ 2

2g. ¿Puede..... empezar a trabajar ya?
(o a más tardar en dos semanas)

Si ☐ 1 (a 10a)

No ☐ 2

2i. En los últimos 12 meses ¿trabajó en algún momento?

Si ☐ 1 (a 12a)

No ☐ 2 FIN (Ver 13 a)

OBSERVACIONES.....

.....

.....

.....

.....

OCUPADOS QUE NO TRABAJARON EN LA SEMANA

3a. ¿Cuántos empleos/ocupaciones tiene?

(En el caso de tener más de un empleo, verifique que no haya trabajado **en ninguno** durante la semana pasada)

3b. ¿Cuántas horas semanales trabaja habitualmente en todos sus empleos / ocupaciones...

- ... menos de 35 horas semanales?

☐ 1
- ... entre 35 y 45 horas?

☐ 2
- ... más de 45 horas semanales?

☐ 3
- ... a veces más y a veces menos?

☐ 4
- Ns / Nr

☐ 9

(a 3g)

OCUPADOS QUE TRABAJARON EN LA SEMANA

3c. La semana pasada, ¿tenía...

- ... un solo empleo/ocupación/actividad?

☐ 1
- ... más de un empleo/ocupación/actividad?

☐ 2

3d. ¿Cuántos?

3e. En su ocupación ...

(la que habitualmente le lleva más horas)

La semana pasada, ¿trabajó el ...
(marque con cruz)

¿Cuántas horas trabajó el ...

- domingo?
- lunes?
- martes?
- miércoles?
- jueves?
- viernes?
- sábado?

Total de horas

3f. En sus otras ocupaciones ...

La semana pasada, ¿trabajó el ...
(marque con cruz)

¿Cuántas horas trabajó el ...

- domingo?
- lunes?
- martes?
- miércoles?
- jueves?
- viernes?
- sábado?

Total de horas

3g. La semana pasada, ¿quería trabajar más horas?

- Si ☐ 1
- No ☐ 2

(a 3i)

3h. ¿Si hubiera conseguido más horas...

- ... podía trabajarlas esa semana?

☐ 1
- ... podía empezar a trabajarlas en dos semanas a más tardar?

☐ 2
- ... no podía trabajar más horas?

☐ 3
- Ns / Nr

☐ 9

(a 3i)

PARA TODOS LOS OCUPADOS

3i. En los últimos 30 días, ¿buscó trabajar más horas?

- Si ☐ 1
- No ☐ 2
- Ns/Nr ☐ 9

3j. Aparte de este/os trabajo/s ¿estuvo buscando algún empleo/ocupación/actividad?

- Si ☐ 1
- No ☐ 2
- Ns/Nr ☐ 9

(a 4a)

3k. ¿Estuvo buscando porque...

- ... quería cambiar de trabajo?

☐ 1
- ... quería agregar al que tiene?

☐ 2
- ... se termina el trabajo que tiene?

☐ 3
- ... estaba sin trabajo?

☐ 4

(a 4a)

OCUPACIÓN DE MÁS HORAS

4a. ¿El negocio/empresa/institución/actividad en la que trabaja es ...
(se refiere al que trabaja más horas semanales)

- ... estatal?

☐ 1
- ... privada?

☐ 2
- ... de otro tipo? (especificar)

☐ 3

4b. ¿A qué se dedica o qué produce ese negocio/empresa/institución?

.....

4b1. Si presta servicios domésticos en hogares particulares,

marque ☐ 1 casa de familia

4b2. ¿En cuántas casas trabaja?

4b3. ¿Cuánto tiempo hace que trabaja allí?

(en la casa que tiene más horas)

años meses días

4b4. ¿Cómo se llama su ocupación?.....

.....

(a7f)

4c. ¿Cuántas personas, incluido _____ trabajan allí en total? (sólo si no sabe, lea las opciones y después marque la que corresponda)

- 1 persona

☐ 1
- 2 personas

☐ 2
- 3 personas

☐ 3
- 4 personas

☐ 4
- 5 personas

☐ 5
- 6 a 10 personas

☐ 6
- 11 a 25 personas

☐ 7
- 26 a 40 personas

☐ 8
- 41 a 100 personas

☐ 9
- 101 a 200 personas

☐ 10
- 201 a 500 personas

☐ 11
- más de 500 personas

☐ 12
- Ns/Nr

☐ 99

- hasta 5

☐ 1
- De 6 a 40

☐ 2
- Más de 40

☐ 3
- Ns / Nr

☐ 9

4d. ¿Cómo se llama la ocupación que hace?.....

.....

4e. ¿Qué tareas realiza _____ en ese trabajo?.....

.....

4f. ¿Qué herramientas, maquinarias / equipos utiliza?.....

.....

4g. ¿Dónde realiza principalmente sus tareas? (no lea, escuche la respuesta y marque la que corresponda)

- En un local/oficina/establecimiento/negocio/taller/chacra/finca -----

☐ 1
- En un puesto o kiosco fijo callejero -----

☐ 2
- En vehículos: bicicleta, moto, autos, barcos, botes (no incluye servicio de transporte) -----

☐ 3
- En vehículos para transporte de personas y mercaderías -aéreo, marítimo, terrestre- (incluye taxis, colectivos, camiones, furgones, transporte de combustible, mudanzas, etc.)-----

☐ 4
- En obras en construcción, de infraestructura, minería o similares -----

☐ 5
- En esta vivienda (sin lugar exclusivo) -----

☐ 6
- En la vivienda del socio o del patrón -----

☐ 7
- En el domicilio/local de los clientes -----

☐ 8
- En la calle, espacios públicos, ambulante, de casa en casa, puesto móvil callejero -----

☐ 9
- En otros lugares (especificar)

☐ 10

5a. ¿Ese trabajo, lo hace ...

- ... para su propio negocio/empresa/actividad? ☐ 1 (a 5c)
- ... para el negocio/empresa/actividad de un familiar? ☐ 2
- ... o como obrero o empleado para un patrón/empresa/institución? (incluye agencia de empleo) ☐ 3 (a 7a)

5c. ¿En ese negocio/empresa/actividad, tiene ...

	Propio (del negocio)	Prestado/ Alquilado	No tiene
1... maquinarias/equipos?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
2... local? (incluye kiosco, puesto fijo)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
3... vehículo?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

5b. ¿Por ese trabajo le pagan sueldo (en dinero o en especie)?

- Si ☐ 1 (a 7a)
- No ☐ 2

5b1. ¿Por ese trabajo...

- ...retira dinero? ☐ 1 (a 5c)
- ...retira sólo mercaderías? ☐ 2
- ...no retira nada? ☐ 3

5b2. ¿Cuánto tiempo hace que trabaja en ese empleo en forma continua?

años

meses

días

(a bloque 9: mov. interurbanos)

5d. ¿En ese negocio/empresa/actividad, se emplean personas asalariadas?

- Sí, siempre ☐ 1 (a 5f)
- Sólo a veces o por temporada ☐ 2
- No emplea / no contrata personal ☐ 3

5e. ¿Para la actividad del negocio, en los últimos 3 meses, tuvo que gastar en la compra de materias primas/mercaderías/productos, pagar servicios u otros gastos?

- Si ☐ 1
- No ☐ 2

5f. ¿Ese negocio/empresa/actividad, trabaja habitualmente para ...

- ... un solo cliente? (persona, empresa) ☐ 6
- ... distintos clientes? (incluye público en general) ☐ 7

5g. ¿Ese cliente es...

- ... una empresa/negocio/institución? ☐ 1
- ... una familia/ hogar? ☐ 2

5h. ¿Durante cuánto tiempo ha estado trabajando en ese empleo en forma continua? (con interrupciones laborales no mayores de 15 días) (no lea, escuche y marque la que corresponda)

- Menos de 1 mes ☐ 1
- De 1 a 3 meses ☐ 2
- Más de 3 a 6 meses ☐ 3
- Más de 6 meses a 1 año ☐ 4
- Más de 1 a 5 años ☐ 5
- Más de 5 años ☐ 6
- Ns/Nr ☐ 9

(a 6a)

6a. En ese negocio/empresa/actividad ¿tiene socios o familiares asociados?

Si ☐ 1

No ☐ 2

6b. ¿Cuántos socios, (familiares o no), son en total (incluyendo a.....)?
(nombre)

6c. Por el mes de.....¿cuánto ganó en su negocio/empresa/actividad ?
(descontando los gastos)

\$

No tuvo ingresos ☐ (-8) (a 6i)

No tenía esa ocupación ☐ (-7) (a bloque 9)

6d. Por el mes de¿ cuánto ganó.....en
(nombre)
su negocio/ empresa/ actividad considerando sólo la

parte que le corresponde a el/ella ?
(descontando los gastos)

\$

No tuvo ingresos ☐ (-8) (a 6e)

No tenía esa ocupación ☐ (-7) (a bloque 9)

6e. Ese negocio/empresa/actividad

...es una sociedad jurídicamente constituida?
(SA, SRL, Comandita por acciones, etc.)

☐ 1

... es una sociedad de otra forma legal?

☐ 2

... o es una sociedad convenida de palabra?

☐ 3

6f. ¿Tiene sueldo asignado?

Si ☐ 1

No ☐ 2 (a 6i)

6g. ¿Cuánto cobró por el mes de
como sueldo?

No cobró nada ☐ (-8)

\$

6h. ¿Es una actividad familiar?

Si ☐

No ☐

(especificar)

6i. De lo que produce o vende en su negocio/empresa/actividad,
¿retiró algo para consumo propio o de su hogar?

Si ☐ 1

No ☐ 2

6j. Por el mes de,

¿Recibió productos o mercaderías como pago
por parte de un cliente? (incluye créditos de trueque)

Si ☐ 1

No ☐ 2

6k. Lo ganado corresponde a su trabajo de ...

... todo el mes trabajando todos los días de la semana
(por lo menos 5 días a la semana?)

☐ 1

... todo el mes trabajando algunos días a la semana

☐ 2

... menos de todo el mes

☐ 3

¿Cuántos días
por semana?

¿Cuántos días
en el mes?

6l. ¿A cuántas horas
por día corres-
ponde?

(en un día promedio)

(a bloque 9)

7a. ¿Cuánto tiempo hace que está trabajando en ese empleo en forma continua? (sin interrupciones de la relación laboral en la misma empresa/negocio/institución) *(no lea, escuche y **marque la** que correspon-da)*

- Menos de 1 mes

- 1 a 3 meses

- Más de 3 a 6 meses

- Más de 6 a 12 meses
- ☐ 1

☐ 2

☐ 3

☐ 4
- Más de 1 a 5 años

- Más de 5 años

- Ns/Nr
- ☐ 5

☐ 6

☐ 9

7b. ¿Cómo consiguió ese trabajo? *(no lea, escuche y **marque todas las** que correspon-da)*

- 1- Por carteles del barrio/ lugares donde se toma gente ----- ☐
- 2- Por un contratista ----- ☐
- 3- Por concurso/inscripción----- ☐
- 4- Por parientes/amigos/contactos personales/ recomendaciones ----- ☐
- 5- Por avisos (diarios/radio/internet) ----- ☐
- 6- Por agencia de empleo/bolsa de trabajo----- ☐
- 7- Presentándose a la empresa/ negocio/institu- ción/ lugar de trabajo----- ☐
- 8- De otra forma (especificar) ☐
- ☐
- 9- Ns/Nr----- ☐

7c. ¿Ese empleo tiene tiempo de finalización?

- **Sí** *(incluye changa, trabajo transitorio, por tarea u obra, suplencia, etc.)* ☐ 1 **(a 7d)**
- **No** *(incluye permanente, fijo, estable, de planta)* ☐ 2 **(a 7f)**
- N/S N/R ☐ 9 **(a 7d)**

7d. ¿Por cuánto tiempo es ese trabajo? *(no lea, es- cuche y **marque la** que correspon-da)*

- Sólo fue esa vez/sólo cuando lo llaman ☐ 1
- Hasta 3 meses ☐ 2
- Más de 3 a 6 meses ☐ 3
- Más de 6 a 12 meses ☐ 4
- Más de 1 año ☐ 5
- Ns/Nr ☐ 9

7e. ¿Ese trabajo es...

- ... un plan de empleo? ☐ 1
- ... un período de prueba? ☐ 2
- ... una beca/pasantía/aprendizaje? ☐ 3
- (No leer) Ninguno de éstos ☐ 4

7f. ¿En ese trabajo le dan...

- SI

NO
- 1... de comer gratis en el lugar de trabajo? ☐ 1 ☐ 2
- 2... vivienda? ☐ 1 ☐ 2
- 3... algún producto o mercadería? ☐ 1 ☐ 2
- 4... algún otro beneficio? *(automóvil, teléfono celular, pasajes, etc.)* ☐ 1 ☐ 2
- 5... No recibe ninguno ☐ 1

7f1. ¿Para realizar su trabajo tiene que utilizar...

- SI

NO
- 1... sus propias maquinarias/equipos? ☐ 1 ☐ 2
- 2... local propio? ☐ 1 ☐ 2
- 3... vehículo propio? ☐ 1 ☐ 2

7g. ¿En ese trabajo tiene...

- SI

NO
- 1... vacaciones pagas? ☐ 1 ☐ 2
- 2... aguinaldo? ☐ 1 ☐ 2
- 3... días pagos por enfermedad? ☐ 1 ☐ 2
- 4... obra social? ☐ 1 ☐ 2
- No tiene ninguno ☐ 5

7h. ¿Por ese trabajo tiene descuento jubilatorio?

- Si ☐ 1 **(a 7j)**
- No ☐ 2

7i. ¿Aporta por sí mismo a algún sistema jubilatorio?

- Si ☐ 1
- No ☐ 2

7j. ¿El turno habitual de trabajo es ...

- ... de día? *(mañana/tarde)* ☐ 1
- ... de noche? ☐ 2
- ... de otro tipo? *(rotativo, día y noche, guardias con franco)* ☐ 3

7k. ¿Cuando cobra...

- ... le dan recibo con sello/ membrete /firma del empleador ? ☐ 1
- ... le dan un papel/recibo sin nada? ☐ 2
- ... entrega una factura? ☐ 3 **(a 8a)**
- ... no le dan ni entrega nada? ☐ 4
- No cobra, es trabajador sin pago/ad-honorem ☐ 5 **(a bloque 9)**

8a. Por el mes de en ese trabajo ¿cobró...

1... Sueldos/ jornales?
(incluye programa de empleo)

2... Salario familiar?

3... Horas extras?

4... Otras bonificaciones habituales?

5... Tickets, vales o similares?

No cobró ninguna de estas retribuciones, marque aquí.

6

8b. No cobró ninguno de los anteriores porque...

... lo está por cobrar

... o no sabe cuándo los va a cobrar

... o recién empezó este trabajo

... o porque no los tiene

8d. ¿Cuánto cobró por ese mes por todos esos conceptos?
(sin retroactivos)

TOTAL

pesos

bonos

Tickets

8c. ¿Cuánto arregló que le paguen por mes?

8e. Por el mes de ¿cobró.....

1... Comisión por venta/producción?

2... Propinas?

5... Ninguno de estos

8f. ¿Cuánto cobró por ese mes de
(indague sólo los ítems marcados)

1... Comisión por venta/producción?

2... Propinas

8g. Ese cobro (o arreglo) corresponde a su trabajo de...

... todo el mes trabajando todos los días de la semana
(por lo menos 5 días a la semana)

... todo el mes trabajando algunos días a la semana

... menos de todo el mes

¿Cuántos días por semana?

¿Cuántos días en el mes?

8h. ¿A cuántas horas por día corresponde?
(en un día promedio)

8i. (Además de lo anterior) Por ese trabajo el mes de ¿cobró

1... Aguinaldo?

2... Otras bonificaciones no habituales?

3... Retroactivos? *(incluye sueldos adeudados)*

5... Ninguno de estos

8j. ¿Cuánto cobró por ese mes de
(indague sólo los ítems marcados)

1... Aguinaldo?

2... Otras bonificaciones no habituales?

3... Retroactivos?

8k. Su patrón o empleador (el que le paga) es...

... un contratista?.....

... una agencia de empleo?.....

... un establecimiento/ patrón para el que trabaja?
(que no es contratista)

... otras personas? *(especificar)*.....

- Plan de Empleo

- Ns/Nr

(a 9a)

Form. 001/03

INDIVIDUAL

9

MOVIMIENTOS INTERURBANOS (sólo para OCUPADOS)

SÓLO PARA OCUPADOS DE:
- CIUDAD DE BUENOS AIRES
- CONURBANO BONAERENSE

9a. En su ocupación (o en la de más horas),
¿trabaja en

- ... Ciudad de Buenos Aires? ☐ 1

... Partidos del Conurbano? ☐ 2

... Ambos? ☐ 3

... Otro lugar? (especificar) ☐ 4
- (a 12 a)

SÓLO PARA OCUPADOS DE: POSADAS, FORMOSA
CORRIENTES, RESISTENCIA, SANTA FE, PARANÁ Y
NEUQUÉN

RESTO:
PASA A
12 a.

9b. En su ocupación (o en la de más horas), trabaja..... en esta
ciudad?

Si ☐ 1 (a 12 a) No ☐ 2

9c. ¿Dónde trabaja?

- ...En otro lugar de esta provincia (especificar) ☐ 1
- ...En otra provincia (especificar) ☐ 2 (a 12 a)
- (provincia) (localidad)
- ...En otro país (especificar) ☐ 3

10

DESOCUPADOS

10a. ¿Cuánto hace que está buscan-
do trabajo...

- ... menos de 1 mes? ☐ 1
- ... de 1 a 3 meses? ☐ 2
- ... más de 3 a 6 meses? ☐ 3
- ... más de 6 a 12 meses? ☐ 4
- ... más de 1 año? ☐ 5

10b. ¿Por qué razones no encuentra? (lea cada una de las
opciones)

- | | SI | NO |
|---|----------------------------|----------------------------|
| 1- Recién empezó a buscar | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 2- Por la edad | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 3- Falta de trabajo en su especialidad | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 4- No tiene experiencia/capacitación | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 5- Le faltan vinculaciones para conseguir trabajo | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 6- No hay trabajo..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 7- No le alcanza la plata para salir a buscar | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 8- Suspendido..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 9- Otras razones..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 10- Desconoce por qué no encuentra trabajo (sólo
autoinformante) | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |

10c. ¿Durante ese tiempo hizo algún trabajo/
changa?

Si ☐ 1

No ☐ 2

10d. ¿Ha trabajado alguna vez?

Si ☐ 1

No ☐ 2 FIN (Ver 13a)

10e. ¿Cuánto tiempo hace que terminó su último
trabajo/changa...

- ... menos de 1 mes? ☐ 1

... de 1 a 3 meses? ☐ 2

... más de 3 a 6 meses? ☐ 3 (a 11a)

... más de 6 a 12 meses? ☐ 4

... más de 1 a 3 años? ☐ 5

... más de 3 años? ☐ 6 FIN (Ver 13a)

ÚLTIMA OCUPACIÓN/CHANGA

11a. ¿El negocio/empresa/institución/actividad en la que trabajaba era ...

... estatal? ☐ 1

... privada? ☐ 2

... de otro tipo? ☐ 3

11b. ¿A qué se dedicaba o qué producía ese negocio/empresa/institución?

.....

.....

11b1. Si prestaba servicios domésticos en hogares particulares, marque ☐ 1 casa de familia

11b2. ¿Cuánto tiempo trabajó allí? años meses días

11b3. ¿Cómo se llamaba su ocupación?.....

.....

(a11 n)

11c. ¿Cuántas personas, incluido _____ trabajaban allí en total? (sólo si no sabe, lea las opciones y después marque la que corresponda)

1 persona <input type="checkbox"/> 1	6 a 10 personas <input type="checkbox"/> 6	201 a 500 personas <input type="checkbox"/> 11
2 personas <input type="checkbox"/> 2	11 a 25 personas <input type="checkbox"/> 7	más de 500 personas <input type="checkbox"/> 12
3 personas <input type="checkbox"/> 3	26 a 40 personas <input type="checkbox"/> 8	Ns/Nr <input type="checkbox"/> 99
4 personas <input type="checkbox"/> 4	41 a 100 personas <input type="checkbox"/> 9	
5 personas <input type="checkbox"/> 5	101 a 200 personas <input type="checkbox"/> 10	

hasta 5 ☐ 1

De 6 a 40 ☐ 2

Más de 40 ☐ 3

Ns / Nr ☐ 9

11d. ¿Cómo se llamaba la ocupación que tenía?.....

.....

11e. ¿Qué tareas realizaba _____ en ese trabajo?.....

.....

11f. ¿Qué herramientas, maquinarias / equipos utilizaba?.....

.....

11g. ¿Cuánto tiempo seguido estuvo trabajando en ese lugar?

_____ años _____ meses _____ días

11h. ¿Ese trabajo, lo hacía ...

... para su propio negocio/empresa/actividad? ☐ 1 (a 11 k)

... para el negocio/empresa/actividad de un familiar? ☐ 2 (a 11 i)

... o como obrero o empleado para un patrón/empresa/institución? ☐ 3 (a 11 L1)

11i. ¿Por ese trabajo le pagaban sueldo (en dinero o en especie)?

Sí ☐ 1 (a 11 L1) No ☐ 2

11j. ¿Por ese trabajo retiraba dinero?

Sí ☐ 1 No ☐ 2 (a 12 a)

11k. ¿En ese negocio/empresa/actividad, se empleaban personas asalariadas?

- Sí, siempre ☐ 1

- Sólo a veces o por temporada ☐ 2

- No empleaba / no contrataba personal ☐ 3

➡ (a 11 K1)

11k1. ¿En ese trabajo tenía local, maquinarias/equipos/vehículos?

Si ☐ 1 No ☐ 2

11k2. ¿Ese negocio/empresa/actividad, trabaja habitualmente para ...

... un solo cliente? (persona, empresa) ☐ 6 (a 11k3)

... distintos clientes? (incluye público en general) ☐ 7

11k3. ¿Ese cliente era ...

... una empresa/negocio/institución? ☐ 1

... una familia/hogar? ☐ 2

11L. ¿Cuál fue la razón principal por la que dejó esa actividad? (no lea, escuche y marque sólo una)

- Falta de clientes/clientes que no pagan ----- ☐ 1

- Falta de capital/equipamiento ----- ☐ 2

- Trabajo estacional ----- ☐ 3

- Tenía gastos demasiados altos ----- ☐ 4

- Otras causas laborales (especificar) ☐ 5

..... ☐ 5

- Jubilación/retiro ----- ☐ 6

- Causas personales (matrimonio, embarazo, cuidado de hijos o familiar, estudio, enfermedad)... ☐ 7

(a 12 a)

11L1. ¿Ese trabajo era ...

... Una changa, trabajo transitorio, por tarea u obra, suplencia, etc.? ☐ 1 (a 11m)

... Un trabajo permanente, fijo, estable, de planta, etc.? ☐ 2 (a 11m1)

- Ns/Nr ☐ 3 (a 11m)

11m. ¿Ese trabajo era ...

... un plan de empleo? ☐ 1

... un período de prueba/ aprendizaje/ pasantía o beca? ☐ 2

... otro tipo de trabajo? ☐ 3

11m1. ¿En ese trabajo, usaba maquinaria/ equipos, local, vehículos propios?

Si ☐ 1 No ☐ 2

11n. ¿En ese trabajo le hacían descuento jubilatorio?

Si ☐ 1 No ☐ 2 Ns/Nr ☐ 9

11o. ¿Cuál fue la razón principal por la que dejó ese trabajo? (no lea, escuche y **marque sólo una**)

- Despido/cierre (quiebra/venta/traslado de la empresa reestructuración o recorte de personal/falta de ventas o clientes) ----- ☐ 1

- Por retiro voluntario del sector público ----- ☐ 2

- Por jubilación ----- ☐ 3

- Fin de trabajo temporario / estacional ----- ☐ 4

- Le pagaban poco / no le pagaban ----- ☐ 5

- Malas relaciones laborales / malas condiciones de trabajo (insalubre, cambios de horarios, etc.) ----- ☐ 6

- Renuncia Obligada/pactada ----- ☐ 7

- Otras causas laborales (especificar)..... ☐ 8

..... ☐ 8

- Por razones personales (matrimonio, embarazo, cuidado de hijos o la familia, estudio, enfermedad) (especificar)..... ☐ 9

(a 12 a)

11p. ¿Cerró la empresa?

Si ☐ 1 (a 11r)

No ☐ 2

Ns/Nr ☐ 9

11q. ¿Fue la única persona que quedó sin trabajo?

Si ☐ 1

No ☐ 2

Ns/Nr ☐ 9

11r. ¿Le enviaron telegrama?

Si ☐ 1

No ☐ 2

11s. ¿Le pagaron indemnización?

Si ☐ 1

No ☐ 2

11t. ¿Está cobrando seguro de desempleo?

Si ☐ 1

No ☐ 2

Ns/Nr ☐ 9

(a 12a)

Form. 001/03

INDIVIDUAL

INGRESOS DE OTRAS OCUPACIONES

... cobró ingresos por algún trabajo/changa, o por otra/s ocupación/es?
(incluye ocupación secundaria y otras ocupaciones previas a la semana de referencia)

☐ 2 **FIN (Ver 13a)**

Trabajando para su propio negocio/ actividad

\$

\$

\$

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ENCUESTADOR: Recuerde que al finalizar el último cuestionario individual del hogar deberá completar los Bloques V, VI, VII y VIII del CUESTIONARIO DE HOGAR.

Encuestador.....Nº

Form. 001/03

SECTION II- PERSONEL CHARACTERISTICS OF HOUSEHOLD MEMBERS (Continued)

	To be asked all hh members.						To be asked for persons 6 year old and over.							To be asked for persons 15 year old and over.							
Serial number of hh member	What is your situation in the family as to the household head? 1. Household head 2. Spouse 3. His/Her Children 4. Bride or Bridegroom 5. Grandchild 6. Mother/father in law 7. Other relatives 8. Non-relatives	Where do you usually stay in? 1.At that home 2.Student, in hostel or foreign country 3.Student, in different house 4.in the army or barracks 5.In prison or jail 6.In rest home 7.At least one year in hospital 8.In a different place in Turkey or Foreign country 9.Generally, not live in that home, live in a different home or place	(This question will not be asked to the respondent, to be filled by the interviewer taking into account the serial number of hh members in Section II, Question 1 within the assistance of respondent if needed.)				Are you literate? 1. Yes 2. No S 17	<div>What is the latest educational institution you graduated from?</div> <div>1. None → S 17</div> <div>2. Primary school } S 16</div> <div>3. Primary education }</div> <div>4. Junior high school or vocational junior high school }</div> <div>5. High school }</div> <div>6. High school or vocational high school }</div> <div>7. 2 or 3 years faculty }</div> <div>8. 4 years faculty or university }</div> <div>9. 5 or 6 years faculty }</div> <div>10. Master }</div> <div>11. Doctorate }</div>	What is the field of highest level of education successfully completed?	When did you graduate from this school?	Are you attending any educational institution? 1. Yes 2. No ↓ If Age >=15, Go to Q19. If Age<15, Finished.	Which institution are you attending? 1. Primary education 2. High school 3. Vocational high school 4. Open education 5. Faculty/university 6. Master/Doctorate	Which class are you in this institution?	What is your marital status? 1. Single, that is never married 2. Married 3. Live together 4. Married, but separated from spouse 5. Widowed 6. Divorced	(To be asked for persons between 15-24 year old and over.)	Did you attend any courses, seminars, conferences or receive private lessons or instructions outside the regular education system within LAST 4 WEEKS? 1. Yes 2. No → 25	Who financed this training? 1. Own 2. Employer 3. State 4. Private person or institution 5. His/her family 6. Other (Explain)	What was the purpose of this training? 1. Mostly job-related 2. Mostly personal or social 3. Other (Explain)	Number of hours spend on this training within LAST 4 WEEKS?		
			The serial number of;	Spouse (if there is in the hh)	Mother (if there is in the hh)	Father (if there is in the hh)															
1	11	12	12A	12B	12C	13	14	15	16		18A	18B	19	20	21	22	23	24			
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REFERENCE WEEK: is the first week of each month starting with Monday.

<p>25. Serial number of person answering</p> <p>26. Did you work to earn income in cash or in kind <u>in</u> the reference week? (As regular or casual employee, self employed, employer or unpaid family worker)</p> <p>1. Yes → Q 33 2. No</p> <p>27. Did you work as paid or unpaid worker (even if you are a housewife, student or retired person) even for one hour <u>in the reference week?</u></p> <p>1. Yes → Q 33 2. No</p> <p>28. Did you have a job or business from which you were temporarily absent <u>in the reference week?</u></p> <p>1. Yes 2. No → Q 86</p> <p>29. Why were you absent from work in the reference week?</p> <p>1. Own illness, injury or temporary disability 2. Maternity leave 3. Holidays 4. Bad weather 5. Labour dispute (strike,locout) 6. Nature of work 7. Education or training 8. Slack work for technical and economic reasons 9. There was no work geçici iş yavaşlatılması veya durdurulması 10. Other (Please explain)</p> <p>30. What is your employment status at this job?</p> <p>1. Regular employee 2. Own job → Q 33 3. Casual employee } Q 86 4. Unpaid family worker }</p> <p>31. What is the duration of total absence from work?</p> <p>1. One month 2. Within two and three months } Q 33 3. More than three months }</p> <p>32. Did you continue to take your wage or salary from your employer in that duration?</p> <p>1. Yes, whole 2. Yes, 50% and more 3. Yes, less than 50% } Q 86 4. No }</p> <p>33. a) What is the name and phone number (if any) of the place (firm or organisation) where you work? (if not worked at a specific place, specify clearly the name of the place worked even in the case of working at home or on the street. If you worked at more than one job, specify the name and the address of the place where you</p> <p>b) Indicate the province of your workplace</p> <p>c) What is the main activity of this workplace? (firm/organisation)? (NACE Rev 1)</p> <p>d) Give one or two examples of the product or service produced by your workplace?</p>	<p>34. What is the legal status of your workplace?</p> <p>1. State → Q 37 2. Private</p> <p>35. What is the legal status of your workplace?</p> <p>1. Field 2. Regular establishment (Fixed place) 3. Market place 4. Mobile or Irregular place (construction workers, taxi divers etc.) 5. At home</p> <p>36. What is the legal status of your establishment for which you work?</p> <p>1. Individual ownership 2. Ordinary partnership 3. Private company (Limited, Collective, Limited Partnership, Joint Stock) 4. Association, cooperative etc. 5. International organisation/Embassy etc. 6. Other (Please explain)</p> <p>37. a) How many persons are employed in this workplace (firm/organisation)?</p> <p>1. Less than 10 2. 10-24 3. 25-49 4. More than 50 } Q 38</p> <p>b) Please indicate the number of persons employed</p> <p>38. a) What is the full title of your job in this workplace?</p> <p>b) What is your main tasks and duties in this workplace? (ISCO-88)</p> <p>39. What is your employment status in this workplace (firm/organisation)?</p> <p>1. Regular employee 2. Casual employee } Q 41 3. Employer 4. Self employed 5. Unpaid family worker → Q 43</p> <p>40. What is your taxation method?</p> <p>1. Lump sum tax 2. Real tax 3. Exempt from tax 4. Paid not at all } Q 42</p> <p>41. Do you have management responsibility in current job?</p> <p>1. Yes 2. No</p> <p>42. Are you registered with any trade union?</p> <p>1. Yes 2. No</p> <p>43. Are you registered with any social security institution related to your job?</p> <p>1. Social Security Institution 2. Retirement Found 3. Self Employment Institution 4. Not registered 5. Other (Please explain)</p>
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BÖLÜM III- İSTİHDAM DURUMU (Devamı)

<p>44. a) Which year did you start to work in this activity? b) <i>(To be asked for persons who have begun his/her activity within last 2 years)</i> Which month did you start to work in this activity?</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>59. a) What is the main activity of this additional additional job? (NACE Rev 1) b) Give one or two examples of the product or service produced by your workplace.</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>45. How did you find this job? 1. By my self 2. Through the Turkish Employment Organisation 3. Through the Private Employment Office 4. Through relative, friends etc. 5. Other (Please explain)</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>60. What is your employment status in this workplace (firm/organisation)? 1. Regular employee 2. Casual employee 3. Employer 4. Self employed 5. Unpaid family worker</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>46. What is your employment type in this workplace? 1. Fulltime → Q 49 2. Part time</p>	<div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>61. a) How many hours do you usually work per week in your main job? b) How many hours do you usually work per week in your additional job?</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>47. Why are you working in a part time job? 1. Looking after children in the family 2. Looking after incapacitated adults in the family 3. Looking after children or incapacitated adults in the family 4. Training/education 5. Own illness or disability 6. Other personal or family reasons 7. Could not find a full time job 8. Did not want a full time job 9. Other (Please explain)</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>62. How many hours would you like to work totally per week? 63. How many hours did you actually work in your main and additional job during the reference week?</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>48. Why are you looking after children or incapacitated adults in the family by yourself? 1. Because these kind of services are too expensive 2. Because of not trust the quality of that kind services 3. There is no place which gives that kind of services near home 4. Individual preference</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>64. (Ask If Q64 and Q39= "1" or "2") a) Did you work more than your normal working hours in your work place, home or outside the workplace related with your main job in the reference week? 1. Yes 2. No → Q 65 b) Like that, how many hours did you work at your workplace, home or outside the workplace?</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>49. What is the permanency of this job? 1. Permanent → Q 52 2. Seasonal 3. Temporary</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>(Don't ask Q 65 and Q 66 If Q 28=1)</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>(Ask Q 50 and Q 51, If Q 39= "1" or "2" and Q 49= "2" and "3".)</p>		<p>65. (Ask If the total of Q 63a is higher than Q 61-a.) Why did you work more than your usual hours of work during the reference week? 1. Variable hours (flexible working hours) 2. Over time 3. Other (Please explain)</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>50. Why are you not working in a permanent job? 1. Could not find a permanent job 2. Did not want a permanent job 3. It is a contract covering a period of training 4. It is a contract for a probationary period 5. Other (Please explain)</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>66. (Ask if the total Q 63-a is less than Q 61-a or If Q 63(a+b)<40) Why did you work less than your usual hours or less than 40 hours during the reference week?</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>51. What is the total duration of this temporary job? 1. Less than 1 month aydan az 5. 13 to 18 months 2. 1 to 3 months 6. 19 to 24 months 3. 4 to 6 months 7. 25 to 36 months 4. 7 to 12 months 8. More than 3 years</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>1. Nature of work 2. Annual leave etc. 3. Public holidays 4. There was no work 5. Personal or family reasons 6. Bad weather 7. Own illness, injury or temporary disability 8. Slack work for technical and economic reasons 9. Labour dispute (strike, locout) 10. Education and training 11. Variable hours (flexible working hours) 12. Maternity leave 13. Could not find a full time job 14. Start of/change in job during the reference week 15. Work finished in the reference week 16. Other (Please explain)</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>52. Do you usually/sometimes do the whole or part of your job at home? 1. Usually 2. Sometimes 3. Never</p>	<div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>67. Do you wish to work usually more than the current number of hours? 1. Yes, within the present job 2. Yes, within the present or another job 3. Yes, through a job with more hours than the present job 4. Yes, through an additional job 5. No</p>	<div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>53. (Ask for those take code "1" or "2" in Q-39) Do you shift work? 1. Yes 2. No</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>68. Did you take any step to increase your working hours in the present job? 1. Yes 2. No 69. If you offered to work more hours in your present job, could you start to work by this new working plan within 2 WEEKS? 1. Yes 2. No</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>54. Do you work at evenings? 1. Usually 2. Sometimes 3. Never</p>	<div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>68. Did you take any step to increase your working hours in the present job? 1. Yes 2. No</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>55. Do you work at nights? 1. Usually 2. Sometimes 3. Never</p>	<div style="border: 1px solid black; width: 40px; height: 15px;"></div>	<p>69. If you offered to work more hours in your present job, could you start to work by this new working plan within 2 WEEKS? 1. Yes 2. No</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
<p>56. Do you work on Saturdays? 1. Usually 2. Sometimes 3. Never</p>	<div style="border: 1px solid black; width: 40px; height: 15px;"></div>		
<p>57. Do you work on Sundays? 1. Usually 2. Sometimes 3. Never</p>	<div style="border: 1px solid black; width: 40px; height: 15px;"></div>		
<p>58. In addition to the main job, do you have any other activity in which you engaged to earn income in cash or in kind? 1. Yes 2. No → Q 61</p>	<div style="border: 1px solid black; width: 40px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 15px;"></div>		

70. Are you looking for another job to replace your present job or as an additional job? 1. Yes 2. No → Q 77	<input type="checkbox"/>
71. What is the main reason for seeking another job? 1. To earn more money 2. Wish to have better working conditons 3. Not working in his/her usual occupation 4. Workplace is so far 5. Risk or certainty of loss or termination of present job 6. His/her job is temporary or seasonal 7. Wish to work more hours 8. Wish to work less hours 9. Other (Please explain)	<input type="checkbox"/>
72. What type of employment are you seeking? 1. Want to have a self employment job 2. Full time job is sought 3. Full time job is sought, but if not available part time job will be accepted 4. Part time job is sought 5. Part time job is sought, but if not available full time job will be accepted 6. Full time or part time job would be accepted	<input type="checkbox"/>
73. Since when have you been looking for another job to replace your present job or as an additional job? (MONTH)	<input type="text"/> <input type="text"/> <input type="text"/> Month
74. WITHIN LAST 4 WEEKS in order to seek a job; (1. Yes 2. No) 1. Did you apply to employer directly? 2. Did you ask friends, relatives etc.? 3. Did you contact with Turkish Employment Office or private employment agencies? 4. Did you insert, answer or study advertisements in newspapers or journals? 5. Did you take a test, interview or examination? 6. Did you look for land, premises, equipment, permits, licences or financial resources to establish your own business? 7. Did you wait the results of an application for a job? 8. Did you use any other methods to find a job?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
75. If opportunity to work exists, will you be able to start work within 2 WEEKS? 1. Yes → Q 77 2. No	<input type="checkbox"/>
76. Why can you not start? 1. He/she can not leave present employment within two weeks due to period of notice 2. Personal or family reasons 3. Other (Please explain)	<input type="checkbox"/>

<p>77. (Ask Q 77 and Q 78 for those who take codes "1, 2, 3, 4" in Q 39) <i>How many days did you work in your main activity during the last one month? (For regular employee number of days worked should be taken as 30)</i></p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>78. How much did you earn from your main job activity during the last month? (YTL)</p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>79. (Ask Q 78, Q 80 and Q 81 for those who take codes "1" or "2" in Q 39) <i>Do you have additional payments (bonus and premiums etc.) from your main job activity? (Over time payments are included)</i></p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>1. Yes 2. No ➔ Q 84</p>	
<p>80. What is the amount of this payment per last month? (YTL)</p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>81. (Ask for those who has started his/her job within the survey month and do not answer Q 78) <i>How much do you expect to earn? (YTL)</i></p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>82. (Ask Q 82 and Q 83 for those who take codes "3" or "4" in Q 39) <i>How many days did you work in your main activity during the last one year?</i></p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>83. How much did you earn from your main job activity during the last one year? (YTL)</p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>84. (Ask Q 84 and Q 85 for those if Q 58=1 and Q60<5) <i>How many days did you work in your additional job/jobs in the last month?</i></p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>
<p>85. How much did you earn from your additional job/jobs in the last month? (YTL)</p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div>

<p>86. Have you sought a job within LAST 4 WEEKS?</p> <p>1. Yes —→ Q 89 2. No</p>		_
<p>87. Though you have not sought a job within last 4 weeks, are you willing to work if opportunity to work exists?</p> <p>1. Yes 2. No</p>		_
<p>88. Have you sought a job within LAST 3 MONTHS?</p> <p>1. Yes 2. No —→ Q 94</p>		_
<p>89. What was your situation when you started to look for a job?</p> <ol style="list-style-type: none"> 1. Was working temporarily, work came to an end 2. Dismissed 3. Left his/her job by own initiative 4. Closed his/her job or bankrupted 5. Was working as unpaid family worker 6. Retired 7. Was in education 8. Just graduated 9. Just completed his military service 10. Housewife 11. Other (Please explain) 		_ _
<hr/>		
<p>90. WITHIN LAST 3 MONTHS, in order to find a job;</p> <p>(1. Yes 2. No)</p> <ol style="list-style-type: none"> 1. Did you apply to employer directly? 2. Did you ask friends, relatives etc.? 3. Did you contact with Turkish Employment Office? 4. Did you contact with private employment agencies? 5. Did you study advertisements in newspapers or journals? 6. Did you insert or answer advertisements in newspapers or journals? 7. Did you seek a job through internet? 8. Did you take a test, interview or examination? 9. Did you look for land, premises or equipment to establish your own business? 10. Did you look for permits, licences or financial resources to establish your own business? 11. Did you wait a call from Turkish Employment Office? 12. Did you wait the results of an application for a job? 13. Did you wait the results of a competition for recruitment to the public sector? 14. Did you use any other methods to find a job? (Please explain) 		_ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _
<hr/>		
<p><i>(Skip Q 94 for those who take code "2" in all choices of Q 90.)</i></p>		
<p>91. What type of occupation are you seeking? (Including to establish his/her own business) (ISCO-88)</p>		_ _ _ _
<p>92. What type of employment are you seeking?</p> <ol style="list-style-type: none"> 1. Want to have a self employment job 2. Full time job is sought 3. Full time job is sought, but if not available part time job will be accepted 4. Part time job is sought 5. Part time job is sought, but if not available full time job will be accepted 6. Full time or part time job would be accepted 		_
<p>93. How long have you been seeking a job? (Month) (Go to Q 96.)</p>		_ _ Month

GO TO Q 108

INTEGRATED BUSINESS ENTERPRISE SURVEY—2009

(Collected under the Statistics Law, July 2006)

Establishment Schedule

(This schedule will be canvassed in each establishment selected through List Frame / Directory of Establishments or through Area Frame of villages and controller's areas)

[1] Preliminary information about the establishment and fieldwork

1. Province Name where establishment is located:	9. Complete address with telephone number:
2. Name of District:	10. Name of primary field worker:
3. Area of location (Rural/Urban):	11. Date of survey:
4. Village / Town Name:	12. canvassing time (minutes):
5. Nahia code:	13. Signature:
6. Controller's Area (CA) Code:	14. Name of supervisor:
7. Name of establishment:	15. Date of scrutiny of schedule:
8. Name of owner:	16. Signature:

[2] Detailed identification of sample establishment (codes only)

(Items 211 to 221 will be copied from the 'Sample List' to be made available to the field personnel)

Item No.	Item description	Code
(1)	(2)	(3)
211	Type of frame (List frame / Directory of establishments-1, Area frame-2)	
<i>If code 1 in item 211, fill up items 212-215:</i>		
212	Province code	
213	Serial number of establishment	
214	Location area (rural-1, urban-2)	
215	Broad activity code	
<i>If code 2 in item 211, fill up items 216-224</i>		
216	Province code	
217	Location area (rural-1, urban-2)	
218	Stratum number	
219	Sub-sample number	
220	Sample village/CA number	
221	Serial number of sample village/CA	
222	Segment number ('1' for village)	
223	Broad activity code	
224	Sample establishment number	

[3] Background information

Item No.	Item description	Code			
(1)	(2)	(3)			
311	Broad activity (mining and quarrying-01; manufacturing-02; electricity, gas and water supply-03; construction-04; trade and repair-05; transport and storage-06; accommodation and food service activities-07; information and communication-08; real estate activities-09; education-10; health and social work-11; other services-12)				
312	Main activity: Description (.....)				
	Main activity: 4-digit code (as per ISIC-Rev 4)				
313	Location (within permanent structure-1, within temporary structure-2, without any structure (mobile / street vendors, etc.)-3)				
314	Ownership status (government / public sector-1, others: limited company -2, cooperative society/trust-3, partnership-4, proprietary-5)				
315	Whether registered under any Act with any Agency (yes-1, no-2)				
316	Age in completed years (write '00' if not completed one year)				
317	If received government assistance in any form during last 3 years (yes: loan-1, subsidy-2, others-3, combination-4; no assistance-5)				
318	Nature of problem faced during last year (frequent power cuts-1, lack of infrastructure facilities-2, labour problems-3, problem of security-4, others-5, combination-6; no problem-7)				
319	Whether accounts maintained (yes-1, no-2)				
320	Reference/last year: (From: To:)				
321	Is the establishment part of an enterprise? (yes-1; no-2)				

[4] Employment (Average number per day during the major part of period of operation during last year)

Item No.	Classification Type	Status of worker	Full-timers	Part-timers	All
(1)	(2)	(3)	(4)	(5)	(6)
411	I. Payment	Paid			
412		Unpaid			
413		Total			
414	II. Sex	Male			
415		Female			
416		Total			
			Nationals	Foreigners	Total
417	III. Occupation	Manager/Professional/ Administrative			
418		Others			
419		Total			

[5] Compensation to workers during last year

Item No.	Type of compensation	Amount ('000 AF)		
		Nationals	Foreigners	Total
(1)	(2)	(3)	(4)	(5)
511	Wages and salaries			
512	Other remunerations (like employer's contribution, group benefits (food, accommodation, etc. and other facilities)			
513	Total			

* These codes shall be left blank. Later on a unique code structure may be developed and these codes may be recorded for further processing to meet data requirements.

Guidelines for filling up of sub-block 6.1

Note that, to facilitate reporting, some of the important inputs considering various broad activities are already codified as below. If used as inputs, these item numbers are to be recorded in col.1 and corresponding value figures are to be reported in col.7. Other inputs are to be clubbed with item description as 'Other inputs' and the last digit of the item code shall be '9' with first (left-most) digit being '6' and next two digits being the broad activity number. However, significant items (each having a share of more than 10% in the total value of input) of 'Other inputs' may be described and all other columns along with value figures reported in subsequent lines.

Item numbers to be used for filling up column 1 of sub-block 6.1:

Mining and Quarrying (01): inputs consumed-6019

Manufacturing (02): raw materials consumed-6029

Electricity, gas and water supply (03): raw materials consumed-6039

Construction (04): building material used-6041; materials for road-6042; materials for railways-6043

Trade and repair (05): purchase value of goods traded-6051

Transport and storage (06): petrol, diesel, lubricants, etc-6061; tyres, tubes, batteries, etc-6062; repair and maintenance of transport equipment-6063; insurance charges, fees and vehicle taxes-6064; charges for storage of goods-6065

Accommodation and food service activities (07): articles purchased (e.g. bedding) for providing accommodation-6071; articles consumed for food and drink-6072; crockery, glassware and other consumables-6073

Information and communication (08): cost of publishing material-6081; cost of instruments for motion picture, video programme, computer programming, etc-6082

Real estate activities (09): maintenance of machinery and equipment-6091; travelling, hospitality, etc-6092

Education (10): expenses on: newspapers, journals, etc-6101; library and laboratory-6102; computer, etc-6103

Health and social work (11): consumables used for laboratory, operation theatre and other tests-6111; medicine and drugs-6112; syringes, plastering materials and other items-6113; diet for patients-6114; uniform, etc-6115

Other services (12): inputs consumed-6129

* These codes shall be left blank. Later on a unique code structure may be developed and these codes may be recorded for further processing to meet data requirements.

Guidelines for filling up of sub-block 7.1

Note that, to facilitate reporting, some of the important receipts considering various broad activities are already codified and the corresponding item numbers in 4-digits are given below. These item numbers are to be recorded in column 1 and corresponding value figures (at sale price if sold or producer's price if made ready for sale or value of work done as the case may be) in column 7 of sub-block 7.1. Other receipts are to be clubbed with item description as 'Other receipt' and the last digit of the item code shall be '9' with first (left-most) digit being '7' and next two digits being the broad activity number. However, significant items (each having a share of more than 10% in the total value of output) of 'Other receipts' may be described and value figures and other details reported in subsequent lines.

Item numbers to be used for filling up column 1 of sub-block 7.1:

Mining and Quarrying (01): value of ore/minerals mined/quarried and made ready for sale-7011

Manufacturing (02): change in semi-finished goods-7021; by-products and products other than main product-7022; main products manufactured excluding semi-finished goods-7029

Electricity, gas and water supply (03): value of supply-7039

Construction (04): value of construction works: building-7041; roads, railways and other civil engineering-7042; other constructions like electrical installation, site preparation, etc.-7043

Trade and repair (05): value of trading goods consumed-7051; change in stock of trading goods -7052; sale value of goods traded-7053

Transport and storage (06): earnings from: passenger traffic-7061, goods traffic-7062; storage charges-7063

Accommodation and food service activities (07): lodging charges-7071; charges receivable from services like renting out halls for function, laundry services, other entertainment services like gym, laundry, swimming pool, etc. provided-7072; earnings from sale of food, drinks, catering services etc.-7073

Information and communication (08): earnings from: publishing of books, journals, etc.-7081; production of motion picture, video, TV programming, radio broadcasting, etc.-7082; telecommunication-7083; computer programming, consultancy and related activities-7084; other information activities like data processing, news agency activities, etc.-7085

Real estate activities (09): receipts from services provided-7091; fees and commissions as brokerage-7092

Education (10): donations/grants-7101; tuition fees-7102; other fees (library, laboratory, examination, etc)-7103

Health and social work (11): donations/grants-7111; consultation fee and medicine charges-7112; fees for professionals and nurses-7113; charges for operation theatre and various medical tests-7114

Other services (12): value of services rendered-7129

[8] Gross value added during the year

Item No.	Item description	Value ('000 AF)
(1)	(2)	(3)
811	Total operating expenses / input (block 6, item 6990, col. 3)	
812	Total receipts / output (block 7, item 7990, col. 3)	
813	Gross value added (item 812 – item 811) (check the consistency of this item; the entry should be plausible since it is the sum total of four factors of production, namely, compensation to employees, rent on hired land and building, interest on loan, and profits earned during the year)	

[9] Value of fixed assets

Item No.	Type of asset	Value of asset ('000 AF) as on last day of the year (book value if accounts available; otherwise market value)		Net addition during the last year ('000 AF)	Rent payable for last year ('000 AF)
		Owned + Rented	Rented		
(1)	(2)	(3)	(4)	(5)	(6)
911	Land				
912	Building				
913	Vehicles				
914	Plant and machinery				
915	Furniture, tools and other fixed assets				
916	All				

[10] Outstanding loan as on last day of the year

Item No.	Source of loan	Amount outstanding ('000 AF)	Interest payable during the last year ('000 AF)
(1)	(2)	(3)	(4)
1001	Government and other credit institutions		
1002	Commercial banks		
1003	Others		
1004	All		

[11] Summary information (to be copied correctly from different blocks)

Item Number	Item description	Item reference	Entry
(1)	(2)	(3)	(4)
1101	Type of frame	Block 2, Item 211, Col.3	
<i>If '1' in col.4, item 1101, fill up items 1102-1105:</i>			
1102	Province code	Block 2, Item 212, Col.3	
1103	Serial no. of establishment	Block 2, Item 213, Col.3	
1104	Location area	Block 2, Item 214, Col.3	
1105	Broad activity code	Block 2, Item 215, Col.3	
<i>If '2' in col.4, item 1101, fill up items 1106-1114:</i>			
1106	Province code	Block 2, Item 216, Col.3	
1107	Location area	Block 2, Item 217, Col.3	
1108	Stratum number	Block 2, Item 218, Col.3	
1109	Sub-sample number	Block 2, Item 219, Col.3	
1110	Sample village/CA number	Block 2, Item 220, Col.3	
1111	Serial number of village/CA	Block 2, Item 221, Col.3	
1112	Segment number	Block 2, Item 222, Col.3	
1113	Broad activity code	Block 2, Item 223, Col.3	
1114	Sample establishment number	Block 2, Item 224, Col.3	
<i>Subsequent items are applicable for all establishments irrespective of type of frame</i>			
1115	Main activity code	Block 3, Item 312, Col.3	
1116	Ownership code	Block 3, Item 314, Col.3	
1117	Age	Block 3, Item 316, Col.3	
1118	Receipt of assistance	Block 3, Item 317, Col.3	
1119	Nature of problem faced	Block 3, Item 318, Col.3	
1120	If accounts maintained	Block 3, Item 319, Col.3	
1121	Number of paid workers	Block 4, Item 411, Col.6	
1122	Total number of workers	Block 4, Item 413, Col.6	
1123	Number of male workers	Block 4, Item 414, Col.6	
1124	Number of full-timers	Block 4, Item 413, Col.4	
1125	Number of nationals	Block 4, Item 419, Col.4	
1126	Compensation to workers	Block 5, Item 513, Col.5	
1127	Total operating expenses	Block 6, Item 6990, Col.7	
1128	Total receipts	Block 7, Item 7990, Col.7	
1129	Gross value added	Block 8, Item 813, Col.3	
1130	Fixed assets	Block 9, Item 916, Col.3	
1131	Outstanding loan	Block 10, Item 1004, Col.3	



INSTITUTO NACIONAL
DE ESTADÍSTICA Y GEOGRAFÍA

CENSOS ECONÓMICOS 2009
Cuestionario básico 2008
Información de 2008

CONFIDENCIALIDAD Y OBLIGATORIEDAD

Conforme a las disposiciones de la Ley del Sistema Nacional de Información Estadística y Geográfica: Artículo 37. "Los datos que proporcionen para fines estadísticos los Informantes del Sistema a las Unidades en términos de la presente Ley, serán estrictamente confidenciales y bajo ninguna circunstancia podrán utilizarse para otro fin que no sea el estadístico."

Artículo 38. "Los datos e informes que los Informantes del Sistema proporcionen para fines estadísticos y que provengan de registros administrativos, serán manejados observando los principios de confidencialidad y reserva, por lo que no podrán divulgarse en ningún caso en forma nominativa o individualizada, ni harán prueba ante autoridad judicial o administrativa, incluyendo la fiscal, en juicio o fuera de él."

Artículo 45. "Los Informantes del Sistema estarán obligados a proporcionar, con veracidad y oportunidad, los datos e informes que les soliciten las autoridades competentes para fines estadísticos, censales y geográficos, y prestarán apoyo a las mismas."

Artículo 47. "La información no queda sujeta a la Ley Federal de Transparencia y Acceso a la Información Pública Gubernamental".

LA UNIDAD DE OBSERVACIÓN ES EL ESTABLECIMIENTO

La unidad económica que en una combinación física, asentada en un lugar de manera permanente y delimitada por construcciones o instalaciones fijas, combina acciones y recursos bajo la dirección de una sola entidad propietaria o controladora, para realizar actividades de producción, ventas, o compra-venta de mercancías o prestación de servicios, sea con fines de lucro o no.

No aplica para embajadas, consulados ni partidos políticos.

Los datos relacionados en este cuestionario deben corresponder solamente a este establecimiento y no incluir todas las actividades que se realicen en éste.

Los datos son de los administradores, gerentes, representantes o encargados del establecimiento son solamente los responsables de la información asentada en los documentos autorizados o suscritos por ellos.

Todos los servicios relacionados con este cuestionario son gratuitos

OBJETIVO DE LOS CENSOS ECONÓMICOS

Obtener información referente a la totalidad de los establecimientos y empresas para conocer la estructura productiva del país, así como cubrir los requerimientos de estadística económica que son fundamentales para la toma de decisiones.

REFERENCIA GEOGRÁFICA E IDENTIFICACIÓN DEL ESTABLECIMIENTO

E _{03,N} Entidad federativa	E ₀₃ Clave	E ₄₀ Tipo de establecimiento
E _{04,N} Municipio o delegación	E ₀₄ Clave	1 = Filio
E _{05,N} Localidad	E ₀₅ Clave	2 = Semifilio
E ₀₆ Área Geoestadística Básica (AGEB)	E ₀₆ Clave	3 = En vivienda con acceso
		4 = En vivienda sin acceso / uso exclusivo
		5 = En vivienda sin acceso / uso compartido

E ₀₁ NIC	E ₀₂ NOP
E ₀₈ ¿Cuál es el nombre de este establecimiento?	
E ₀₉ ¿Cuál es el nombre del propietario o la persona física o jurídica responsable de este establecimiento?	

UBICACIÓN DEL ESTABLECIMIENTO

E ₁₀ Calle, avenida, andador, carrilero, manzanillo, lote u otro (especifique)	E ₁₁ Edificio, piso o nivel	E ₁₂ Número o letra interior
E ₁₁ Número exterior o km	E ₁₃ Teléfono	E ₁₄ Código postal
E _{15A} Clave lada	E ₁₅ Teléfono	E ₁₆ Código postal
E ₁₄ Colonia, fracción, manzanillo, lote u otro		
E _{15,B} Centro comercial, parque industrial u otro (especifique el número del local)		
	C ₁₂₂ Clave	

ACTIVIDADES ECONÓMICAS FRECUENTES

CLAVE	NOMBRE	CLAVE	NOMBRE	CLAVE	NOMBRE
A					
C01	ABARROTES, TIENDA DE	S52	CENTRO DE ACONDICIONAMIENTO FISICO	C01	ESTANQUILLO O MENEQUEN DE ABARROTES
S17	ABOGADOS, BUFETE DE	S22	CENTRO DE FOTOCOPIADO	S77	ESTÉTICA
C60	AGENCIA DE AUTOMÓVILES NUEVOS	S85	CENTRO DE REVELADO	S35	ESTOMATOLOGO, CONSULTORIO DE
S25	AGENCIA DE VIAJES	S69	CENTRO NOCTURNO	S20	ESTUDIO FOTOGRAFICO
S45	ALCOHÓLICOS ANÓNIMOS	S75	CERAJERÍA	C12	EXPENSAS DE MAN
M10	ALFARERÍA, FÁBRICA DE	S60	CERVEJERÍA (LUGAR PARA BEBER)		
S66	ALINEACIÓN Y BALANCEO, SERVICIOS DE	S24	CIBERCAFE		
S59	ANTRO O CENTRO NOCTURNO	S12	CINE	C50	FARMACIA SIN MINISUPER
M11	ARTÍCULOS DE CERÁMICA (EXCEPTO MUEBLES DE	S77	CLÍNICA DE DEPILOCIÓN	C27	FARMACIA HOMEOPÁTICA
S62	BÑO Y PISOS), FÁBRICA DE	S35	CLÍNICA DE ESPECIALIDADES DENTALES	C64	FARMACIA NATURISTA
S05	AUTOELECTRICO, TALLER	S90	COCINA ECONÓMICA	C53	FARMACIA SIN MINISUPER
S70	AUTOFINANCIAMIENTO	S45	COMEDORES COMPULSIVOS ANÓNIMOS	C62	FARMACIA VETERINARIA PARA GANADO
C61	AUTOLAVADO	C47	COMPUTADORAS, COMERCIO DE	S62	FERRERÍA
		S36	CONSULTORIO DE ACUPUNTURISTA	S62	FLORES
		S35	CONSULTORIO DE DENTISTA		
		S37	CONSULTORIO DE DENTISTA		
		S19	CONTADORES, DESPACHO DE		
		M08	COSTURERA, TALLER (CONFECCIÓN DE ROPA O DE MEDIDA)		
		C09	CREMERÍA		
		C56	CRISTALERÍA, TIENDA DE		
B					
M13	BALCONERÍA O HERRERÍA				
S49	BALNEARIO				
S60	BAR O CANTINA				
S90	BARBACOA, PREPARACIÓN DE				
C59	BAZAR O VENTA DE ARTÍCULOS USADOS				
S76	BICICLETAS, REPARACIÓN DE				
C32	BICICLETAS, COMERCIO DE				
S54	BILIARES				
S51	BILLETES DE LOTERÍA, VENTA DE				
S90	BIRRIERÍA, PREPARACIÓN DE				
C22	BISUTERÍA, COMERCIO DE				
C18	BLANCOS, COMERCIO DE				
S53	BOLICHES				
C20	BONETERÍA O MERCERÍA				
C23	BOUTIQUE DE ROPA				
S17	BUFETE JURÍDICO				
S57	BUNGALOW				
C					
S57	CABAÑAS O VILLAS				
S24	CAFÉ INTERNET				
S90	CAFETERÍA				
C23	CAMISERÍA, VENTA DE CAMISAS				
S82	CAMPOSANTO O PANTEÓN				
M14	CANCELES, FÁBRICA DE				
S60	CANTINA O BAR				
C02	CARNICERÍA				
S90	CARNITAS, PREPARACIÓN DE				
S44	CASA CUNA U ORFANATO				
S06	CASA DE EMPENO				
S58	CASA DE HUÉSPEDES				
S87	CASA DE ORACIÓN, TEMPLO, IGLESIA				
S21	CASETA TELEFÓNICA				
C36	CELULARES, VENTA DE				
S92	CEMENTERIO O PANTEÓN				
S90	CENADURÍA				
S11	CENTRAL CAMIOTERA				
S60	CENTRO BOTANICO				
D					
S35	DENTISTA				
C17	DEPOSITO DE CERVEZA				
C45	DESECHABLES (VASOS, PLATOS, ETC.), COMERCIO DE				
C63	DESHUADERO, TALLER MOTOCICLISTAS				
S19	DESPACHO COMERCIAL				
S17	DESPACHO DE ABOGADOS				
S19	DESPACHO DE CONTADORES				
S17	DESPACHO PUBLICO				
S17	DESPACHO DE ROPA				
S69	DIRECCIÓN MOTOCICLISTA O VULCANIZADORA				
S67	DIRECCIÓN MOTOCICLISTA				
C31	DIRECCIÓN MOTOCICLISTA				
C49	DIRECCIÓN MOTOCICLISTA				
S45	DIRECCIÓN MOTOCICLISTA				
S11	DIRECCIÓN MOTOCICLISTA				
S38	DIRECCIÓN MOTOCICLISTA				
S73	DIRECCIÓN MOTOCICLISTA				
M06	DIRECCIÓN MOTOCICLISTA				
S31	DIRECCIÓN MOTOCICLISTA				
S32	DIRECCIÓN MOTOCICLISTA				
S88	DIRECCIÓN MOTOCICLISTA				
S26	DIRECCIÓN MOTOCICLISTA				
S30	DIRECCIÓN MOTOCICLISTA				
S28	DIRECCIÓN MOTOCICLISTA				
S27	DIRECCIÓN MOTOCICLISTA				
S28	DIRECCIÓN MOTOCICLISTA				
S29	DIRECCIÓN MOTOCICLISTA				
S84	DIRECCIÓN MOTOCICLISTA				
E					
S38	ELECTRODOMÉSTICOS, COMERCIO DE				
S73	ELECTRODOMÉSTICOS, REPARACIÓN Y				
M06	EMBOLLADOR DE AGUA				
S31	ESCUELA COMERCIAL O SECRETARIAL				
S32	ESCUELA DE IDIOMAS				
S88	ESCUELA DE MANEJO				
S26	ESCUELA PREESCOLAR				
S30	ESCUELA PREPARATORIA				
S28	ESCUELA PRIMARIA				
S27	ESCUELA PRIMARIA				
S28	ESCUELA SECUNDARIA GENERAL				
S29	ESCUELA SECUNDARIA TÉCNICA				
S84	ESTACIONAMIENTO				
F					
C50	FARMACIA SIN MINISUPER				
C27	FARMACIA HOMEOPÁTICA				
C64	FARMACIA NATURISTA				
C53	FARMACIA SIN MINISUPER				
C62	FARMACIA VETERINARIA PARA GANADO				
S62	FERRERÍA				
S62	FLORES				
	FONDA				
	FOTOCOPIAS, SERVICIOS DE				
	FRUTERÍA O VERDULERÍA				
	FUENTE DE SODAS				
	FUNERARIA				
G					
C64	GASOLINERA				
C64	GASOLINERÍA				
S52	GINNASIO				
S45	GRUPO DE AUTOAYUDA				
S47	GUARDERÍA				
H					
S90	HAMBURGUESAS, PREPARACIÓN DE				
M13	HERRERÍA O BALCONERÍA				
S88	HOJALATERÍA AUTOMOTRIZ, TALLER DE				
S43	HOSPITAL DE ESPECIALIDADES MEDICAS				
S43	HOSPITAL DE MATERNIDAD				
S41	HOSPITAL GENERAL				
S55	HOTEL				
C25	HUARACHERÍA				
C08	HUEVO, COMERCIO DE				
I					
S87	IGLESIA				
M09	IMPRESIÓN DIGITAL				
M09	IMPRESIÓN DIGITAL				
S24	INTERNET PUBLICO				
J					
S14	JARDÍN DE EVENTOS, RENTA DE				
S26	JARDIN DE NIÑOS				
C29	JOYERÍA, COMERCIO DE				
S90	JUGUERÍA				
C33	JUGUETES, COMERCIO DE				
K					
S26	KINDER				

[illegible]

D₁₀₀ ¿Quién fue el propietario de esta unidad económica?		Número	A
1) Una persona física o propietario sin socios	→	Pase a la pregunta D ₁₁₄	
2) Una sociedad mercantil o asociación	→	Pase a la pregunta D ₁₀₂	
3) El gobierno	→	Pase a la pregunta H ₃₁₀	
4) Organismos internacionales (ONU, OEA, OCDE, etcétera)	→		
D₁₀₁ ¿Qué tipo de sociedad es?		Número	A
1) Sociedad Anónima (SA)			
2) Sociedad Anónima de Capital Variable (SA de CV)			
3) Asociación Civil (AC) o Sociedad Civil (SC)			
4) Cooperativa			
5) Otros (especifique) D ₁₀₁			
Pase a la pregunta D ₁₁₄			
D₁₀₂ La actividad de este establecimiento de gobierno es:		Número	A
01) Establecimiento comercial	}	Pase a la pregunta G ₁₁₁	
02) Escuelas, hospitales, guarderías y otros servicios, excepto de administración pública. Incluye la fabricación de bienes			
11) Administración pública en general	}	Pase a la pregunta H ₃₁₀	
12) Regulación y fomento al desarrollo económico			
13) Impartición de justicia, seguridad y orden público			
14) Regulación y fomento para mejorar el medio ambiente			
15) Administración de instituciones de bienestar social			
16) Relaciones exteriores			
17) Fuerza armada			
18) Organismo legislativo			
19) Organismos autónomos (IFE, INEGI, BANXICO, CNDH)			
D₁₁₁ Este establecimiento es:		Número	A
1) Único: no comparte la razón social con otro establecimiento	→	Pase a la pregunta G ₁₁₁	
2) Sucursal o matriz: controla o es controlado por otro u otros establecimientos de la misma razón social	→		
F₁₁₁ Este establecimiento se dedicó exclusivamente a prestar servicios a la misma empresa a la que pertenece		Número	A
1 = Si			
2 = No	→	Pase a la pregunta G ₁₁₁	

Sr.(a) informante, en esta parte del cuestionario, le solicitaré datos sobre la propiedad y forma de organización del establecimiento.

Persona física o propietario sin socios. Son quienes responden de manera personal por los actos económicos de un negocio, estén o no registrados ante las autoridades.

Sociedad Anónima. Los socios aportan recursos para alcanzar un fin común, relacionado con la producción, comercialización o prestación de servicios, respondiendo a una razón social para cumplir con sus obligaciones.

Asociación o sociedad civil. Esquema de organización que adopta cualquier grupo de ciudadanos que conviene, en reunirse para realizar un fin común de carácter social o de beneficio colectivo; estas organizaciones se distinguen por las siglas AC o SC al final de su razón social.

Cooperativa. Es la forma de organización social integrada por personas físicas, con base en intereses y principios comunes y de cooperación, con el propósito de realizar actividades económicas.

Establecimiento único. Establecimiento que realiza su actividad económica de manera independiente, se representa legal y jurídicamente por sí mismo, no comparte la razón social con otros establecimientos y realiza directamente sus operaciones económicas.

Matriz. Establecimiento que realiza la dirección y control legal de otros establecimientos con los que comparte la razón social. Puede realizar funciones de producción de bienes, compra-venta de mercancías, prestación de servicios o actividades de apoyo.

Sucursal. Establecimiento que depende de un establecimiento central o matriz para el control contable, administrativo y legal, comparte la razón social, puede estar en la misma entidad o en otra, puede realizar funciones de producción de bienes, compra-venta de mercancías, prestación de servicios o actividades de apoyo.

Prestar servicios a la misma empresa. Son aquellos establecimientos que se encuentran en la misma entidad física diferente al establecimiento que apoyan, solo realizan servicios al establecimiento que apoyan. Si actividad económica es un proceso o parte de la producción de bienes.

CATEGORÍA JURÍDICA
(Del 1 de enero al 31 de diciembre de 2008)

F₁₁₀ El principal producto o servicio que proporcionó, fue:	Número	A
1) Administración, contabilidad o representación legal	5) Oficina de cobros o recepción de pagos	
2) Bodega o almacenamiento	6) Taller de reparaciones o servicio	
3) Estacionamiento	7) Fabricación o producción de mercancías	
4) Sala de exhibición	8) Compra-venta de mercancías	
	9) Otro (especifique):	
F₁₁₂ ¿Obtuvo ingresos por esta actividad?	Número	A
1 = Si	2 = No	
Si el establecimiento, respondió en F ₁₁₁ = 1, F ₁₁₂ = 2, entonces pide al informante que responda EL CAPÍTULO DE CLASIFICACIÓN ECONÓMICA , de acuerdo con la actividad del establecimiento al que apoya principalmente		

II. ORGANIZACIÓN DEL ESTABLECIMIENTO
(Del 1 de enero al 31 de diciembre de 2008)

G₁₁₁ ¿En qué año inició actividades este establecimiento?	Año	A
Si inició actividades en 2008, pase a la pregunta G ₂₁₁		
G₁₁₂ ¿Realizó actividades durante 2008?	Número	A
1 = Si	2 = No	
Si contestó 2 = No, pase a la pregunta G ₂₁₁ , y REFIERA TODOS los datos al mes inmediato anterior		
G₂₁₁ ¿Cuántos meses trabajó este establecimiento durante 2008?	Meses	A
G₂₁₂ ¿Cuántos días a la semana trabajó este establecimiento?	Días	A
G₃₁₀ ¿Cuál fue el promedio diario de horas trabajadas por este establecimiento?	Horas	A

Año de inicio de actividades: Se refiere al año en que inició actividades el establecimiento, puede ser el año en el que se creó, fundó o comenzó a operar la unidad económica.

Cuántos meses trabajó este establecimiento durante 2008. Es el número total de meses trabajados por el establecimiento, considerando incluso aquellos meses que trabajó de manera parcial durante 2008.

Cuántos días a la semana trabajó este establecimiento. Es el número total de días trabajados por el establecimiento en una semana, considerando aquellos días que trabajó de manera parcial.

Promedio diario de horas trabajadas. Es el número de horas que el establecimiento permaneció abierto. Incluya: el tiempo para la preparación de las actividades.

En este capítulo, le haré unas preguntas sobre la actividad económica, es decir, lo que produce, comercializa o el servicio que realiza.

La actividad principal del establecimiento se refiere a la producción, compra-venta de bienes o la prestación de servicios que le representó el ingreso más importante.

Nombre común: Es aquel nombre con el que se conoce a un tipo de establecimientos de acuerdo con los bienes y servicios que proporciona. Por ejemplo: carnicería, tienda de abarrotes, floristería, panadería, peluquería, papelería, frutería o verdulería, dulcería, cocina económica, taller de joyalatería, automotriz, boutique, minisuper, cibercafé, taller de pintura, automotriz, vinatería, farmacia con minisuper, herrería, zapatería, tienda de bicicletas, autolavado y vulcanizadora.

CENSOR:

Para la respuesta de la variable F₁₁₆ (¿Cuál de las siguientes opciones describe mejor la actividad de este establecimiento?) considere si en la variable F₁₁₄ (De acuerdo con la tabla de actividades económicas de las páginas 2 y 3, anota la clave que corresponda a la actividad del establecimiento) la respuesta empieza con C, M o S, entonces debes buscar la actividad del establecimiento con la misma letra inicial.

Si la respuesta de F₁₁₄ es O99 Otras actividades, solicita apoyo al informante para que localice la actividad que le corresponde al establecimiento.

Nota: Es importante que para la selección de la opción correcta, solicites apoyo al informante.

Maquila. Es la producción de bienes mediante la transformación o manejo de materias primas propiedad del cliente.

Artesanías. Es la producción de bienes, principalmente manual, siguiendo las tradiciones y procedimientos heredados de generación en generación.

III. CLASIFICACIÓN ECONÓMICA
(Del 1 de enero al 31 de diciembre de 2008)

F ₁₁₆	¿Cuál fue la actividad económica principal del establecimiento, según los ingresos obtenidos?		
F ₁₁₃	¿Cuál es el nombre con el que comúnmente se conoce a este tipo de negocios?		
F ₁₁₄	De acuerdo con la tabla de actividades económicas de las páginas 2 y 3, anota la clave que corresponda a la actividad del establecimiento	Clave	A
F ₁₁₆	Entonces ¿Cuál de las siguientes opciones describe mejor la actividad de este establecimiento?	Número	A
Comercio de mercancías C(11) Compra-venta de mercancías transformadas			
Manufacturas M(21) Fabrica, elabora, produce o transforma bienes			
M(22) Maquila bienes o parte de ellos			
M(23) Producción de artesanías			
Preparación de alimentos y bebidas S(31) Prepara alimentos o bebidas (restaurante, cocina económica, cantina, bar, taquería, etcétera)			
S(32) Reparación, mantenimiento a todo tipo de bienes			
S(33) Educación, medicina o asistencia social			
S(34) Estéticas (panderías, funerarias y otros servicios personales)			
S(35) Hoteles y otros lugares de alojamiento			
S(36) Administración, dirección y asesoría a negocios, consultores, abogados y otros servicios profesionales			
S(37) Actividades culturales, recreativas y deportivas			
S(38) Fotografía y fotocopiado			
S(42) Renta o alquiler muebles, inmuebles y franquicias			
S(43) Agencias de viajes			
S(44) Sindicatos, cámaras y otras organizaciones laborales, profesionales, deportivas y civiles			
S(45) Agente de seguros, fianzas y autofinanciamiento			
S(46) Pintura, electricidad, plomería o acabados de inmuebles			
S(47) Mensajería y almacenamiento			
Servicios S(36) Servicios religiosos			
S(36) Servicios religiosos			
Transporte O(51) Transporte de personas o bienes y servicio postal			
Construcción O(52) Edifica o construye inmuebles			
Crédito o ahorro O(53) Captación de ahorros, préstamos y otras operaciones con dinero			
O(91) Pesca o acuicultura			
O(92) Extracción o beneficio de minerales			
O(93) Genera o suministra energía eléctrica			
O(94) Capta o distribuye agua potable			
O(95) Agricultura, ganadería o silvicultura			
S(99) Otras actividades			
Pase a la pregunta H ₃₁₀			
Pase a la sección III-E			
Pase a la sección III-F			
Pase a la sección III-G			
Pase a Datos de control			
Pase a Datos de control			
Pase a Datos de control			
Pase a Datos de control			
Pase a Datos de control			
Pase a la sección III-D			

III-A. SECCIÓN: MANUFACTURAS
(Del 1 de enero al 31 de diciembre de 2008)

F ₂₁₁ ¿Cuáles fueron los principales tipos, grupos o clases de bienes que elaboró y le aportaron la mayor cantidad de ingresos?		Porcentaje
A	B	
1)	_____	_____ %
2)	_____	_____ %
3)	_____	_____ %
F ₂₁₂ Si realizó otras actividades en complemento a las anteriores, anótelas e indique el porcentaje de ingresos que le aportaron		Porcentaje
A	B	
1)	_____	_____ %
2)	_____	_____ %
3)	_____	_____ %
F ₂₁₃ ¿Cuáles fueron las tres principales materias primas que consumió en la producción, de acuerdo con su valor?		
A	B	
1)	_____	
2)	_____	
3)	_____	
F ₂₁₄ ¿Cuáles fueron los tres principales procesos que efectuó para la producción?		
A	B	
1)	_____	
2)	_____	
3)	_____	
F ₂₁₅ ¿Considera que su producción es principalmente artesanal?		Número
2 = No		
Pase al capítulo IV. PERSONAL OCUPADO		

III-B. SECCIÓN: COMERCIO DE MERCANCÍAS (COMPRA-VENTA)
(Del 1 de enero al 31 de diciembre de 2008)

F ₃₁₁ ¿Cuáles fueron las principales líneas de mercancías comercializadas (abarrotes, bebidas, electrodomésticos, ropa o artículos escolares) con base en los porcentajes que aportaron al ingreso total?		Porcentaje
A	B	
1)	_____	_____ %
2)	_____	_____ %
3)	_____	_____ %

En los principales tipos, grupos o clases de bienes tenga cuidado de no indicar, de manera independiente tamaños, presentaciones o variedades del mismo bien.

Ejemplos de bienes producidos:

- producción de motores eléctricos
- fabricación de tornillos
- elaboración de bolillo y pan dulce

Las actividades complementarias distintas a las principales se pueden referir tanto a la producción de otros bienes, como a la compra-venta de mercancías o la prestación de servicios.

Materias primas. Son los insumos, materiales, partes, componentes o ingredientes, los cuales serán sometidos a procesos de transformación, confección, ensamble, manufactura o fabricación, para formar parte de un producto terminado, o ser un componente para otro producto.

Ejemplos de materias primas:

- alambre de cobre
- harina de trigo
- papel para impresión

Principales procesos. Es aquella tarea, trabajo o método de producción que se lleva a cabo al momento de realizar la elaboración de bienes.

Ejemplos de procesos para la producción:

- ensamble de motores
- mollienda de nixtamal
- confección de ropa
- inyección de plástico

Las principales mercancías comercializadas corresponden a los artículos que son comprados y vendidos por el establecimiento sin efectuar ningún cambio o transformación en los mismos.

Ejemplos de mercancías comercializadas:

- telas para tapicería
- cosmético facial
- uniformes médicos

SECCIÓN: COMERCIO DE MERCANCÍAS (COMPRA-VENTA)
(Del 1 de enero al 31 de diciembre de 2008)

F. ³¹² Si realizó otras actividades en complemento a las anteriores, anótelas e indique el porcentaje de ingresos que le aportaron	
A	B
1) _____	_____ %
2) _____	_____ %
3) _____	_____ %

F. ³¹³ ¿Qué porcentaje de sus ventas las realizó a instituciones de gobierno o a negocios de cualquier giro de actividad?	
A	B
Porcentaje	_____ %

F. ³¹⁴ Las mercancías que vende este establecimiento principalmente son:	
A	B
1) Nuevas	_____
2) Usadas	_____

F. ³²¹ ¿Este establecimiento vende principalmente maquinaria, equipo o materias primas?	
A	B
1 = Sí 2 = No	_____

F. ³²² ¿El cliente selecciona las mercancías al transitar libremente dentro del establecimiento?	
A	B
_____	_____

F. ³²³ ¿Este establecimiento se dedica principalmente a poner en contacto a compradores y vendedores de mercancías?	
A	B
_____	_____

F. ³²⁴ ¿Este establecimiento es una bodega u oficina de ventas?	
A	B
_____	_____

F. ³²⁵ ¿Este establecimiento tiene poca o nula exhibición de mercancías?	
A	B
_____	_____

F. ³²⁶ ¿La atracción de clientes, principalmente es por la ubicación o imagen del establecimiento?	
A	B
_____	_____

F. ³²⁷ ¿Los productos que vende son principalmente artesanías?	
A	B
_____	_____

F. ³²⁸ ¿Los productos que vende, los recibe de una fábrica de la misma empresa?	
A	B
_____	_____

Pase al capítulo IV. PERSONAL OCUPADO

III-C: SECCIÓN: PREPARACIÓN DE ALIMENTOS Y BEBIDAS
(Del 1 de enero al 31 de diciembre de 2008)

F. ⁴²¹ ¿El cliente ordena su pedido a través de un mostrador, barra o por vía telefónica?	
A	B
_____	_____

F. ⁴²² ¿El cliente realiza el pago antes o al momento de la entrega de sus alimentos y bebidas?	
A	B
_____	_____

F. ⁴²³ ¿El mesero sirve los alimentos y bebidas que ordenó el cliente?	
A	B
_____	_____

F. ⁴²⁴ ¿El cliente consume los alimentos dentro del establecimiento?	
A	B
_____	_____

Pase al capítulo IV. PERSONAL OCUPADO

Las actividades complementarias distintas a las principales se pueden referir tanto a la comercialización de otras mercancías como a la producción de bienes o la prestación de servicios.

Tenga cuidado de no anotar las ventas que realizó directamente a familias o consumidores finales

Indique 1) = Sí (o 2) = No, según corresponda a las características comerciales de este establecimiento.

Indique 1) = Sí (o 2) = No, según corresponda al tipo de establecimiento

III-D. SECCIÓN: SERVICIOS
(Del 1 de enero al 31 de diciembre de 2008)

F _{4.11} ¿Cuáles fueron los principales tipos de <u>servicios proporcionados</u> de acuerdo con el porcentaje que aportaron al ingreso total?		Porcentaje
A	B	
1) _____	_____	_____%
2) _____	_____	_____%
3) _____	_____	_____%
F _{4.12} Si realizó otras actividades en complemento a las anteriores, nótese e indique el porcentaje que les corresponde de acuerdo a su importancia, según los ingresos recibidos		Porcentaje
A	B	
1) _____	_____	_____%
2) _____	_____	_____%
3) _____	_____	_____%
F _{4.14} ¿Cuáles son los nombres de las principales ocupaciones, oficios o puestos de trabajo en este tipo de negocios?		
A		
1) _____		
2) _____		
3) _____		

Pase al capítulo IV. PERSONAL OCUPADO

III-E. SECCIÓN: TRANSPORTE DE PERSONAS Y BIENES
(Del 1 de enero al 31 de diciembre de 2008)

F _{5.11} ¿Cuál fue la forma de organización de esta unidad económica?		Número
A		
1) Empresa transportista		
2) Transportista independiente		
3) Unión, coalición o similares		
4) Servicio Postal Mexicano		
9) Otra F _{5.11} _____ especifique		

PASE A DATOS DE CONTROL

En los principales tipos de servicios proporcionados tenga cuidado de no indicar de manera independiente clases o variedades del mismo servicio.

Ejemplos de servicios proporcionados:

- ajuste de frenos
- consulta externa
- edición de carteles

En caso de no tener ingresos como orfanatos y sindicatos, señale los más característicos.

Las actividades complementarias distintas a las principales se pueden referir tanto a otros tipos de servicios, como a la producción de bienes o la comercialización de mercancías.

Principales ocupaciones son aquellas que desempeña el personal que está directamente involucrado en la prestación de los servicios que se proporcionan en el establecimiento. No existe niveles o calificaciones laborales para la misma ocupación.

Ejemplos de ocupaciones del personal:

- mecánico
- diseñador gráfico
- capturista de datos

Empresa transportista. Es la unidad económica que bajo la dirección de una sola entidad propietaria o controladora se dedica a la prestación del servicio público de transporte de personas, mercancías u objetos de cualquier naturaleza. Puede estar constituida por uno o varios establecimientos que operen bajo la misma denominación o razón social, como son compañías, agencias, terminales, talleres, etcétera.

Transportista independiente. Se refiere a las personas físicas que prestan el servicio de transporte de mercancías y/o pasajeros. Estas personas son propietarias de una o varias unidades de transporte que utilizan para desarrollar la actividad.

III-F. SECCIÓN: CONSTRUCCIÓN
(Del 1 de enero al 31 de diciembre de 2008)

<p>F₆₁₃ ¿Cual fue la actividad principal que realizó, según sus ingresos?</p> <p>1) Edificación de viviendas, industrias y otros inmuebles</p> <p>2) Construcción de obras de ingeniería civil</p> <p>3) Cementación y montaje de estructuras</p> <p>4) Instalaciones eléctricas y plomería</p> <p>5) Albañilería y acabados en construcciones</p> <p>6) Pintura e impermeabilización</p> <p>7) Administración y supervisión de obras</p>	Número
	A

Pase a Sección: III-D. SERVICIOS

III-G. SECCIÓN: CRÉDITO O AHORRO
(Del 1 de enero al 31 de diciembre de 2008)

<p>F₇₁₁ ¿Qué tipo de institución financiera es?</p> <p>1) Caja de ahorro popular</p> <p>2) Sociedad cooperativa de ahorro y préstamo</p> <p>3) Sociedad financiera popular</p> <p>4) Unión de crédito</p> <p>5) Casa de empeño</p> <p>6) Centro cambiante o casa de cambio</p> <p>9) Otro F₇₁₁ _____ especifique</p>	Número
	A

CONCEPTOS	Ingresos	Pagos
	A	B
F₇₁₂ ¿Cuáles fueron los ingresos y pagos por intereses?	(Pesos)	
F₇₁₃ ¿Cuáles fueron los ingresos y pagos por comisiones?		
F₇₁₄ ¿Cuáles fueron las comisiones por cambios de moneda extranjera; cheques; órdenes de pago o compra-venta de oro y metales?		

Administración y supervisión de obras. Administran recursos financieros para la ejecución de obras y verifican que las empresas constructoras realicen los trabajos acordes al proyecto establecido.

Unión de crédito. Instituciones dedicadas al fomento del ahorro nacional mediante la captación de recursos de los miembros o socios, para otorgar préstamos a estos mismos en dinero o en especie.

Casa de empeño. Instituciones que realizan préstamos con garantía prendaria.

El centro cambiario o casa de cambio se dedica a la compra-venta de cualquier tipo de moneda extranjera, así como la comercialización de monedas en oro y plata. Incluye unidades económicas que ofrecen los servicios de envío de dinero, cambio de cheques, etcétera.

Intereses. Es el monto que se paga por el uso de dinero (capital) propiedad de terceros.

Comisiones. Es el monto que se paga por el manejo y administración de cuentas bancarias, líneas de crédito, servicios de ventanilla bancaria.

Comisiones por cambio de moneda extranjera. Cheques, órdenes de pago o compra-venta de oro y metales. Comprende la diferencia entre el precio de compra y el precio de venta de moneda extranjera o la comisión o descuento que se cobra por el cambio.

IV. PERSONAL OCUPADO
(Del 1 de enero al 31 de diciembre de 2008)

CATEGORÍA	TOTAL A	HOMBRES B	MUJERES C
H ₃₁₀ ¿Cuántos trabajadores fueron propietarios sin sueldo o salario fijo?			
H ₃₂₀ ¿Cuántas personas fueron trabajadores sin sueldo o salario fijo (familiares, becarios, voluntarios)?			
H ₁₀₀ ¿Cuántos trabajadores asalariados estaban ligados directamente a la producción, ventas o prestación de servicios? Cuando anote trabajadores asalariados ligados a la producción, ventas o a prestar servicios, no olvide reportar en la variable J ₁₀₀ los salarios al personal ligado a la producción, ventas o servicios.			
H ₂₀₀ ¿Cuántos trabajadores con sueldo fijo fueron empleados administrativos, contables y de dirección? Cuando anote trabajadores administrativos, contables y de dirección remunerados, no olvide reportar en la variable J ₂₀₀ los sueldos a empleados administrativos, contables y de dirección.			
H ₀₀₀ TOTAL			
I ₂₀₀ ¿Cuántos trabajadores recibieron un pago exclusivamente por comisiones sin sueldo base? Cuando anote personal que recibió exclusivamente comisiones sin sueldo base, no olvide reportar en la variable K ₂₀₀ los pagos por comisiones.			
I ₁₀₀ ¿Cuántos trabajadores fueron suministrados por otra razón social? Cuando anote trabajadores suministrados por otra razón social, no olvide reportar en la variable K ₁₀₀ los pagos por suministro de personal.			
I ₀₀₀ TOTAL			

Ahora le preguntaré sobre el número de personas que trabajaron para este establecimiento y si son hombres o mujeres.

Personal ocupado. Comprende al personal contratado por esta razón social, tanto de planta como eventual, sea o no sindicalizado que trabajó durante 2008 para el establecimiento, sujeto a su dirección y control, cubriendo como mínimo una tercera parte de la jornada laboral del mismo. Incluya al personal que trabajó fuera del establecimiento bajo su control laboral y legal; trabajadores en huelga; personas con licencia por enfermedad, vacaciones o permiso temporal. Excluya pensionados y jubilados; personal con licencia ilimitada y personal que trabajó exclusivamente por comisiones sin recibir un sueldo base; así como el personal de otra empresa contratada para proporcionar un servicio, como: limpieza, jardinería o vigilancia, entre otros.

Personal asalariado de producción, ventas o servicios. Son las personas ocupadas directamente en las actividades de producción o elaboración de bienes, venta de mercancías o atención y prestación de servicios a los clientes. Incluya los aprendices y ayudantes que sean asalariados.

Empleados administrativos, contables y de dirección con sueldo fijo. Son las personas que desempeñaron labores de oficina, administración, contabilidad y actividades complementarias en la oficina como ejecutivos, de planeación, organización, dirección y control.

Personal por comisiones. Son las personas que trabajaron para el establecimiento por cuenta propia y que cobraron exclusivamente comisiones o propinas sin sueldo base. Excluya abogados, médicos, contadores y otros servicios profesionales.

Personal suministrado por otra razón social. Son las personas que trabajaron para el establecimiento, pero que no eran contractualmente de otra razón social. Excluya al personal que trabajó como parte de un servicio contratado como servicios de vigilancia, personal que dio mantenimiento al equipo del establecimiento y no pertenece a la razón social del establecimiento, entre otros.

Ahora le voy a preguntar sobre los pagos que otorgó a las personas que trabajaron bajo la dirección y control del establecimiento.

La información que se solicitará en éste y en los siguientes capítulos, es la suma de dinero acumulada del 1 de enero al 31 de diciembre de 2008; en caso de no disponer de esta información para este periodo, puede referir sus datos a uno distinto, por lo que en cada pregunta le solicitaré me indique a qué periodo se refiere su información (mes, semana, etcétera).

Sueldos o salarios. Son los pagos que realizó el establecimiento para retribuir el trabajo ordinario y extraordinario de este tipo de personal, tanto de planta como eventuales, antes de cualquier deducción retenida por los empleadores (impuesto sobre la renta o sobre el producto del trabajo).

Otras prestaciones sociales. Son los pagos tanto contractuales como extracontractuales que proporcionó el establecimiento a los trabajadores, como una remuneración adicional a los sueldos y salarios, ya sea en dinero o en especie. Excluya las contribuciones patronales a regímenes de seguridad social, compra de equipo, uniformes y ropa de trabajo, costos de capacitación, primas vacacionales, erogaciones para actividades deportivas y recreativas; gastos por concepto de pasajes, víáticos y alimentación; además de todos aquellos gastos reembolsables al trabajador.

Utilidades repartidas. Son los pagos que el establecimiento distribuyó entre el personal por concepto de utilidades obtenidas conforme a la legislación laboral, cualquiera que sea el ejercicio fiscal al que correspondan.

Indemnización o liquidación. Se refiere a la compensación monetaria otorgada a los trabajadores por concepto de despido, retiro o terminación de contrato laboral con el establecimiento.

V. SALARIOS, SUELDOS Y PENSIONES
(Del 1 de enero al 31 de diciembre de 2008)

CONCEPTOS	VALOR (Pesos)	PERIODO	TOTAL (Pesos)
J₁₀₀₀ ¿Cuánto pagó de salarios al personal ligado a la producción, ventas o servicios? <i>Cuando anote salarios al personal ligado a la producción, ventas o servicios, no olvide reportar en la variable H₁₀₀₀ el número de trabajadores asalariados ligados a la producción, ventas o a prestar servicios</i>			
J₂₀₀ ¿Cuánto pagó de sueldos a empleados administrativos, contables y de dirección? <i>Cuando anote sueldos a empleados administrativos, contables y de dirección, no olvide reportar en la variable H₂₀₀ el número de trabajadores administrativos, contables y de dirección asalariados</i>			
J₃₀₀ ¿Cuánto pagó al IMSS, INFONAVIT, SAR y otros pagos por seguridad social?			
J₄₀₀ ¿Cuánto pagó por otras prestaciones sociales?			
J₅₀₀ ¿Cuánto pagó de utilidades repartidas a los trabajadores?			
J₆₀₀ TOTAL			
J₆₀₀ ¿Cuánto pagó por indemnización o liquidación al personal?			

Periodos: Anual = A, Semestral = S, Cuatrimestral = C, Trimestral = T, Bimestral = B, Mensual = M, Quincenal = Q, Semanal = E, Diario = D

En esta sección le preguntaré sobre lo que gastó en materiales necesarios para realizar su actividad, así como los gastos de agua, luz y rentas.

Gastos. Es el valor de los bienes y servicios consumidos por este establecimiento para realizar la actividad económica, considerando todas las erogaciones relacionadas con: estos bienes, como los fletes y seguros; deduciendo los descuentos, rebajas y concesiones recibidas. Incluya el valor de los bienes y servicios que recibió en transferencia para su consumo o transformación. Excluya los pagos al personal asalariado.

Mercancías compradas para reventa. Es el valor de los bienes que compró para vender en las mismas condiciones en que fueron adquiridos, es decir, sin ninguna modificación.

Materias primas y auxiliares. Es el valor de los bienes que utilizó en el proceso productivo para transformar o generar un producto. Excluya las materias primas y auxiliares propiedad de terceros que recibe para maquilar; así como los materiales para el mantenimiento o la elaboración de activos fijos para uso propio.

Materiales para la prestación de servicios. Por ejemplo: material didáctico para impartir la educación; medicamentos y material de curación para servicios médicos; formas fiscales para asesoría contable; entre otros.

Suministro de personal. Son los pagos que realizó el establecimiento a empresas suministradoras de personal (contratistas de personal). Excluya los pagos por la prestación de servicios, por ejemplo: vigilancia, intendencia, limpieza y jardinería.

Servicios profesionales. Es el importe de los pagos que realizó el establecimiento por concepto de servicios prestados por profesionales a empresas y profesionistas independientes.

Maquila o subcontratación. Es el pago efectuado por el establecimiento a otra razón social (empresas industriales de transformación parcial o total de submaterias primas, así como por la prestación de servicios especializados en las etapas de producción).

VI. GASTOS
(Del 1 de enero al 31 de diciembre de 2008)

NO INCLUYA EL IVA NI LOS ACTIVOS FIJOS	VALOR (Pesos)	PERIODO E	F	TOTAL (Pesos)
K₁₀₀ ¿Cuánto pagó por las mercancías compradas para reventa? <i>Quando anote mercancías compradas para reventa, no olvide reportar en la variable M₁₀₀ los ingresos por la reventa de mercancías.</i>				A
K₃₁₀ ¿Cuánto gastó en materias primas y auxiliares? <i>Quando anote materias primas y auxiliares, no olvide reportar en la variable M₃₁₀ los ingresos por las ventas de productos elaborados.</i>				
K₄₁₁ ¿Cuánto gastó en combustibles y lubricantes?				
K₅₁₀ ¿Cuánto pagó por el consumo de envases y empaques?				
K₅₁₁ ¿Cuánto pagó por la compra de papelería y artículos de oficina?				
K₅₇₆ ¿Cuánto pagó por el consumo de agua?				
K₇₀₀ ¿Cuánto gastó en materiales para la prestación de servicios? <i>se refiere a la compra de papelería, combustibles y lubricantes, agua, envases y empaques</i> <i>Quando anote materiales consumidos para la prestación de servicios, no olvide reportar en la variable M₇₀₀ los ingresos por la prestación de servicios.</i>				
K₇₃₀ ¿Cuánto pagó por comisiones?				
K₈₁₀ ¿Cuánto pagó por el suministro de personal?				
K₈₃₀ ¿Cuánto pagó por servicios profesionales?				
K₉₀₀ ¿Cuánto pagó por maquila o subcontratación?				

Periodos: Anual = A, Semestral = S, Cuatrimestral = C, Trimestral = T, Bimestral = B, Mensual = M, Quincenal = Q, Semanal = E, Diario = D

Ejemplos de publicidad:

- diseño y colocación de anuncios
- impresión y reparto de volantes
- desplegados en periódicos y revistas
- compra y distribución de calendarios, plumas y otros materiales para regalar a los clientes

Ejemplos de comunicación:

- teléfono
- fax
- Internet
- señales de satélite

Mantenimiento corriente. Son los pagos a terceros por la reparación y mantenimiento menor de los activos fijos. Incluya las refacciones utilizadas para tales fines.

Otros conceptos. Son los gastos de operación normal del establecimiento, por los bienes y servicios que consumió y que no fueron considerados de manera específica en los conceptos anteriores. Incluya la contratación de los servicios de vigilancia, intendencia, limpieza y jardinería; entre otros: equipo, uniformes y ropa de trabajo; los costos por selección, capacitación y administración de personal; los pagos a instructores internos y externos; los materiales de capacitación y los pagos a instituciones de educación (becas); actividades deportivas y recreativas. Excluya los intereses que pagó por créditos o préstamos; los impuestos; las licencias de operación; los gastos de tipo financiero (pérdidas cambiarias; pagos de dividendos, etcétera); las deudas incobrables; las multas; las donaciones; la compra y depreciación de los activos fijos.

GASTOS (Del 1 de enero al 31 de diciembre de 2008)

NO INCLUYA EL IVA NI LOS ACTIVOS FIJOS	VALOR (Pesos)	PERIODO	TOTAL (Pesos)
K₈₁₀ ¿Cuánto pagó por publicidad?		F	A
K₈₂₀ ¿Cuánto pagó por los servicios de comunicación?			
K₈₁₀ ¿Cuánto pagó por la renta de maquinaria, mobiliario y otros bienes?			
K₈₂₀ ¿Cuánto pagó por la renta de edificios y otros bienes inmuebles?			
K₈₃₀ ¿Cuánto pagó por el mantenimiento corriente de edificios, maquinaria y otros bienes?			
K₈₄₁ ¿Cuánto pagó por fletes de productos vendidos?			
K₈₉₉ ¿Cuánto pagó por otros conceptos?			
K₉₀₀ TOTAL de gastos			
K₉₀₁ IVA pagado			

VII. IMPUESTOS E INTERESES SOBRE CRÉDITOS (Del 1 de enero al 31 de diciembre de 2008)

NO INCLUYA EL IVA NI LOS ACTIVOS FIJOS	VALOR (Pesos)	PERIODO	TOTAL (Pesos)
L₁₁₀ ¿Cuánto pagó por intereses sobre créditos o préstamos que recibió?		F	A
L₂₀₀ ¿Cuánto pagó por impuestos (excepto el IVA)?			
L₉₉₉ ¿Cuánto gastó en donaciones, multas, permisos o licencias?			
L₉₀₀ TOTAL			

Periodos: Anual = A, Semestral = S, Cuatrimestral = C, Trimestral = T, Bimestral = B, Mensual = M, Quincenal = Q, Semanal = E, Diario = D

Ahora le voy a solicitar información de los ingresos que obtuvo por la venta de productos o mercancías o la prestación de servicios. Es importante mencionar que debe proporcionar el ingreso total sin deducir ningún costo pues esos datos ya los proporcionó en los gastos.

Tenga cuidado de no confundir los datos de ingresos con la utilidad, ganancia o beneficio. Ingresos. Es el monto que obtuvo este establecimiento por suministro de bienes y servicios, considerando todos los cargos. Excluya los impuestos como el IVA y los especiales a la producción (IEPS), las concesiones otorgadas a los clientes, como descuentos y bonificaciones. Incluya el valor de los bienes y servicios transferidos a otras unidades económicas de la misma empresa; valorados a precio de venta.

Reventa de mercancías. Es el valor de los ingresos por la venta de bienes en las mismas condiciones en que los adquirió.

Renta. Son los ingresos por uso temporal de locales, espacios de planta, instalaciones fijas, maquinaria, equipo, mobiliario y otros muebles e inmuebles de su propiedad.

Nota: Las comisiones por alquiler de inmuebles propiedad de terceros deben reportarse en M_{200} . Ingresos por la prestación de servicios.

Ingresos por la prestación de servicios. Son los ingresos por la prestación de servicios profesionales o técnicos proporcionados a las empresas o personas, como la enseñanza, administración, asesoría, etcétera. Incluya tanto el valor de las refacciones como la mano de obra que utilizó en los servicios de reparación o mantenimiento; las comisiones por alquiler de inmuebles propiedad de terceros. Excluya la renta de bienes muebles e inmuebles.

Ventas de productos elaborados. Son los ingresos por la venta de bienes manufacturados o fabricados por el establecimiento. Incluya los productos elaborados que ya habían sido vendidos, pero que aún se encontraban bajo su control, los productos enviados a otros establecimientos de la misma empresa y las ventas de productos defectuosos. Excluya la reventa de mercancías; los anticipos por producción; los ingresos por conceptos de maquila y los bienes producidos en otros establecimientos de la misma empresa que fueron vendidos por este establecimiento.

Otros ingresos. Son los ingresos que obtuvo este establecimiento por conceptos no especificados en los renglones anteriores. Excluya el financiamiento recibido; las ventas de refacciones, dividendos, donaciones, subvenciones, ingresos por operaciones financieras y la venta de activos no operativos.

VIII. INGRESOS
(Del 1 de enero al 31 de diciembre de 2008)

NO INCLUYA EL IVA NI LOS ACTIVOS FIJOS	VALOR (Pesos)	PERIODO	TOTAL (Pesos)
	E	F	A
M_{100} ¿Cuánto fue el ingreso por la reventa de mercancías?			
M_{111} ¿Cuánto fue el ingreso por comisiones sobre ventas?			
M_{100} ¿Cuánto fue el ingreso por la renta de locales, oficinas, maquinaria y mobiliario?			
M_{200} ¿Cuánto fue el ingreso por la prestación de servicios?			
M_{100} ¿Cuánto cobró por acuñación o transformar materias primas propiedad de terceros?			
M_{110} ¿Cuánto fue el ingreso por las ventas de productos elaborados, manufacturados o fabricados?			
M_{100} ¿Cuánto fue el valor de los productos que elaboró no vendió durante 2008?			
M_{100} ¿Qué otros ingresos obtuvo por sus actividades?			
M_{100} TOTAL de ingresos			
M_{101} IVA cobrado			

Periodos: Anual = A, Semestral = S, Cuatrimestral = C, Trimestral = T, Bimestral = B, Mensual = M, Quincenal = Q, Semanal = E, Diario = D

IX. INTERESES COBRADOS, SUBSIDIOS Y DONACIONES
(Del 1 de enero al 31 de diciembre de 2008)

NO INCLUYA EL IVA NI LOS ACTIVOS FIJOS	VALOR (Pesos)	PERIODO	TOTAL (Pesos)
		E F	A
N ₁₀₀ ¿Cuánto recibió de ingresos por operaciones financieras de préstamos y otros conceptos similares, incluya intereses, dividendos y rendimientos?			
N ₂₀₀ ¿Cuánto recibió de subsidios?			
N ₃₀₀ ¿Cuánto recibió de cuotas, aportaciones, donaciones y otros ingresos no derivados de la actividad?			
N ₀₀₀ TOTAL			

Ejemplos de otros ingresos no derivados de la actividad:

- Transferencias de recursos por parte de empresas y organizaciones internacionales para apoyar, fomentar o estimular la producción de unidades económicas pequeñas o en incubación.

Cuando un establecimiento cubre todos sus gastos de operación (remuneraciones, costos de producción, administración y pago de impuestos) obteniendo un excedente de ingresos, se dice que opera con ganancias; cuando sus ingresos no alcanzan a cubrir sus gastos, se dice que opera con pérdidas y cuando sus gastos son iguales a sus ingresos se dice que opera sin pérdida ni ganancia.

Anote la cantidad de dinero o porcentaje de ganancia o pérdida.

X. GANANCIA O PÉRDIDA
(Del 1 de enero al 31 de diciembre de 2008)

Número	VALOR (Pesos)	PERIODO	PORCENTAJE
		E F	G
O ₁₀₀ Este establecimiento operó: 1) con ganancia (utilidad) 2) con pérdida 3) Sin pérdida ni ganancia			
Pase a la pregunta P ₁₀₀			
O ₁₂₀ ¿De cuánto fue la ganancia o pérdida en cantidad de dinero o porcentaje?			

Periodos: Anual = A, Semestral = S, Cuatrimestral = C, Trimestral = T, Bimestral = B, Mensual = M, Quincenal = Q, Semanal = E, Diario = D

En esta sección le solicitaré información sobre sus inventarios o existencias; así como el valor de la maquinaria y equipo de producción.

Existencias o inventarios. Es el valor de los productos, mercancías y materiales de trabajo que tenía almacenados, en exhibición o en proceso de producción al inicio y al final del año 2008.

Activos fijos. Son las máquinas, equipos, construcciones, instalaciones de todo tipo, que tienen una vida útil mayor a un año y que por su costo o duración no cambian con frecuencia.

Maquinaria y equipo. Es el valor de la maquinaria y equipo mecánico, eléctrico, computarizado o de otro tipo, vinculado directamente con la realización de la actividad y tareas auxiliares. Excluya el equipo de cómputo.

Bienes inmuebles. Es el valor de locales, oficinas, terrenos y otros inmuebles.

Unidades y equipo de transporte. Es el valor de los vehículos empleados para entregar productos; transportar los insumos comprados y al personal; ejemplos: automóviles, camiones, motocicletas y otros vehículos utilizados para transportar mercancías o personas, fuera del establecimiento. Excluya montacargas.

Equipo de cómputo y periféricos. Es el valor de las computadoras y otros equipos de procesamiento de datos, como: impresoras, digitalizadoras, escáner, etcétera. Excluya el software.

Mobiliario, equipo de oficina y otros activos fijos. Es el valor de góndolas, anaqueles, escritorios, sillas y otros muebles de las oficinas o el establecimiento.

Elaboración de activos fijos para uso propio. Incluye el valor de los materiales y mano de obra que utilizó durante el 2008 para producir o mejorar locales, maquinaria, mobiliario, para uso del establecimiento.

La valoración de los activos fijos producidos para uso propio debe ser igual a la suma de la mano de obra y los materiales utilizados para su producción.

XI. EXISTENCIAS O INVENTARIOS

2008	
1 de enero	31 de diciembre
A	B
(Pesos)	
P ₁₀₀ ¿Qué valor tenían las existencias o inventarios de mercancías compradas para reventa?	
P ₂₀₀ ¿Qué valor tenían las existencias de materias primas y materiales para la prestación del servicio?	
P ₃₀₀ ¿Qué valor tenían las existencias de productos elaborados?	
P ₃₄₀ ¿Qué valor tenían las existencias de productos en proceso?	
P ₆₀₀ ¿Qué valor tenían las existencias de otros bienes?	
P ₀₀₀ TOTAL de existencias	

XII. ACTIVOS FIJOS

2008	
El día 31 de diciembre de 2008	Del 1 de enero al 31 de diciembre 2008
A	C
(Pesos)	
¿Cuál fue el valor de la maquinaria y equipo de producción?	
Q ₁₀₀ ¿Cuál fue el valor de los edificios, oficinas y otros bienes inmuebles?	
Q ₁₁₀ ¿Cuál fue el valor de las unidades y equipo de transporte?	
Q ₁₆₀ ¿Cuál fue el valor del equipo de cómputo y periféricos?	
Q ₁₉₀ ¿Cuál fue el valor del mobiliario, equipo de oficina y otros activos fijos?	
Q ₀₀₀ TOTAL de activos fijos	

O₂₀₀ Si elaboró activos fijos para uso propio durante 2008, ¿Cuál fue su valor (en pesos)?

En esta parte del cuestionario le preguntaré si obtuvo créditos o préstamos para operar el negocio y si utiliza cuentas bancarias.

Financiamiento. Conjunto de recursos monetarios para llevar a cabo una actividad económica, con la característica de que se trata de sumas tomadas a préstamo para la operación o inversión de la unidad económica.

Fuentes de financiamiento. Son todas las fuentes de las que obtuvo dinero para la operación del negocio.

Créditos o préstamos. Es el otorgamiento de dinero o bienes que se hace por un banco o persona al establecimiento, con la promesa de ser devueltos en un plazo señalado y generalmente con el pago de una cantidad de dinero (intereses) por el uso de los mismos.

Créditos de proveedores. Es la entrega de mercancías por parte de proveedores sin exigir el pago de manera inmediata. Excluya la mercancía que se deja a consignación.

Créditos o apoyo de familiares en el extranjero. Es el dinero proveniente del extranjero que se utilizó para financiar la operación o inversión de la unidad económica.

Créditos de programas gubernamentales. Son los créditos, préstamos o financiamiento otorgados por instituciones gubernamentales en cualquiera de sus niveles: federal, estatal o municipal. Ejemplos: créditos otorgados por fondos de oportunidades, programas de fomento económico, programas de la banca de desarrollo y Secretaría de Economía.

Usos de los créditos, préstamos o financiamiento. Son todos los usos a los que destinó el dinero obtenido en préstamo o financiamiento para el funcionamiento o crecimiento del negocio.

O ₅₁₁	¿Obtuvo préstamos o financiamiento de bancos, familiares, proveedores o del gobierno para la operación del negocio?	1 = Si / 2 = No	→	pase a la pregunta O ₅₃₁	Número A
O ₅₂₁	¿De dónde provienen los créditos, préstamos o financiamiento?				Señale con una "X" A
O _{521.1}	Bancos				
O _{521.2}	Cajas de ahorro popular				
O _{521.3}	Proveedores (incluye contado comercial)				
O _{521.4}	Familiares o amigos que viven en México				
O _{521.5}	Familiares o amigos que viven en el extranjero				
O _{521.6}	Gobierno				
O _{521.7}	Prestatistas privados o agiotistas				
O _{521.9}	Otros O ₄₆₁ _____				Clave A
O ₅₃₁	Marque con una "X" los usos de los créditos, préstamos o financiamiento recibido			O ₅₂₂ Indique la clave de la fuente principal	Señale con una "X" A
O _{531.1}	Creación o apertura del negocio				
O _{531.2}	Equipping o ampliación del negocio				
O _{531.3}	Compra de local o vehículo				
O _{531.4}	Pago de deudas				
O _{531.5}	Adquisición de insumos (mercancías, materiales, materias primas, etc.) en el mercado nacional				
O _{531.6}	Adquisición de insumos (mercancías, materiales, materias primas, etc.) en el mercado extranjero				
O _{531.7}	Pago de salarios				
O _{531.9}	Otros O ₄₆₂ _____ especifique				Clave A
O ₅₃₃	¿El establecimiento recibió aportaciones o financiamiento del propietario o de los socios?	1 = Si / 2 = No		O ₅₃₂ Indique la clave del uso principal	Número A

Nota: Si la opción O_{521.1} fue seleccionada (obtuvo préstamos de bancos), pase a la pregunta O₅₅₁

O₅₄₁	Marque con una "X" las causas por las que carece de crédito bancario	Señale con una "X"
O_{541.1}	No creo cumplir con los requisitos	<input type="checkbox"/>
O_{541.2}	No lo he necesitado	<input type="checkbox"/>
O_{541.3}	Porque son altos los intereses	<input type="checkbox"/>
O_{541.4}	Porque las instituciones me quedan muy lejos	<input type="checkbox"/>
O_{541.5}	Desconozco el procedimiento para solicitarlo	<input type="checkbox"/>
O_{541.6}	No confío en los bancos	<input type="checkbox"/>
O_{541.7}	Si lo he solicitado, pero no me lo han otorgado	<input type="checkbox"/>
O_{541.8}	Otras O₅₀₃ _____ especifique	<input type="checkbox"/>
	O₅₄₂ Indique la clave de la causa principal	Clave <input type="text"/>
O₆₅₁	¿Esta razón social o entidad propietaria tuvo alguna cuenta bancaria (de cheques, ahorro o inversión) para la operación de establecimiento? 1 = Sí 2 = No	Número <input type="text"/>
O₆₆₁	Marque con una "X" los motivos por los que esta razón social no tiene alguna cuenta bancaria	Señale con una "X"
O_{661.1}	Desconozco el procedimiento para solicitarla	<input type="checkbox"/>
O_{661.2}	No me hizo falta	<input type="checkbox"/>
O_{661.3}	Porque las comisiones o cuotas son altas	<input type="checkbox"/>
O_{661.9}	Otros O₅₀₄ _____ especifique	<input type="checkbox"/>
	O₅₉₂ Indique la clave del motivo principal	Clave <input type="text"/>
F₃₁₆	¿Qué porcentaje de sus ventas fueron por Internet, correo electrónico o mediante el hospedaje de una página web, durante 2008?	Porcentaje <input type="text"/>

Si obtuvo créditos o préstamos de bancos, deje estas opciones en blanco.

Si no obtuvo créditos o préstamos de bancos, señale una o más opciones por las que no contó con créditos de bancos.

Cuenta bancaria. Es un contrato mediante el cual una persona deposita dinero en un banco que puede ir retirando en cualquier momento, o seguir los plazos establecidos según corresponda, en efectivo o por medio de cheques, ofreciéndole además el servicio de caja, ya que las sumas depositadas permanecen a la orden del depositante, pudiendo disponer de ellas en cualquier momento.

C₆₁₁

CUESTIONARIO MUSEOS Y ARTE

C₆₁₁

QUESTIONARIO MUESTRA

C₉₁₁

CUESTIONARIO MUESTRA A

C₆₁₁

QUESTIONARIO MUSEISTAS

A) DATOS DEL INFORMANTE

A) DATOS DEL INFORMANTE

Claves del puesto		especifique
1. Dueño o propietario	Gerente, administrador o directo	
2. Contador interno		
3. Contador externo		
4. Familiar del dueño		
5. Encargado		
6. Empleado		
7. Otro C		

B) DATOS DEL ÁREA DE RESPONSABILIDAD

fechadura de campo: C_{722} 

Códigos de campo

01 = Levantado
09 = Cierre por huelga
10 = Cierre temporal
11 = Ausencia del informante
15 = Negativa
21 = Entrevista incompleta
22 = Otra causa de pendiente
26 = Pendiente para captarse por internet
29 = Cierre por horario
34 = Ya se levantó por internet

REPUBLIC OF TUNISIA

**MINISTRY OF DEVELOPMENT AND
INTERNATIONAL COOPERATION**

Institut National de la Statistique*National Identification*

--	--	--	--	--	--	--	--	--	--

List :

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NATIONAL SURVEY OF ECONOMIC ACTIVITIES IN SMALL ESTABLISHMENTS, 2002**A - Identification****A - 1. Name**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Name or company name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

A - 2. Address

Road no.

--	--	--	--	--

Road type

--	--	--	--	--	--	--	--	--	--

Road description

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Postal code and telephone

--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

Locality

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Governorate

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Delegation

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Sector

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Commune

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

District

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

A - 3. Work place

--

1. Establishment

--

3. Market

--

5. Itinerant

--

2. Home

--

4. Construction site

--

6. Other

B - Characteristics of establishment**B - 1. Legal status**

--

1. Individual proprietor

--

3. Limited liability company

--

5. Cooperative

--

7. Non-profit institution

--

2. Incorporated company

--

4. De Facto company

--

6. Partnership

--

8. Other

B - 2. Activity

1. Main activity :

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. Secondary activities

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

B - 3. Type of accounts

--

1. Accounts held by establishment

--

3. Receipts and expenditure book

--

5. Other

--

2. Accounts held by an external accountant

--

4. No accounts held

B - 4. Others

--	--

No. of employees

Date set up

day		month				year			

Date operational

day		month				year			

The provisions of the law No. 99-32 of April 13, 1999, relating to the national statistical system, are applicable to the survey; in particular **Article 5** relating to the statistical confidentiality means that individual data from questionnaires of statistical surveys cannot be revealed. In no case, these data will be used for purposes other than statistical, or for fiscal, economic or social purposes. Further, the officers from the statistical department are bound to professional confidentiality.

Article 6 relating to the obligation of correct answers and within the time limits to the questionnaires of the statistical surveys.

Article 26 relating to the sanctions by means of a fine for any person who refuses to answer the questionnaires of the statistical surveys or who gives incomplete or inaccurate answers.

C - EMPLOYMENT AND WAGES

C 1 - Permanent employees during the last month (including the employer and permanent part-time employees)

No.	Employment characteristics						Wages and salaries					
	First name	Sex	Age	Status	Educational level	Training level	Occupation	Mode of pay	No. of working periods during the month	Net salary during the period (dinars)	Monthly salary	Income in kind during the year (dinars)
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
TOTAL												

- Is there a shortage of labour in the sector?

YES

NO

Status	Educational level	Training level	Occupation	Mode of pay
1 - Own account worker	1 - Primary	1 - CFP	1 - Manager	1 - Daily
2 - Employer	2 - Secondary	2 - CAP	2 - Cadre	2 - Weekly
3 - Partner	3 - Tertiary	3 - BTP	3 - Professionals and technicians	3 - Fortnightly
4 - Employee	4 - Without education	4 - BTS	4 - Clerks	4 - Monthly
5 - Family worker		5 - On the job training	5 - Skilled and craft workers	5 - Commission
6 - Apprentice		6 - Other professional training	6 - Workers and semi-skilled workers	6 - Task
7 - Other		7 - Without professional training	7 - Helpers	7 - Piece rate
			8 - Apprentices	8 - Other (specify)
			9 - Other	

C 2 - Casual or seasonal employment

Did you employ casual or seasonal employees for particular periods during the last 12 months?

YES ☐ NO ☐

If YES complete the table below :

Period	Particular periods	Number of casual or seasonal employees	Mode of pay	Number of periods of work during the	Net salary for period (D)	Monthly salary (dinars)	Yearly salary (dinars)
TOTAL							

C 3 - Does the establishment contract out work or have recourse to outworkers for certain work?

YES ☐ NO ☐

If YES complete the table below :

N.A.T Code	Type of work	Volume of work	No. of outworkers			Salary scale	Amount for the last month (dinars)
			Male	Female	Total		
TOTAL							

C 4 - Social security contributions

Amount of employers' contributions and employees' contribution paid to CNSS in the last quarter :
- of which employees' contributions :

C 5 - Duration of activity during the year :

- 1 - Working hours per day H
- 2 - Closing days per week J
- 3 - Annual leave (establishment closed) J
- 4 - Other non-working days (specify) J

D - PRODUCTION AND PURCHASES

D 1 - Manufacturing and artisanal activities

D1.1 - Goods produced and sold :

What was your turnover in the last month?

C.P.C Code	Description of product	Period	Unit	Quantity	Price per unit	Value (dinars)	Monthly value (dinars)
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
TOTAL							

D1.2 - Purchases

What was the value of your purchases in the last month?

C.P.C Code	Nature of product	Period	Unit	Quantity	Price per unit	Value (dinars)	Monthly value (dinars)
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
<input type="text"/>							
TOTAL							

Period : 1 - Day 2 - Week 3 - Fortnight 4 - Month

D1.3 - What are the constraints which hinder improvement in the quality of your goods?

1 - Quality of raw materials

2 - Quality of labour

3 - Working conditions of machinery/equipment

4 - Other (Specify)

D2- Wholesale and retail trade

D2.1- Goods purchased and sold in same condition

For goods sold in same condition as purchased, specify the profit margin, value of purchases, and value of sales for the last month.

[illegible]

D2.2- Purchases:

What was the value of purchases consumed for the last month?

C.P.C code	Nature of goods	Period	Unit	Quantity	Unit price	Value (dinars)	Monthly Value
TOTAL							

Period : 1 - Day 2 - Week 3 - Fortnight 4 - Month

D3- Services

D3.1- Services provided

What was the value of your turnover for the last month?

C.P.C code	Type of service	Period	Unit	Quantity	Unit price	Value (dinar)	Monthly Value (dinar)
Total							

D3.2- Purchases:

What was the value of your purchases for the last month?

C.P.C code	Type of service	Period	Unit	Quantity	Unit price	Value (dinar)	Monthly Value (dinar)
Total							

Period : 1- Day

2 - Week

3 - Fortnight

4 - Month

D4.1- Information related to the activity

Yes

No

D4.2 - How do your prices compare to those of your competitors?

- 1- Is there any provisioning difficulty?
- 2- Is there any marketing difficulty?
- 3- Does the business sell to administration?
- 4- Does the establishment export its products?

- 1- Higher prices
- 2- Same prices
- 3- Lower prices

D4.3 - Who is your main competitor?

- 1- The parallel market
- 2- Small businesses
- 3- Large companies
- 4- Other companies

D4.4 - How do you fix the price of your main goods or services'

- 1- A fixed percentage over the cost price
- 2- Bargaining with customers
- 3- In relation to competitors' price
- 4- Official price
- 5- Others (Specify)

D5- Production rate

How has your business evolved over the last year?

[illegible]

E- OTHER COSTS

E1-Running cost :

E1.1-Regular charges

What are the total regular charges of your establishment?
(refer, if possible, to the last receipts and invoices)

C.P.C code	Charges	Period	Amount (dinars)	Yearly amount (dinars)
7 | 0 | 2 | 0 | 0 | 0	Rent			
4 | 1 | 0 | 0 | 0 | 1	Water bill			
4 | 0 | 1 | 0 | 0 | 3	Electricity bill			
1 | 1 | 1 | 0 | 1 | 2	Natural gas bill			
6 | 4 | 2 | 0 | 3 | 0	Telephone bill			
6 | 6 | 0 | 0 | 0 | 0	Insurance premium			
6 | 5 | 1 | 2 | 0 | 0	Bank charges			
TOTAL				

E1.2- Other running costs:

What are the other running costs of your establishment?

C.P.C code	Charges	Period	Amount (dinars)	Yearly amount (dinars)
| | | | | | |	Tools			
| | | | | | |	Transport			
| | | | | | |	Repairs (vehicles; materials; buildings)			
| | | | | | |	Fees (lawyer; others)			
| | | | | | |	Other charges (Specify)			
TOTAL				

E2- Taxes

Type of taxes	Yearly amount (dinars)
VAT on turnover	
Other indirect taxes	
Personal and corporate income tax	
Tax withheld on wages	
Subsidies	

F-EQUIPMENTS and INVESTMENTS

F1 - In the last 12 months, have you bought any equipment or carried out major repairs at your estate?

Code	Type	Amount (dinars)
<input type="text"/>	Land	
<input type="text"/>	Building/working place	
<input type="text"/>	Trading funds	
<input type="text"/>	Vehicles	
<input type="text"/>	Materials and equipments (Specify) :	
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>	Major repairs (Specify) :	
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
Total		

F2 - Sources of financing for investments (percentage)

- | | |
|------------------------------------|----------------------|
| 1- From business profit | <input type="text"/> |
| 2- Other own resources | <input type="text"/> |
| 3- Assistance and public donations | <input type="text"/> |
| 4- Bank loans | <input type="text"/> |
| 5- Other sources | <input type="text"/> |

F3 - Is there any difficulty in getting loans ?

- | | Yes | No |
|---------------------------------|----------------------|----------------------|
| F3.1 - To finance investments | <input type="text"/> | <input type="text"/> |
| F3.2 - To finance running costs | <input type="text"/> | <input type="text"/> |

G - How would you rate the quality of the following services ?

- | | Very Satisfied | Satisfied | Not Satisfied | No opinion |
|-------------------------|----------------------|----------------------|----------------------|----------------------|
| - Public administration | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - Post | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - Telecommunications | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - STEG | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - SONEDE | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - ONAS | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - Banks | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - CNSS | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - Employment Service | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - Transport services | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

National Identifier :

[illegible]

EXPENDITURE		Amount (dinars)	RECEIPTS	Amount (dinar)
D12	Purchase of materials for manufacturing and artisanal activity	<input type="text"/>	D11 Goods produced and sold	<input type="text"/>
D21	Purchase of goods for trade activity	<input type="text"/>		
D22	Purchase of raw materials for trade activity	<input type="text"/>	D21 Goods sold in same condition as purchased	<input type="text"/>
D32	Purchase of raw materials for service activity	<input type="text"/>		
(1)	Total monthly purchases (D12 + D21 + D22 + D32)		D31 Services rendered	<input type="text"/>
(2)	Total annual purchases = (1) x 12	<input type="text"/>	(5) Monthly total (D11 + D21 + D31)	<input type="text"/>
E11	Regular charges	<input type="text"/>		
E12	Other running costs	<input type="text"/>		
(3)	Running costs (E11 + E12)	<input type="text"/>		
(4)	Value added = [(6) - (2) - (3)]	<input type="text"/>		

EXPENDITURE		Amount (dinars)	RECEIPTS		Amount (dinar)
C1-	Wages of permanent employees		(11)	Value added	
C2-	Wages of casual employees and workers		(12)	Running cost subsidy	
C3-	Cost of sub-contracted work				
(1)	Monthly wages in cash (C1 + C2 + C3)				
(2)	Annual wages in cash = (1) x 12				
(3)	C1 - Benefits in kind				
(4)	Net annual wages = [(2) + (3)]				
(5)	C4 - Social Security contributions				
(6)	Annual social security contributions = (5) x 4				
(7)	E2 - Tax withheld on wages and salaries				
(8)	E2 - Indirect taxes (VAT/C.A + other indirect taxes)				
(9)	E2 - Direct taxes (IRPP or IS)				
(10)	Profit/loss = [(13) - (4) - (6) - (7) - (8) - (9)]		(13)	Annual total = [(11) + (12)]	

1992 CENSUS OF ECONOMIC ACTIVITIES IN FIXED ESTABLISHMENTS, BENIN

ILO

A

UNDP

1. In which year did you start your present activity? 19

2. What is the main activity of this establishment?
(For trade activity, specify the goods)

3. Do you have electrical or motorised machines in this establishment? { Yes 1
No 2

4. Does this establishments belong to :
- an individual proprietor (and his family)? 1
- a partnership? 2
- a cooperative? 3
- a company? 4

5. How many persons work for this establishment?
- Manager
- Associates
- Apprentices
- Family workers
- Permanent paid employees
- Casual workers (less than 1 month)
- TOTAL

6. Do you keep :
- An order book 1
- A purchases and sales book 2
- A complete set of accounts 3
- No accounts at all 4

7. Are you on the trade register? { Yes 1
No 2

8. Are you registered at the Social Security Office in Benin? { Yes 1
No 2

9. Do you have any other activity from which you derive incor { Yes 1
No 2

IF YES, which ones?
(As paid employee) { - public sector 1
- private sector 2
(As self employed) { - manufacturing 3
- trade 4
- services 5
- agriculture, animal rearing 6
(Others) { - property and transfer income 7
- others 8

10. Entrepreneur: a) Name & first name
b) Sex { Male 1
Female 2
c) Age
d) Educational attainment { none 1
- at least 3rd level primary (CE1) 2
- at least 5th level primary (CM1) 3
- completed primary (CM2) 4
- at least 3rd level secondary 5
- completed secondary 6
- 3rd year tertiary 7
- degree or more 8

11. For construction activities, specify the contact address:

Order Number

--	--	--

Questionnaire Number

--	--	--	--

A

12. Address of establishment (or contact address) :

13. Location of establishment:

- Town
- District
- Block
- Plot

14. Inside/outside market

- fixed stall at market
- outside market

	1
	2

15. Working place

- concrete building ...
- barrack
- veranda
- yard
- closed land
- construction site....
- other

	1
	2
	3
	4
	5
	6
	7

REMARKS :

- Name of enumerator
- Date of census
- Language used during interview

- Name of controller

- Date of verification

1992 CENSUS OF ECONOMIC ACTIVITIES IN FIXED/MOBILE UNITS, BENIN

ILO

B

UNDP

1. Activity _____

--	--	--	--

2. (For trade activity) Type of goods sold: _____

--	--

3. Sex of respondent

Male ...
Female ...

	1
	2

4. In which year did you start your present activity?

19

--	--

5. Do you have any other activity from which you derive income?

Yes ...
No ...

	1
	2

IF YES, which ones?

(as paid employee)	- public sector		1
	- private sector		2
(as self employed)	- manufacturing		3
	- trade		4
	- services		5
	- agriculture, animal rearing		6
(Others)	- property and transfer income		7
	- others		8

6. d) Educational attainment

- None

- at least 3rd level primary (CE)

- at least 5th level primary (CM)

- completed primary (CM2)

- at least 3rd level secondary

- completed secondary

- 3rd year tertiary

- degree or more

	1
	2
	3
	4
	5
	6
	7
	8

7. Age of respondent

--	--

8. Do you live in this town?

Yes ...
No ...

	1
	2

IF NO, where do you live? ...

a village ...
another town ...

	1
	2

9. Name and first name of respondent: _____

Order Number

--	--	--

Questionnaire Number

--	--	--	--

B

10. Address of establishment (or contact address) :

--

11. Location of establishment:

- Town
- District
- Block
- Plot

12. Inside/outside market

- at the market or surroundings ...
- outside the market ...

	1
	2

REMARKS :

- Name of enumerator
- Date of census
- Language used during interview

--

- Name of controller

- Date of verification

--

--

1992 CENSUS OF ECONOMIC ACTIVITIES IN MOBILE/ITINERANT UNITS, BENIN

ILO

C

UNDP

1	1 Activity _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2 (For trade activity) Type of goods sold: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3 Sex of respondent	Male .. <input type="checkbox"/>	1			
		Female .. <input type="checkbox"/>	2			
	4 In which year did you start your present activity?	19	<input type="text"/>	<input type="text"/>		
	5 Educational attainment	- none	<input type="checkbox"/>	1		
		- at least 3rd level primary (CE1)	<input type="checkbox"/>	2		
		- at least 5th level primary (CM1)	<input type="checkbox"/>	3		
		- completed primary (CM2)	<input type="checkbox"/>	4		
		- at least 3rd level secondary	<input type="checkbox"/>	5		
		- completed secondary	<input type="checkbox"/>	6		
		- 3rd year tertiary	<input type="checkbox"/>	7		
		- degree or more	<input type="checkbox"/>	8		
	6 Age of respondent	<input type="text"/>	<input type="text"/>			
2	1 Activity _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2 (For trade activity) Type of goods sold: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3 Sex of respondent	Male .. <input type="checkbox"/>	1			
		Female .. <input type="checkbox"/>	2			
	4 In which year did you start your present activity?	19	<input type="text"/>	<input type="text"/>		
	5 Educational attainment	- none	<input type="checkbox"/>	1		
		- at least 3rd level primary (CE1)	<input type="checkbox"/>	2		
		- at least 5th level primary (CM1)	<input type="checkbox"/>	3		
		- completed primary (CM2)	<input type="checkbox"/>	4		
		- at least 3rd level secondary	<input type="checkbox"/>	5		
		- completed secondary	<input type="checkbox"/>	6		
		- 3rd year tertiary	<input type="checkbox"/>	7		
		- degree or more	<input type="checkbox"/>	8		
	6 Age of respondent	<input type="text"/>	<input type="text"/>			
3	1 Activity _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2 (For trade activity) Type of goods sold: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3 Sex of respondent	Male .. <input type="checkbox"/>	1			
		Female .. <input type="checkbox"/>	2			
	4 In which year did you start your present activity?	19	<input type="text"/>	<input type="text"/>		
	5 Educational attainment	- none	<input type="checkbox"/>	1		
		- at least 3rd level primary (CE1)	<input type="checkbox"/>	2		
		- at least 5th level primary (CM1)	<input type="checkbox"/>	3		
		- completed primary (CM2)	<input type="checkbox"/>	4		
		- at least 3rd level secondary	<input type="checkbox"/>	5		
		- completed secondary	<input type="checkbox"/>	6		
		- 3rd year tertiary	<input type="checkbox"/>	7		
		- degree or more	<input type="checkbox"/>	8		
	6 Age of respondent	<input type="text"/>	<input type="text"/>			

Order Number

--	--	--

Questionnaire Number

--	--	--	--	--

C

7. Location of activity:

{ - Town
- District

8. Inside/outside market

{ - at the market or surroundings
- outside the market

	1
	2

1 REMARKS

2 REMARKS

3 REMARKS

- Name of enumerator:

- Date of census:

-Language used during interview:

- Name of controller

- Date of verification

Census questionnaire
number

--	--	--	--	--

Survey questionnaire
Number

--	--	--	--

Order No

--	--	--

1992 SURVEY OF ECONOMIC ACTIVITIES IN THE INFORMAL SECTOR, BENIN

MANUFACTURING AND SERVICES

THE STATISTICS ACT: "According to the Act 51/7 of 7 June 1951, information collected at the census of establishments are obligatory and confidential. The results are published only in form. In no case, the information can be used for tax purposes or economic sanctions" anonymised

**International Labour Office (ILO)
United Nations Development Programme (UNDP)
Institut National de la Statistique et de l'Analyse Economique (INSAE)**

1. Address of establishment

2. Location of establishment

Town
District
Block
Plot

3. Name and first name of entrepreneur (Tradesname/name of entrepreneur)

4. To whom does this establishment belong:

- yourself or your family
- yourself and partners
- a corperative or association
- to someone who pays you a salary.....

1
2
3
4

5. What is the main activity of this establishment?

--	--	--	--

6. Do you have any other activity from which you derive income?

→ (If No, goto Q. 8)

Yes	1
No	2

7. If Yes, which ones?

→ What is the monthly revenue?

- Work as paid employee Public sector
Private formal sector
Manufacturing
Trade
Self employed Services
Agriculture / animal rearing ...
- Work with a small artisan, trader, farmer.....
Dividend/interest
- Others Pension
Rent (building, land & machinery)

1	Less than 5,000	1
2	5,000 to 9,999	2
3	10,000 to 14,999	3
4	15,000 to 19,999	4
5	20,000 to 29,999	5
6	30,000 to 39,999	6
7	40,000 to 49,000	7
8	50,000 to 59,000	8
9	100,000 or more	9
10		

8. How old were you when you started to work for a salary or wage?

(Exclude apprenticeship and training period)

--	--

9. What was your first paid job / activity?

--	--	--	--

10. What were your previous activities prior to this one?

None

--

No of times

Total no
of years

a) Salary earner - in the public sector
- in the formal private sector.....
- working as subcontractor/outworker

b) Own account - artisanal products/services.....
- retail trade
- agriculture

c) With an artisan, small trader or farmer

--	--	--

--	--

d) Number of times and months unemployed.....

--	--	--

--	--

11. EMPLOYMENT CHARACTERISTICS OF THE ESTABLISHMENT

Employment Category		AGE	SEX M = 1 F = 2	Education Level (B)	Training level (C)	Years of service in the establishment	No of hours worked last week	Wages for last <u>month</u>			Mode of pay (D)
First name	(A)							Cash (FCFA)	In kind (FCFA)	Total (FCFA)	
1. Manager											
2.											
3.											
4.											
5.											
6.											
7.											
TOTAL											

(A) Category M-O

P) Manager
AS) Associate
SP) Permanent employee
SO) Casual employee
AF) Unpaid family worker
AP) Apprentice

(B) Education level

- 1) None
- 2) At least 3rd level primary (CE1)
- 3) At least 5th level primary (CMI)
- 4) Completed primary
- 5) At least 3rd level secondary
- 6) Completed secondary
- 7) Higher studies

(C) Training level

- 1) Self apprenticeship
- 2) Apprenticeship with a trade worker
- 3) Within an establishment formal/public/private
- 4) Professional institution/Public/Private
- 5) Advanced training

(D) Mode of pay

- 1) Fixed salary
- 2) Piece rate
- 3) Profit based
- 4) Commission
- 5) Pocket money
- 6) Other

12. WHAT ARE THE MAIN GOODS /SERVICES SOLD?

Main goods / services	Selling price (price range) per unit (FCFA)	Quantity Produced			Amount Received (FCFA)		
		Daily	Last Week	Last Month	Daily	Last Week	Last Month
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL							

13. WHAT ARE THE MAIN RAW MATERIALS USED?

Raw materials and intermediate consumption	Suppliers (give <u>percentage</u>)			Value of materials used (FCFA)		
	Informal sector	Formal sector	Recycled	Daily	Last Week	Last Month
1						
2						
3						
4						
5						
6						
7						
(8)	Raw Materials : sub-total					
9						
10						
11						
12						
13						
(14)	Intermediate consumption Sub-Total					
(15)	TOTAL (8 + 14)					

14. WHAT ARE THE OTHER RUNNING COSTS OF THE ESTABLISHMENT?

Costs & Charges	MONTHLY VALUE (FCFA)		
	GOOD MONTH	BAD MONTH	LAST MONTH
1. Electricity			
2. Other Fuel			
3. Water			
4. Telephone			
5. Hire of machines, services/subcontracted work			
6. Repairs machines, tools, vehicles			
7. Transport costs			
8. Interests			
9. Rent			
10. Other expenses			
11. Tax - License BIC VAT			
TOTAL			

15. HOW MUCH DO YOU ESTIMATE YOUR SALES, IN A GOOD, AVERAGE AND BAD MONTH?

→ (write the value in FCFA and then put a cross at the corresponding month)

MONTH	FCFA	J	F	M	A	M	J	J	A	S	O	N	D	TOTAL
GOOD														
AVERAGE														
BAD														

16. DURING THE PERIODS OF HIGH ACTIVITIES, WHICH MEASURES DO YOU TAKE?

Employ more	- Casual workers	<input type="checkbox"/>	1	} → How many at the last time	{	<input type="checkbox"/>
	- Apprentices	<input type="checkbox"/>	2			<input type="checkbox"/>
	- Family worker	<input type="checkbox"/>	3			<input type="checkbox"/>
- Increase working hours	<input type="checkbox"/>	4	→ How many hours per week ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
- Increase Wages & salaries	<input type="checkbox"/>	5	→ By how much, as a percent ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
- Diversify the production	<input type="checkbox"/>	6					
- Subcontract to other establishments...	<input type="checkbox"/>	7	→ Artisans, (1), Industrial, (2)			<input type="checkbox"/>	
- Ask for credit facilities	- in kind.. <input type="checkbox"/>	8	→ From Whom? Trade wholesale (1), retail (2)	<input type="checkbox"/>			
	- in cash.. <input type="checkbox"/>	9	→ From Whom?			<input type="checkbox"/>	
- None	<input type="checkbox"/>	10					

17. WHO ARE YOUR MAIN CUSTOMERS? (give the distribution in percentage)

- | | |
|---|--|
| - Small artisans, trade persons or farmers | |
| - Public officers or employees of the formal sector | |
| - Others persons | |
| - Commission agents | |
| - Order from large shops or industries | |
| - Order from government institutions | |
| TOTAL | |

	1
	2
	3
	4
	5
	6

Percentage

100%

18. HOW DO YOU GET CUSTOMERS?

- Wait for them
- Visit to potential clients
- Publicity by current customers
- Publicity by family and friends
- Publicity through media

	1
	2
	3
	4
	5

19. HOW DO YOU FIX THE SELLING PRICE OF YOUR GOODS OR SERVICES?

- Bargain with the customers
- According to current difficulties and needs
- Compare with other small establishments
- Compare with the price of the formal sector
- Based on production cost

	1
	2
	3
	4
	5
	6
	7
	8
	9
	10

If 5 : HOW?

- Cost of labour
- Cost of raw materials
- General costs.....
- Machinery depreciation
- Profit margin

20. DOES IT HAPPEN THAT YOU SELL YOUR GOODS / SERVICES AT A LOSS?

- Never
- Sometimes....
- Often.....

	1
	2
	3

21. DO YOU KEEP RECORDS?

- None
- An order book
- A purchase/sales book ...

	1
	2
	3

22. AS MANAGER OF YOUR ESTABLISHMENT, DO YOU PARTICIPATE.....

- in all other activities? ☐ 1 → (Go to question 23)
- in some only? ☐ 2

→ - WHICH ONES?

- ?- Marketing
 - Provisioning
 - Manufacture or provision of services
 - Training of apprentices
 - Others (specify)

3
4
5
6
7

23. IN WHICH YEAR DID YOU SET UP THIS ESTABLISHMENT?

(for those who have set up their establishment since 1 year or less, go to Q 25)

19

--	--

24. HOW MANY PERSONS WORKED IN THE ESTABLISHMENT AT THAT TIME?

- | | |
|-----------------------|-------|
| - None | ..... |
| - Manager | ..... |
| - Partners | ..... |
| - Apprentices | ..... |
| - Family workers | ..... |
| - Permanent employees | ..... |
| - Casual employees | ..... |
| - TOTAL | ..... |

[illegible]

25. HOW MUCH WOULD IT COST YOU, TODAY, TO BUY THE SAME EQUIPMENT YOU HAD AT THAT TIME?

- Machinery and equipment
- Electrical and manual tools
- Working furniture
- Land
- Construction
- Vehicles
- TOTAL

→ (for those who have set up their establishment since 1 year or less, go to Q 27)

26. WHAT INVESTMENT HAVE YOU MADE IN YOUR ESTABLISHMENT ?

INVESTMENT	NB UN	Purchase value(FCFA)	Present value (FCFA)	Status when bought (A)	Year Purchased		Source of financing (B)
					YEAR	MONTH (1991)	
Land							
Construction							
Vehicles							
MACHINERY & EQUIPMENT							
-							
-							
-							
-							
-							
ELECTRICAL TOOLS							
-							
-							
-							
OTHER TOOLS/SMALL MAT.							
Working furniture							
TOTAL							

(A) Status when bought

(B) Sources of financing

- 1) New
- 2) Second Hand
- 3) Own manufactured
- 4) Recycled

- 1) Self financing
- 2) Loan from parents
- 3) Loan from friends
- 4) Tontines

- 5) Small lender
- 6) Loan from bank
- 7) Loan from association
- 8) Assistance program
- 9) Heritage or gift

27. HOW MUCH DO YOU EVALUATE YOUR STOCK?

- Raw materials, spare parts or materials
- Finished goods from last month
- Other finished goods and work in progress
- TOTAL

(FCFA)

28. FROM WHERE DO YOU GET CREDIT FACILITIES?

(codes as per Q.26 B) ↑

29 HAVE YOU EVER TRIED TO OBTAIN A LOAN FROM THE BANK?

→ (if such loan contracted in the past, go to Q.31)

- Yes

 1
- No

 2

30. IF YOU HAVE BEEN REFUSED A LOAN OR IF YOU HAVE NEVER MADE THE REQUEST, WHAT WERE THE

- | | | |
|--|--------------------------|---|
| - Heavy procedures | <input type="checkbox"/> | 1 |
| - It is impossible to satisfy required conditions..... | <input type="checkbox"/> | 2 |
| - Insufficient or lack of guaranty | <input type="checkbox"/> | 3 |
| - The authorities not concerned by small artisans' needs | <input type="checkbox"/> | 4 |
| - Not really interested or no need for loan | <input type="checkbox"/> | 5 |
| - Have recourse to more accessible sources | <input type="checkbox"/> | 6 |

→(Go to Q.33)

31. WHAT WAS THE AMOUNT OF LOAN OBTAINED?

(FCFA)

32. HOW DID YOU USE THE LOAN?

- | | | |
|---|--------------------------|---|
| - Purchase of machinery or equipment | <input type="checkbox"/> | 1 |
| - Purchase of raw materials and spare parts | <input type="checkbox"/> | 2 |
| - Purchase of furniture | <input type="checkbox"/> | 3 |
| - Set up or extension of workplace | <input type="checkbox"/> | 4 |
| - Purchase of vehicle | <input type="checkbox"/> | 5 |
| - Other (Specify) | <input type="checkbox"/> | 6 |

33. WHAT PERCENTAGE OF YOUR SALES IS ON CREDIT?

- | | | |
|-----------------------|--------------------------|---|
| - Zero % | <input type="checkbox"/> | 1 |
| - up to 25% | <input type="checkbox"/> | 2 |
| - up to 50% | <input type="checkbox"/> | 3 |
| - more than 50% | <input type="checkbox"/> | 4 |

34. DURING THE PAST 2 YEARS, YOUR CLIENTS HAVE

- | | | |
|-------------------------|--------------------------|---|
| - Increased | <input type="checkbox"/> | 1 |
| - Decreased | <input type="checkbox"/> | 2 |
| - Remained stable | <input type="checkbox"/> | 3 |

35. WHO ARE YOUR MAIN COMPETITORS?

- | | | |
|--|--------------------------|---|
| - None | <input type="checkbox"/> | 1 |
| - Similar establishments like your own | <input type="checkbox"/> | 2 |
| - Small formal enterprises | <input type="checkbox"/> | 3 |
| - Large establishments | <input type="checkbox"/> | 4 |
| - Black market | <input type="checkbox"/> | 5 |

36. WHAT MEASURES HAVE YOU TAKEN TO STAY AHEAD OF COMPETITORS?

- | | | |
|--|--------------------------|---|
| - Reduce price | <input type="checkbox"/> | 1 |
| - Improve, or diversify the goods or the packaging | <input type="checkbox"/> | 2 |
| - Decrease the quality or quantity of inputs | <input type="checkbox"/> | 3 |
| - Personally looking for new customers | <input type="checkbox"/> | 4 |
| - Advertisement | <input type="checkbox"/> | 5 |
| - Other, (specify) | <input type="checkbox"/> | 6 |

37. WHAT ARE THE THREE MAIN DIFFICULTIES YOU ENCOUNTER IN YOUR BUSINESS?

→(indicate the order of importance)

- | | Order | Code |
|--|--------------------------|-----------------------------|
| - Reduction in number of customers | <input type="checkbox"/> | <input type="checkbox"/> 1 |
| - High competition | <input type="checkbox"/> | <input type="checkbox"/> 2 |
| - High cost or scarcity of raw materials | <input type="checkbox"/> | <input type="checkbox"/> 3 |
| - High cost or difficulty to find appropriate equipment | <input type="checkbox"/> | <input type="checkbox"/> 4 |
| - Problems in maintaining the equipment, scarcity of spare parts | <input type="checkbox"/> | <input type="checkbox"/> 5 |
| - Scarcity and high cost of skilled labour | <input type="checkbox"/> | <input type="checkbox"/> 6 |
| - Lack of infrastructure and public services | <input type="checkbox"/> | <input type="checkbox"/> 7 |
| - Taxes and other payments to government..... | <input type="checkbox"/> | <input type="checkbox"/> 8 |
| - Too many administrative procedures and controls | <input type="checkbox"/> | <input type="checkbox"/> 9 |
| - Other, specify | <input type="checkbox"/> | <input type="checkbox"/> 10 |

38. WHAT WOULD YOU NEED TO FURTHER DEVELOP YOUR ESTABLISHMENT AND INCREASE YOUR INCOME?

- | | | |
|---|--------------------------|----|
| - Access to credit to purchase equipment, raw materials or refurbishment of working place | <input type="checkbox"/> | 1 |
| - Training / technical or management assi | <input type="checkbox"/> | 2 |
| - Increasing custom | <input type="checkbox"/> | 3 |
| - Regular supply of raw materials or at better prices | <input type="checkbox"/> | 4 |
| - More qualified and stable labour | <input type="checkbox"/> | 5 |
| - More appropriate working place | <input type="checkbox"/> | 6 |
| - Better location of the workplace or in another region | <input type="checkbox"/> | 7 |
| - Improved infrastructure or public services | <input type="checkbox"/> | 8 |
| - Tax reduction | <input type="checkbox"/> | 9 |
| - Simplified administrative procedures | <input type="checkbox"/> | 10 |
| - Other, (specify) | <input type="checkbox"/> | 11 |

39. HAVE YOU TRIED TO BECOME A MEMBER OF A PROFESSIONAL ASSOCIATION OR ASSISTANCE GROUP?

- | | | |
|-------------|--------------------------|---|
| - Yes | <input type="checkbox"/> | 1 |
| - No | <input type="checkbox"/> | 2 |

→(if NO, go to Q. 42)

40. IF YES, ARE YOU AN ACTIVE MEMBER OF THE ASSOCIATION OR ASSISTANCE GROUP SUCH AS :

- | | | |
|---------------------------------------|--------------------------|---|
| - Artisans' association | <input type="checkbox"/> | 1 |
| - Chamber of commerce | <input type="checkbox"/> | 2 |
| - Mutual savings and credit uni | <input type="checkbox"/> | 3 |
| - Tontines | <input type="checkbox"/> | 4 |
| - Other (specify) | <input type="checkbox"/> | 5 |
| None | <input type="checkbox"/> | 6 |

41. WHAT ARE THE ADVANTAGES?

- | | | |
|--|--------------------------|---|
| - Protected professional interests | <input type="checkbox"/> | 1 |
| - Access to loan for production | <input type="checkbox"/> | 2 |
| - Access to loan for household expenses | <input type="checkbox"/> | 3 |
| - Access to equipment services | <input type="checkbox"/> | 4 |
| - Access to (new) grouped markets | <input type="checkbox"/> | 5 |
| - Easier access to lower prices of raw materials | <input type="checkbox"/> | 6 |
| - Other, (specify) | <input type="checkbox"/> | 7 |

42. FOR HOW MANY PERSONS (LIVING WITH YOU) ARE YOU RESPONSIBLE FOR?.....

<input type="text"/>	<input type="text"/>
----------------------	----------------------

43. HOW MANY OF THEM WORK OUTSIDE YOUR ESTABLISHMENT AND WHO DERIVE INCOME OR EARN A SALARY?

<input type="text"/>	<input type="text"/>
----------------------	----------------------

REMARKS :

- Name of interviewer	<input type="text"/>
- Date of survey	<input type="text"/>
- Name of supervisor	<input type="text"/>
- Date of verification	<input type="text"/>

SHEET FOR UNTRACEABLE UNITS

Census questionnaire number

Order No

1. Address of unit _____

2. Location of establishment

- Town
- District
- Block
- Plot

<input type="text"/>	<input type="text"/>		
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>		

3. What was the main activity of the establishment?

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------

4. Reasons for mobility (closure)

- Looking for a better site
- Demolition of working site or taken back by owner
- Public infrastructure work
- Ceased activity
- Other reasons or reasons unknown

<input type="text"/>	1
<input type="text"/>	2
<input type="text"/>	3
<input type="text"/>	4
<input type="text"/>	5

5. If activity ceased, specify the new main activity

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------



NO marque así: 1 2 3

1	<input type="radio"/>	Sí
2	<input type="radio"/>	No

B. MÓDULO DE HOGARES (para cada uno de los hogares)

(Pregunte SIEMPRE por la persona cabeza (jefe(a)) del hogar o cónyuge

Diligencie UN formulario por cada hogar

CTL2. NÚMERO DE ORDEN DEL HOGAR dentro de la vivienda

10. ¿Su HOGAR:

1

☐

Vive aquí en arriendo o subarriendo?

Valor mensual pagado

\$

Valor en pesos colombianos

2

☐

Vive aquí en su vivienda propia?

2.1 ☐ Está totalmente paga?

2.2 ☐ Se está pagando?

Valor mensual pagado:

\$

(Valor en pesos colombianos)

3

☐

Vive en esta vivienda con permiso del propietario, sin pago alguno?

4

☐

Vive en esta vivienda por tenencia o posesión sin título, o propiedad colectiva?

5

☐

Vive aquí en otra situación?

11. Incluidos la sala y el comedor, ¿de cuántos cuartos en total DISPONE SU HOGAR?

(NO cuente cocina, baños, ni los destinados exclusivamente para garaje o negocio)

12. ¿CUÁNTOS de esos cuartos USAN PARA DORMIR las personas de ESTE HOGAR?

13. ¿El servicio sanitario que utiliza este hogar es de USO:

1

☐

Exclusivo de las personas del hogar?

2

☐

Compartido con personas de otros hogares?

3

☐

No tiene servicio sanitario?

14. ¿De dónde obtiene PRINCIPALMENTE este hogar el agua para BEBER O PREPARAR ALIMENTOS:

1

☐

Acueducto?

2

☐

Pozo con bomba o sin bomba, jagüey, algibe?

3

☐

Agua lluvia?

4

☐

Pila pública?

5

☐

Carrotanque, aguatero?

6

☐

Río, quebrada, manantial, nacimiento?

7

☐

Agua embotellada o en bolsa?

15. ¿En dónde PREPARAN los ALIMENTOS las personas de este hogar:

1

☐

En un cuarto usado sólo para cocinar?

2

☐

En un cuarto usado también para dormir?

3

☐

En una sala-comedor con lavaplatos?

4

☐

En una sala-comedor sin lavaplatos?

5

☐

En un patio, corredor, enramada o al aire libre?

6

☐

No preparan alimentos en la vivienda?

Pase a 17

16. ¿Con qué energía o combustible cocinan PRINCIPALMENTE?

1

☐

Energía eléctrica

2

☐

Gas natural

3

☐

Gas en cilindro o pipeta

4

☐

Petróleo, gasolina, kerosén, alcohol

5

☐

Leña, madera, material de desecho, carbón vegetal

6

☐

Carbón mineral

17. ¿Cuáles de los siguientes APARATOS DE USO DOMÉSTICO tiene este hogar:

1. Sí

2. No

1

Nevera o enfriador?

☐

☐

1

Máquina lavadora de ropa?

☐

☐

1

Equipo de sonido?

☐

☐

1

Calentador de agua?

☐

☐

1

Ducha eléctrica?

☐

☐

1

Licuadaora?

☐

☐

1

Horno eléctrico o a gas?

☐

☐

1

Aparatos de aire acondicionado?

☐

☐

1

Ventilador?

☐

☐

1

Televisor a color?

☐

☐

1

Computador?

☐

☐

1

Horno microondas?

☐

☐

18. ¿Cuántos VEHÍCULOS, sólo de uso particular, tiene este hogar:

(Si no tiene, coloque 0)

Cantidad

1

Bicicleta?

2

Moto, motoneta?

3

Lancha, velero, bote?

4

Carro?

19. ¿Alguien de este hogar PARTICIPA ACTIVAMENTE en alguna organización de beneficio comunitario?

1

☐

Sí

2

☐

No

20. ¿Usted considera que los INGRESOS MENSUALES DE SU HOGAR:

1

☐

Son suficientes para cubrir los gastos básicos del hogar?

2

☐

Son más que suficientes para cubrir los gastos básicos del hogar?

3

☐

No alcanzan para cubrir los gastos básicos del hogar?

21. ¿Cuál CONSIDERA usted que debiera ser el INGRESO MENSUAL que requiere su hogar para CUBRIR ADECUADAMENTE los GASTOS BÁSICOS?

1

☐

De 0 a \$200 000

2

☐

De \$200 001 a \$400 000

3

☐

De \$400 001 a \$700 000

4

☐

De \$700 001 a \$1 000 000

5

☐

De \$1 000 001 a \$1 500 000

6

☐

De \$1 500 001 a \$2 000 000

7

☐

De \$2 000 001 a \$3 000 000

8

☐

De \$3 000 001 a \$4 500 000

9

☐

Más de \$4 500 000

10

☐

No informa

11

☐

No sabe

22. ¿Alguna o algunas personas, siendo miembros de este HOGAR, se han ido a VIVIR de MANERA PERMANENTE al EXTERIOR?

1

☐

Sí

1.1 ¿CUÁNTAS en total?

1.2 ¿En qué PAÍSES RESIDEN ACTUALMENTE y en cuál de los siguientes periodos se produjo su salida?

País de residencia actual	2001 - 2005	1996 - 2000	Antes de 1996
	¿CUÁNTOS?		
Venezuela	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Estados Unidos	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
España	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
México	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Costa Rica	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Canadá	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Australia	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Ecuador	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Panamá	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Perú	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Bolivia	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Otro país	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>

2

☐

No

Pase a CTL3

B. MÓDULO DE HOGARES (conclusión)

RESIDENTE HABITUAL

Es la persona que VIVE PERMANENTEMENTE O LA MAYOR PARTE DEL TIEMPO EN UNA VIVIENDA aunque en el momento de la entrevista se encuentre ausente.

También son RESIDENTES HABITUALES, porque NO TIENEN residencia habitual en OTRA PARTE:

- Las personas que se encuentran ausentes por motivos especiales, como vacaciones, cursos de capacitación, viajes de negocio; siempre y cuando la ausencia sea de seis meses o menos.
- Las personas detenidas temporalmente en inspecciones de policía.
- Las personas secuestradas sin importar el tiempo de ausencia.
- Los enfermos internados en hospitales o clínicas sin importar el tiempo de ausencia.
- Las personas desplazadas, sin importar el tiempo de permanencia en el hogar que se está entrevistando.
- Las personas que prestan el servicio militar en la Policía y van a dormir a sus hogares.

CTL4. ¿Hay OTRAS personas que HAGAN PARTE de este hogar y que no hayan sido anotadas en la lista anterior?

(Niños menores de edad, ancianos, personas internadas en clínicas, personas secuestradas, personas en vacaciones fuera del hogar).

- 1 ☐ Sí (Pregunte quiénes, asegúrese de que sí son RESIDENTE HABITUALES e INCLÚYALOS en el listado)
- 2 ☐ No

CTL5. ¿Alguna o algunas de las PERSONAS LISTADAS RESIDEN HABITUALMENTE EN OTRA PARTE?

1 ☐ Sí (Pregunte quiénes, asegúrese de que sí son residentes de otro hogar; en caso afirmativo, TÁCHELOS del listado)

2 ☐ No

CTL6. Total de personas en el hogar (Después de hacer todas las verificaciones y correcciones)

23. De las personas anteriormente mencionadas, ¿quién realiza el MAYOR aporte MENSUAL en DINERO para el sostenimiento y el pago de las obligaciones del hogar?

(Si el aportante no pertenece al hogar, escriba 00; si dos o más personas aportan en cantidades iguales, escriba el número de orden de la primera de las persona que el entrevistado mencione).

Número de orden

24. ¿Cuántas personas que ERAN MIEMBROS de este hogar han FALLECIDO EN LOS ÚLTIMOS DOCE MESES?

(Si la respuesta es 00, pase a CTL7)

(Relacione en la tabla si es mayor a 00)



Orden	Sexo	Edad al morir	¿Se hizo certificado de defunción?
1	1 <input type="radio"/> Hombre 2 <input type="radio"/> Mujer	<div></div> <div></div> <div></div>	1 <input type="radio"/> Sí 2 <input type="radio"/> No
2	1 <input type="radio"/> Hombre 2 <input type="radio"/> Mujer	<div></div> <div></div> <div></div>	1 <input type="radio"/> Sí 2 <input type="radio"/> No
3	1 <input type="radio"/> Hombre 2 <input type="radio"/> Mujer	<div></div> <div></div> <div></div>	1 <input type="radio"/> Sí 2 <input type="radio"/> No
4	1 <input type="radio"/> Hombre 2 <input type="radio"/> Mujer	<div></div> <div></div> <div></div>	1 <input type="radio"/> Sí 2 <input type="radio"/> No
5	1 <input type="radio"/> Hombre 2 <input type="radio"/> Mujer	<div></div> <div></div> <div></div>	1 <input type="radio"/> Sí 2 <input type="radio"/> No

Si encuentra un hogar con más de 5 personas fallecidas en los últimos doce meses, diligencie los formularios adicionales que sean necesarios

CTL7. ¿Dentro de esta vivienda, su hogar desarrolla con regularidad alguna actividad ECONÓMICA PARA OBTENER INGRESOS?

- 1 ☐ Sí (Después de diligenciar el módulo C para todas las personas residentes habituales, diríjase al módulo D para diligenciar la información correspondiente a la unidad económica principal del hogar)
- 2 ☐ No

OBSERVACIONES

E. MÓDULO DE ACTIVIDAD AGROPECUARIA (conclusión)

ACTIVIDAD PECUARIA

5. El día de hoy, ¿en los terrenos de esta finca hay:

Clase de cobertura			1.1 Cantidad total
	Sí	No	
1 Vacas, toros, novillos(as), terneros(as), becerros(as), toretes, vaquillas, búfalos?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
2 Caballos, yeguas, mulas?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
3 Burros, burras, asnos?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
4 Ovejas, corderos, camuros?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
5 Cabras, chivos?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
6 Porcinos, marranos, cerdos, lechones?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
7 Pollos, gallos, gallinas?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
8 Otras especies menores (pavos, cuyes, conejos, codornices, colmenas)?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

6. El día de hoy, ¿en los terrenos de esta finca hay áreas dedicadas al cultivo de:

Clase de especie			1.1 Código unidad de superficie	1.2 Área total
	Sí	No		
1 Peces?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>
2 Camarones?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>

Unidad de superficie: 1 Hectárea 2 Fanegada 3 Cuadra 4 Metro cuadrado 5 Cuerda

Resultados de entrevista por unidad censal

	Unidad de vivienda																								
	Cantidad de visitas																								
	1				2				3				4				5				6				
Fecha	D	D	M	M	D	D	M	M	D	D	M	M	D	D	M	M	D	D	M	M	D	D	M	M	
Hora	H	H	:	M	M	H	H	:	M	M	H	H	:	M	M	H	H	:	M	M	H	H	:	M	M
Resultado	<input type="text"/>				<input type="text"/>				<input type="text"/>				<input type="text"/>				<input type="text"/>				<input type="text"/>				

Resultado: 0 Sin suspensión 1 Ausente en el momento de la entrevista 2 Rechazo 3 Desocupada 4 Informante no idóneo 5 Desocupada por uso temporal 6 Incompleta 7 Otro

Código del supervisor

Hora de terminación de la entrevista

Mes:

Enero
Febrero
Marzo

 Trimestre

1

 Cuestionario nro.

--	--	--	--


 Encuestador


--	--


USM	<input type="text"/>	Departamento	<input type="text"/>	Municipio	<input type="text"/>
Sector	<input type="text"/>	Sección	<input type="text"/>	Manzana	<input type="text"/>


ESTADO DEL ESTABLECIMIENTO

Estado:


Abierto  1


Cerrado  2

Rechazo  3

Desocupado  4

¿Esta seguro que realizó las suficientes visitas para que sea CERRADO o RECHAZO?

Si  1 → TERMINE pase a Resultado de Entrevista

No  2 Corregir

A. IDENTIFICACIÓN

1. Nombre comercial:	E02
----------------------	-----

2. Dirección:	E03	3. Teléfono:	E04
---------------	-----	--------------	-----

4. Razón social o nombre del propietario	E05
--	-----

[illegible]

<p>6. ¿Este establecimiento tiene registro mercantil?</p> <p>Sí <input type="text" value="1"/></p> <p>No <input type="text" value="2"/></p> <p>No informa <input type="text" value="3"/></p>	E06	<p>10. ¿Cuánto tiempo lleva funcionando el negocio?</p> <p>Menos de un año <input type="text" value="1"/></p> <p>De 1 a menos de 3 años <input type="text" value="2"/></p> <p>De 3 a menos de 5 años <input type="text" value="3"/></p> <p>De 5 a menos de 10 años <input type="text" value="4"/></p> <p>10 años v más <input type="text" value="5"/></p>	E07
--	-----	---	-----

<p>7. ¿Obtuvo o renovó ese registro en 2008?</p> <p>Si <input type="text" value="1"/></p> <p>No <input type="text" value="2"/></p>	<p>11. ¿Cómo se lleva la contabilidad en este establecimiento?</p> <p>Libro de registro diario de operaciones <input type="text" value="0"/></p> <p>P o G o balance general <input type="text" value="1"/></p>
--	--

	Otro tipo de cuentas	2
8. Por observación, señale el tipo de emplazamiento:	No lleva contabilidad	3 E11

Local	<input type="text" value="1"/>	E08	12. Este establecimiento es:	
Puesto fijo	<input type="text" value="2"/>		Único	<input type="text" value="1"/> → Pase a la pregunta 15
Vivienda con actividad económica	<input type="text" value="3"/>		Principal	<input type="text" value="2"/>
			Sucursal	<input type="text" value="3"/>
9. Este establecimiento desarrolla su actividad como:			Unidad auxiliar	<input type="text" value="4"/> TERMINE

Tipos de personas jurídicas		Tipos de personas físicas	
Sociedad comercial (Ltda., en comandita, por acciones, etc.)	<input type="checkbox"/> 1	13. Dirección:	<input type="text"/>
Cooperativa	<input type="checkbox"/> 2	14. Teléfono:	<input type="text"/>
Sociedad de hecho	<input type="checkbox"/> 3	Departamento:	<input type="text"/>
Persona natural/ empresa de propiedad individual	<input type="checkbox"/> 4	Municipio:	<input type="text"/>

GERENCIA GENERAL

13. Dirección: _____

14. Teléfono: _____E14Departamento: _____

E15

Municipio: _____

B. CARACTERÍSTICAS GENERALES DE LA ACTIVIDAD ECONÓMICA

15. ¿El mayor porcentaje de ingresos de la unidad económica proviene de:

- Mantenimiento y reparación?
 Compra y venta de productos **NO** fabricados por la unidad?
 Alojamientos, restaurantes, cafeterías, bares, expendios de comida?
 Correo y telecomunicaciones?
 Educación?
 Salud, servicios sociales?
 Inmobiliarias, alquiler?
 Informática?
 Esparcimiento, culturales y deportivas?
 Asociaciones?
 Actividades empresariales de investigación y desarrollo?
 Lavanderías, peluquerías, funerarias, parqueaderos, agencias de viajes, prestamistas y otros servicios?
 Productos elaborados o transformados por la unidad?

1 2 3 6 7 8 9 10 11 12 13 14 5

Contínúe
 Pase a la pregunta 17
 Pase a la pregunta 21
 Pase a la pregunta 23
 Pase a la pregunta 24
 Pase a la pregunta 25

16. ¿Los bienes que mantiene o repara *principalmente* son:

- Vehículos automotores?
 Motocicletas?
 Bienes personales?
 Enseres domésticos?
 Computadores y equipo de oficina?
 Maquinaria y equipo industrial?

Pase a la pregunta 26

17. ¿Vende principalmente a:

- Minoristas, usuarios industriales, comerciales e institucionales?
 Público en general?

18. ¿Las mercancías que vende son principalmente:

- Nuevas?
 Usadas?

Nota: cuando se trate de alimentos, marque siempre nuevas

19. ¿Qué grupo de mercancías vende principalmente esta unidad económica?

(Tabla de referencia No. 1)

20. ¿Esta unidad es supermercado, venta de víveres en general o granero?

- Si
 No

¿Cuál es el porcentaje de venta de alimentos? %

E193

E194

Pase a la pregunta 26

21. ¿Esta unidad económica corresponde principalmente a:

- Restaurante?
 Cafetería, fuente de soda o frutería?
 Otros expendios de comida?
 Expendio de bebidas alcohólicas?
 Hotel, hostel o aparta hotel?
 Residencias, moteles, amoblados?
 Centro vacacional, zona de camping?
 Otro tipo de alojamiento?

22. ¿Esta unidad económica ofrece principalmente:

- A la mesa?
 Autoservicio?

23. ¿Qué servicio de correo y telecomunicaciones o educación presta u ofrece esta unidad económica?

(Tabla de referencia No. 2)
 Descripción del servicio prestado
 (Tabla de referencia No. 3)

Pase a la pregunta 26

24. ¿Qué servicio presta u ofrece esta unidad económica?

(Tabla de referencia No. 4)

Pase a la pregunta 26

25. ¿Cuál es el principal producto que fabrica o transforma esta unidad económica? ¿Cuál es su materia prima principal y su uso o destino?

Producto:
 (Tabla de referencia No. 5)
 Materia prima principal:
 (Tabla de referencia No. 6)
 Uso o destino:
 (Tabla de referencia No. 7)

EVOLUCIÓN I TRIMESTRE DE 2008

C. CARACTERÍSTICAS DEL PERSONAL OCUPADO

26. ¿Cuántas personas trabajaron en este establecimiento en el mes de referencia?

Diligencie

Si es 0

Si es 11 o más TERMINE pase a Resultado de Entrevista

¿Esta seguro que el Establecimiento estuvo **INACTIVO** o es un **NACIMIENTO** en el mes de referencia?

Si
 No

TERMINE pase a Resultado de Entrevista

Corregir

Tipo de personal	Género	Total	Mujeres	Hombres
Socios, propietarios y familiares sin remuneración				
Personal de contrato a término indefinido				
Personal temporal				
TOTAL				

D. PRODUCCIÓN, VENTAS O INGRESOS

27. ¿Cuál fue el valor total de la producción, ventas o ingresos del establecimiento en el mes de referencia? \$

DATOS DE LA FUENTE

Nombre: E41 Cargo: E42 Teléfono: E43

Gracias por su colaboración

Diligencie el resultado de la entrevista*

* 1 = Encuesta Completa
 2 = Encuesta Incompleta

3 = Rechazo
 4 = Cerrado

5 = Desocupado
 6 = Fuera de Universo

7 = Inactivo
 8 = Nacimiento

ESTRUCTURA 2007

I. PERSONAL OCUPADO PROMEDIO DURANTE EL AÑO 2007

28. ¿Cuántas personas promedio trabajaron en este establecimiento durante el año 2007?

Si es 0 E158

¿Esta seguro que el Establecimiento estuvo INACTIVO o es un NACIMIENTO para el año 2007?

Sí 1

TERMINE pase a Resultado de Entrevista

No 2

Corregir

Tipo de personal	Total	Mujeres	Hombres	Sueldos y salarios	Prestaciones sociales	Cotizaciones patronales (EPS, ARP)
Socios, propietarios y familiares sin remuneración	E44	E46	E45			E159
Personal de contrato a término indefinido	E47	E49	E48	E50	E51	E160
Personal temporal	E52	E54	E53	E55	E56	E161
	E57	E59	E58	E60	E61	E117

J. COSTOS, GASTOS, VENTAS, INGRESOS O PRODUCCIÓN DURANTE EL AÑO 2007

29. De acuerdo con la siguiente tabla, defina el comportamiento de su actividad durante el año 2006:

Mes	Mayor	Normal	Menor	NF
Enero	1	2	3	4 E96
Febrero	1	2	3	4 E97
Marzo	1	2	3	4 E98
Abril	1	2	3	4 E99
Mayo	1	2	3	4 E100
Junio	1	2	3	4 E101
Julio	1	2	3	4 E102
Agosto	1	2	3	4 E103
Septiembre	1	2	3	4 E104
Octubre	1	2	3	4 E105
Noviembre	1	2	3	4 E106
Diciembre	1	2	3	4 E107

30. En el mes de mayor actividad, ¿cuál fue el valor promedio de ventas, ingresos o producción de este establecimiento?

\$ _____ E108

33. En el mes de mayor actividad, ¿cuál fue el costo promedio de la mercancía vendida, de los insumos para la producción del servicio o de las materias primas, materiales y empaques?

\$ _____ E188

31. En el mes de normal actividad, ¿cuál fue el valor promedio de ventas, ingresos o producción de este establecimiento?

\$ _____ E109

34. En el mes de normal actividad, ¿cuál fue el costo promedio de la mercancía vendida, de los insumos para la producción del servicio o de las materias primas, materiales y empaques?

\$ _____ E189

32. En el mes de menor actividad, ¿cuál fue el valor promedio de ventas, ingresos o producción de este establecimiento?

\$ _____ E110

35. En el mes de menor actividad, ¿cuál fue el costo promedio de la mercancía vendida, de los insumos para la producción del servicio o de las materias primas, materiales y empaques?

\$ _____ E190

36. ¿Cuánto pagó, en promedio, durante el año 2007 por concepto de...y con qué frecuencia se realizó?

Concepto	Valor \$	La frecuencia de este gasto es:			
			M	A	
1. Arrendamiento de bienes inmuebles y muebles	E65		3	4	E122
2. Energía eléctrica comprada	E66				E123
3. Otros energéticos comprados (gas, leña, etc.)	E67				E124
4. Servicio de teléfono	E115				E125
5. Servicio de agua	E116				E126
6. Mantenimiento y reparación	E69				E127
7. Transporte, acarreo	E70				E128
8. Publicidad, propaganda y promoción	E71				E129
9. Impuestos (industria y comercio, predial, de vehículos, etc.)	E72				E130
10. Intereses por préstamos	E73				E131
11. Licencias de funcionamiento, registro mercantil o tarifas de asociaciones gremiales	E118				E135
12. Otros gastos (aseo y vigilancia)	E74				E136
TOTAL (renglones 1a 12)	E75				

K. ACTIVOS FIJOS DURANTE EL AÑO 2007

37. Indique el valor de los activos fijos

Concepto	Terrenos	Edificaciones	Maquinarias y equipo	Equipo de oficina, computación, comunicación	Equipo de transporte
Total	E79	E83	E87	E91	E95

L. ÁREA DEL ESTABLECIMIENTO

38. Diligencie:

	Metros cuadrados
Área total donde desarrolla su actividad económica	E111
Área de ventas del establecimiento (sólo para comercio)	E112

Durante 2007, la empresa realizó operaciones de compra o ventas con otro(s) país(es) de:

 Bienes ☐ Servicios/1 ☐

 Diligencie el resultado de la entrevista ☐ E113

G. TICS

39. ¿Cuántos computadores tiene el establecimiento en uso (propios o alquilados) a 31 de diciembre de 2007?

 B_1

Si es cero (0) TERMINE

40. ¿Cuál es el porcentaje del total de empleados que utiliza PC en su trabajo?

 % del total de empleados B_2

41. ¿Este establecimiento tiene acceso a Internet?

 Sí ☐ 1 Continúe

 No ☐ 2 Pase a la pregunta 49

B_3

42. ¿Cuál es el porcentaje total de empleados que usa el computador conectado a Internet en su trabajo?

 % del total de empleados

B_4

43. ¿El establecimiento recibe ordenes de compra a través de Internet?

 Sí ☐ 1

 No ☐ 2

B_7

44. ¿El establecimiento ordena productos a través de Internet?

 Sí ☐ 1

 No ☐ 2

B_8

45. ¿Qué tipo de acceso utiliza el establecimiento para acceder a Internet?

 Módem análogo ☐ 1

 RDSI (ISDN) ☐ 2

 ADSL ☐ 3

 Canal dedicado - Cable / Fibra óptica ☐ 4

 Inalámbrico ☐ 5

 Frame Relay ☐ 6

 GPRS ☐ 7

 EDGE ☐ 8

B_9

46. ¿Qué ancho de banda utiliza el establecimiento para acceder a Internet (en Kbps)?

 0-64 ☐ 1

 65-128 ☐ 2

 129-256 ☐ 3

 257-512 ☐ 4

 513-1024 ☐ 5

 1025-2048 ☐ 6

 2049-4096 ☐ 7

 4097-8192 ☐ 8

 8193 - SUPERIOR ☐ 9

B_9_1

47. ¿Para qué actividades o servicios, el establecimiento usa Internet?

	Sí	No	
Comunicación (e-mail)	<input type="checkbox"/>	<input type="checkbox"/>	B_12_a
Búsqueda de información	<input type="checkbox"/>	<input type="checkbox"/>	B_12_b
Banca electrónica y otros servicios financieros	<input type="checkbox"/>	<input type="checkbox"/>	B_12_c
Transacciones con organismos gubernamentales	<input type="checkbox"/>	<input type="checkbox"/>	B_12_d
Servicio al cliente	<input type="checkbox"/>	<input type="checkbox"/>	B_12_e
Distribuir productos en línea	<input type="checkbox"/>	<input type="checkbox"/>	B_12_f

48. ¿En qué áreas del establecimiento utiliza la Internet?

	Sí	No	
Administración	<input type="checkbox"/>	<input type="checkbox"/>	B_12_1_a
Producción	<input type="checkbox"/>	<input type="checkbox"/>	B_12_1_b
Ventas	<input type="checkbox"/>	<input type="checkbox"/>	B_12_1_c

49. ¿El establecimiento tiene página Web? ¿o presencia en un sitio Web?

 Sí ☐ 1

 No ☐ 2

B_5

50. ¿El establecimiento tiene una Intranet?

 Sí ☐ 1

 No ☐ 2

B_6

51. ¿El establecimiento tiene una Red de Area Local (LAN)?

 Sí ☐ 1

 No ☐ 2

B_10

52. ¿El establecimiento tiene una Extranet?

 Sí ☐ 1

 No ☐ 2

B_11

Fuente

Nombre: E41 Cargo

E42 Teléfono

E43

Gracias por su colaboración

Diligencie el resultado de la entrevista

☐ B_RE

General Census for Population, Housing and Establishments 2006										Household & Housing Characteristics														
Third Pre-test Trial										Questionnaire														
Egypt 2006																								
Governorate: _____					Division/District/Markaz _____					Shiakh/District/Village: _____					Record Serial in the Shiakh/City/Village: _____					Serial Registration in the Enumerated Zone _____				
No. of Supervisor's Zone: _____					No. of Detector's Zone _____					No. of Acolyte's Zone _____					No. of Counter's Zone: _____					Road Name & No.: _____				
Block No.: _____					Name of the building Owner _____					No. of Building: _____					Household Serial: _____					No. of Households _____				
Male _____					Female _____					Total _____					Male _____					Female _____				
Follow: _____					Follow: _____					Follow: _____					Follow: _____					Follow: _____				

Table (1) Family Characteristics:

[illegible]

1306012006009
Household and Housing
Characteristics Questionnaire
Egypt 2006

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No. Shiakha/City/Village:	<div style="border: 1px solid black; width: 30px; height: 20px;"></div>	No. of Reviewer Zone Code:	<div style="border: 1px solid black; width: 30px; height: 20px;"></div>	No. of Supervisor Zone Code
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[illegible]



1304022006002

Register of Buildings & Their Components

Number of units by page
<input type="text"/>

Shyakha / City / Village. No

Ser. No. of the register in Shyakha / City / Village

Questionnaire No.

<input type="text"/>
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Building units & Data their detail data															
Building census No.	Connecting To Utilities			Total units in the building	Unit ser. No. in the building	Unit type	Unit site	Current purpose	Type of possession	Household ser. No. Name of household head	The units used for housing			Units used for work	
	1 -Public Network 2 -Others 3 -Nil										Number of household members				Census No. of establishment & Possessor name or Trade name
	Water	Elect	Sewage								Male	Female	Total		
(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	
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Summarized Data														Number of households Question no. (22)	Number of establishments Question no. (26)		
Total units by page	Type of unit Question no. (18)							Current purpose Question no. (20)									
	The whole building (1)	One floor or more (2)	One flat (3)	One room or more (4)	One shop or more (5)	Garage (6)	Other (7)	Housing (1)	Work (2)	Housing & work (3)	Public house (4)	Closed occupants overseas (5)	Closed occupants resident in another house (6)			unoccupied (7)	Other (8)
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Number Of household members		
Males	Females	Total
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Questionnaire No.
To be followed

2306012006008

Household & Housing Conditions Questionnaire

Governorate : Kism / markaz : Name & No. shaykha/city/village : Register ser .no. in Building Enumeration No. Household ser .No.
Supervisor Area No. Supervisor Area No. Inspector area No. Asst. Area No. Enumerator Area No. Road/Reference name & No. Block No. Organizational No. Or Owner's Name

Table (1) Household Characteristics:-

(1) Member's No & Full name		(2) Relationship to Householder		(3) Age in Completed years	(4) Sex	(5) Religion	(6) Nationality	(7) Marital status (Specify grounds for divorce if any)	(8) Education status/the highest certificate (members from 10 years & over)	(9) Status in employment	(10) Sector	(11) Main Profession (In detail)	(12) Est. Main Economic Activity (In detail)	(13) Years of stay in Egypt year month	(14) Reasons for the residence
<input type="text"/>	<input type="text"/>	1- Householder				1- Muslim		1- Under age	1- Under age	1- Under age	1- Under Age				1- Work
<input type="text"/>	<input type="text"/>	2- Spouse				2- Christian		2- Never married	2- Illiterate	2- Employer	2- Governmental				2- Study
<input type="text"/>	<input type="text"/>	3- Son/daughter				3- Jewish	mention the Nationality in details	3- Read & write no certificate	3- Read & write no certificate	3- Self - Employed (full time)	3- Public & Public business				3- Marriage
<input type="text"/>	<input type="text"/>	4- Son/daughter-in-law				4- Other		4- Illiterate removable no certificate	4- Illiterate removable no certificate	4- Employed for wage (full time)	4- Private investment				4- Divorce/
<input type="text"/>	<input type="text"/>	5- Grand son/daughter						5- Primary Certificate	5- Unpaid employee at household	5- Unpaid employee at others	5- Private regular				5- Widower
<input type="text"/>	<input type="text"/>	6- Father / Mother						6- Married	6- Unpaid employee at others	6- Unemployed with previous work	6- Joint				6- Companion
<input type="text"/>	<input type="text"/>	7- Brother / Sister						7- Divorced	7- Unemployed with previous work	7- Unemployed without previous work	7- Cooperation				6- Other
<input type="text"/>	<input type="text"/>	8- Relatives						8- Widower	8- Certificate (write down the title of the highest certificate & Specification if any)	8- Unemployed without previous work	8- Non Gov. Assoc.				
<input type="text"/>	<input type="text"/>	9- Servant / Maid									9- Other				
<input type="text"/>	<input type="text"/>	10- No Relationship									(b) Inapplicable				

Table (2) Housing Conditions

House Type		Holding	Water Supply	House to water	Main Lightening	House to sanitary	Number of rooms	Monthly rent (L.E)	Fuel and Energy	Vehicles	Multi choices in numbers									
1- Apartment		1- Rent (old law)	1- Public Supply	1- Tap in house	1- Electricity	1- connected to the Public sewage network			Butane	Private car	Domestic Appliances									
2- More than one apartment		2- Rent (new law)	2- Networks	2- Tap in building	2- Kerosene	2- Private network			Natural Gas	Motorcycle	Radio	Deep freezer	Water heater	Internet (connected)						
3- Villa or whole house		3- Rent (furnished)	3- Wells	3- no connection	3- Butane	3- Trench network					T.V	Washing machine	Vacuum cleaner	Telephone						
4- Whole Rural house		4- Owned	4- Other		4- Generator	4- Disconnected			Kerosene	Bicycle	Video Player	Automatic	Air Conditioner	Mobile						
5- One room or more in housing unit		5- Owning							Electricity	Other	Satellite (dish)	Dish washer	PC	NIH						
6- Separate room or more		6- Gift							Others	NIH	Refrigerator	Stove	Fan							
7- Hut or tent		7- Benefit in kind																		
8- Grave Yard		8- Other																		
9- Other																				

Data Summary

Age Group Question no. (3)		Religion Question no. (5)		Marital Status Question no. (7)		Educational Status (10 years & over) Question no. (8)		Status in Employment (6 Years & over) Question no. (9)		Connection to Public Utilities networks	
Under 6 years	6 -	Christian	Muslim	Never married	Married	Read & write (no certificate)	Illiterate	Under age	Unemployed With previous work	Connected	Sanitary Sewage
6 - 10	10 -								Unemployed without previous work	Disconnected	Connected
10 - 15	45 -										
15 - 45	60+										
45 - 60+											
60+											



1304022006002

Number of units by page
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Summarized Data

[illegible]



Arab Republic of Egypt
Central Agency for public Mobilization and Statistics
Population , Housing & Est. census 2006

1	2
3	4

registrar area No.
 Asst. area No.
 Inspector area No.
 Supervisor area No.
 Shyakha / City / Village. No

In use establishment only (except governmental)					For in use & closed temporary establishments (except governmental)					In temporary use & closed establishments		Est. census No.
Number of workers in the est.					Registered in the commercial register 1-Yes 2-No	Number of branches if est. is HQ	Est. description 1-Individual 2-HQ 3-Branch Joint	Legal entity 1-Sole Partnership 2-Joint company 3-Corregistered 4-Limited partnership 5-Partnership limited by shares 6-Limited liability company 7-Join Stock company 8-Foreign affiliate 9-Others	Year of starting current activity	Est. with 1-computer only 2-fax. Only 3-computer & fax 4-computer + internet 5-computer + fax + internet 6-Nil	Main economic activity (in detail)	
Total	paid / unpaid employees		Paid andUnpaid employers									
	Female	Male	Female	Male								
(22)	(21)	(20)	(19)	(18)	(17)	(16)	(15)	(14)	(13)	(12)	(11)	
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[illegible]

RURAL	*
URBAN	

GOVERNMENT OF INDIA
NATIONAL SAMPLE SURVEY ORGANISATION
SOCIO-ECONOMIC SURVEY
FIFTY SEVENTH ROUND (JULY 2001- JUNE 2002)
SCHEDULE 2.345: UNORGANISED SERVICES
(EXCLUDING TRADE AND FINANCE)

CENTRAL	*
STATE	

[0] descriptive identification of sample enterprise	
1. state / u.t.:	6. ward /investigator unit / UFS block:
2. district:	7. name of owner:
3. tehsil / town*	8. name of informant:
4. village name:	9. name and address of the enterprise:
5. name of hamlet:	

[1] identification of sample enterprise / establishment							
item no.	item	code		item no.	item	code	
1.	round number	5	7	12.	serial no. of sample village / block / ward		
2.	schedule number	2	345	13.	segment number (1 / 2 / 9)		
3.	sample (central-1, state-2)			14.	broad activity group (code)		
4.	sector (rural - 1, urban - 2)			15.	enterprise type (OAE-1, establishment-2)		
5.	state-region			16.	sample enterprise number		
6.	district			17.	informant code		
7.	stratum number			18.	response code		
8.	sub-stratum			19.	survey code		
9.	sub-round			20.	reason for substitution of original enterprise (code)		
10.	sub-sample						
11.	FOD sub-region						

CODES FOR BLOCK 1

- item 14: **broad activity group** : segment 9 : to be copied from col. 11, block 2, schedule 0.0)
: segment 1 / 2 : to be copied from respective col. under cols. 22-39, block 5, schedule 0.0
- item 17: **informant code**: owner/partner - 1, manager - 2, others - 9
- item 18: **response code** (to be filled up after filling up the entire schedule):
informant : co-operative and capable - 1, co-operative but not capable - 2, busy - 3, reluctant - 4, others - 9
- item 19: **survey code**: original enterprise surveyed - 1, substitute surveyed - 2, casualty - 3
- item 20: **reason for substitution of original enterprise**: informant : busy - 1, not available - 2, non - cooperative - 3, others - 9

* Tick mark (✓) may be put in appropriate place.

CODES FOR BLOCK 2

item 4 : type of ownership			
proprietary (male)	1	co-operative society.....	5
proprietary(female)	2	limited company (outside public sector).....	6
partnership with members of the same household	3	others.....	9
partnership between members not all from the same household	4		
item 6 : location of the enterprise			
<u>Within</u> household premises	1		
<u>Outside</u> household premises:			
with fixed premises and with permanent structure	2	with fixed premises but without any structure	4
		mobile market	5
with fixed premises and with temporary structure/kiosk/stall	3	without fixed premises(street vendors, etc.)	6
items 10-11: other act / authority of registration			
municipal corporation, panchayat, local body	01	co-operative societies act.....	10
shops and establishments act.....	02	societies act.....	11
sales tax act.....	03	Indian charitable act.....	12
motor vehicles act.....	04	cinematograph act.....	13
Indian vessels act / merchant shipping act.....	05	factories act (other than section 2m (i) or 2m (ii)).....	14
bar council	06	other (please specify).....	99
chartered accountants act.....	07		
directorate of education / AICTE /NCTE.....	08		
medical practitioners act.....	09	not registered under any other act / authority.....	15
item 12 -13: nature of problems faced, if any, during the last 365 days			
non-availability of electricity connection	01	non-availability of labour	09
power cut.....	02	labour problems	10
shortage of capital.....	03	fuel not available or available at exorbitant price	11
marketing of products/services.....	04	non- recovery of service charges / fees/ credit	12
lack of other infrastructure facilities.....	05	others (please specify in the space provided)	99
local problems.....	06		
harassment	07		
competition from other units	08	no specific problem	13
items 15 -16: types of assistance received			
financial loan	1	marketing	5
subsidy.....	2	procurement of raw material.....	6
machinery/ equipment.....	3	others	9
training	4	no assistance received from any source.....	7

[2] particulars of operation and background information									
1.	whether mixed activity? (yes – 1, no – 2)								
2.	description of major activity:								
	5-digit code as per NIC 1998								
3.	nature of operation (perennial – 1, seasonal – 2, casual – 3)								
4.	type of ownership (code)								
5.	social group of owner / partner (for proprietary and partnership enterprises only) (scheduled tribe - 1, scheduled caste - 2, other backward classes - 3, others – 9)								
6.	location of the enterprise (code)								
7.	whether private non-profit institution? (yes – 1, no – 2)								
8.	whether accounts maintained? (yes - 1, no - 2)								
9.	whether registered under Companies Act? (yes - 1, no - 2)								
10.	other act / authority of registration (code) (codes for a maximum of two important registration agencies may be given) if code is 99, please specify the registration agency:								
11.									
12.	nature of problems faced, if any, during the last 365 days (code)								
13.									
14.	does the enterprise undertake any work on contract basis? (yes – 1, no – 2)								
15.	types of assistance received during the last five years (code) (maximum of two codes may be given in descending order of the importance of assistance)								
16.									
17.	number of other economic activities undertaken during last 365 days								
18.	status of the enterprise over the last 3 years (expanding – 1, stagnant – 2, contracting – 3, operated for less than 3 years - 9)								
19.	number of months (in whole number) operated during the last 365 days								

[3] selected important operating expenses during the reference month (Rs. in whole number)		
item no.	description	value (Rs.)
(1)	(2)	(3)
hotels and restaurants (NIC-98 groups 551 and 552)		
301.	articles consumed for food & drink preparation	
302.	purchase value of goods traded	
303.	crockery, glassware, bedding and other consumables	
309.	total (items 301 to 303)	
transport (NIC-98 groups 601, 602, 611, 612, class 6301 and 6303 to 6309)		
311.	petrol, diesel, lubricants, etc.	
312.	tyres, tubes, batteries and retreading expenses	
313.	repair and maintenance of transport equipment	
314.	vehicles' taxes, fees, insurance charges, etc.	
315.	charges paid towards storage of goods	
319.	total (items 311 to 315)	
storage (NIC-98 class 6302)		
321.	consumable stores used in the warehouse	
322.	insurance charges, etc.	
329.	total (items 321 to 322)	
communications (NIC-98 groups 641 and 642)		
331.	call charges and rent payable (local call/ STD / ISD, cyber café, radio paging, cellular etc.)	
332.	insurance charges	
339.	total (items 331 to 332)	
real estate, renting and business activities (NIC-98 divisions 70 - 74)		
341.	maintenance of machinery and equipment	
342.	travelling, hospitality, etc.	
349.	total (items 341 to 342)	
education (NIC-98 groups 801, 802, 803 and 809)		
351.	recurring expenses on laboratory and library	
352.	recurring expenses on newspaper, journals, etc.	
353.	expenses on computer consumables	
359.	total (items 351 to 353)	
health and social work (NIC-98 groups 851, 852 and 853)		
361.	diet of patients	
362.	medicine and drugs	
363.	consumables used in operation theatre, sophisticated equipments, pathological, radiological and other diagnostic tests	
364.	syringes, intra veins drip sets, cotton bandages, plastering materials and other disposables	
365.	uniforms, linen and laundry materials	
369.	total (items 361 to 365)	

No separate sub-block has been kept for other community, social and personal services (NIC 98 code 90 to 93). All expenses of these enterprises are to be reported in block 3.1.

[3.1] other operating expenses during the reference month: all activities

(Rs. in whole number)

(blocks 3 and 3.1 together will give total expenses of the enterprise. If some of the items have already been covered under specific activities in block 3, they should not be reported here again)

item no.	description		value (Rs.)
(1)	(2)		(3)
371.	electricity charges		
372.	fuel and lubricant		
373.	raw materials consumed for own construction of building, furniture and fixtures (please check consistency with item 472 of block 4.1)		
374.	repair and maintenance of	building	
375.		furniture and fixtures	
376.		machinery including professional equipment	
377.		transport equipment	
378.		other fixed assets	
381.	rent payable on machinery and equipment (please check consistency with items 3 to 5, column 6, block 8)		
382.	rent payable on building (please check consistency with item 2, column 6, block 8)		
383.	service charges for work done by other concerns (contract, sub-contract, legal, audit, advertising and other accounting services, warehousing expenses, commission expenses, etc.)		
384.	travelling, freight and cartage (transport) expenses		
385.	communication expenses (telephone, telegram, fax , postal, courier, e-mail, etc.)		
386.	consumable stores, packing materials, etc.		
387.	newspapers, journals, printing and stationery expenses		
388.	license fees, cess charged by local bodies, other local rates (excise duties and other indirect taxes are not to be included)		
391.	purchase value of commodities traded, if any (please check consistency with item 476 of block 4.1)		
392.	materials consumed for manufacturing activity, if any (please check consistency with item 477 of block 4.1)		
393.	cosmetics, toiletry and laundry articles, etc.		
394.	other expenses		
399.	total (items 371 to 394)		

[4] selected important receipts during the reference month (Rs. in whole number)		(Rs. in whole number)
item no.	description	value (Rs.)
(1)	(2)	(3)
hotel and restaurant activity (NIC-98 groups 551 and 552)		
401.	lodging charges, rent receivable for hiring out rooms and halls for functions, conferences and receipts from services provided like transport / travel arrangements, laundry services, gym, hair dressing, swimming pool, entertainment, etc.	
402.	receipts from sale of prepared food, refreshment and drinks	
403.	receipts from trading of purchased food, refreshment, drinks, etc.	
404.	receipts from catering services outside	
409.	total (item 401 to item 404)	
transport (NIC-98 groups 601, 602, 611, 612, class 6301 and 6303 to 6309)		
411.	earnings from passenger traffic	
412.	earnings from goods traffic	
413.	earnings of commissions for booking agents	
419.	total (item 411 to item 413)	
storage (NIC-98 class 6302)		
429.	storage charges receivable	
communications (NIC-98 group 641 and 642)		
439.	charges receivable from customers (STD / ISD / courier/ fax / internet etc.)	
real estate, renting and business activities (NIC-98 divisions 70 - 74)		
441.	receipts from services provided	
442.	brokerage charges	
449.	total (items 441 to 442)	
education (NIC-98 groups 801, 802, 803 and 809)		
451.	tuition fees	
452.	other fees (including transport fees, laboratory fees, examination fees, fines, library fee, etc.)	
453.	donations/ grants from individuals and institutions	
459.	total (items 451 to 453)	
health and social work (NIC-98 groups 851, 852 and 853)		
461.	consultation fees and charges for medicines	
462.	charges for operation theatre and other special procedures	
463.	charges for ward / cabin, pathological, radiological and other diagnostic tests, diet, nursing, physiotherapy and rehabilitation, etc.	
464.	fees for training (nurses, paraprofessionals, etc.)	
465.	donations / grants from individuals and institutions	
469.	total (items 461 to 465)	

No separate sub-block has been kept for other community, social and personal services (NIC 98 code 90 to 93). All receipts of these enterprises are to be reported in block 4.1.

[4.1] other receipts during the reference month : all activities

(Rs. in whole number)

(Blocks 4 and 4.1 together will give total receipts of the enterprise. If some of the items have already been covered under specific activities in block 4, they should not be reported here again.)

item no.	description	value (Rs.)
(1)	(2)	(3)
471.	receipts from services provided to others including commission charges	
472.	value of own construction of building, furniture and fixtures including own and hired labour charges (please check consistency with item 373 of block 3.1)	
473.	value of consumption of goods /services produced or traded for own use of the owner or employees (at owner's cost)	
474.	rent receivable on plant & machinery and other fixed assets (excluding land and building)	
475.	funding / donations received (including recurring govt. grants)	
476.	sale value of goods traded, if any (please check consistency with item 391 of block 3.1)	
477.	value of items manufactured, if any (please check consistency with item 392 of block 3.1)	
478.	other receipts (membership fees, etc.)	
479.	total (items 471 to 478)	

[5] calculation of gross value added for the reference month (Rs. in whole number)

item no.	description	value (Rs.)
(1)	(2)	(3)
501.	total operating expenses [items (309 +319 +329 +339 +349 +359 +369 +399)]	
502.	distributive expenses, if any	
503.	total receipts [items(409+419+429+439+449+459+469+479)]	
509.	gross value added (item 503 - item 502 - item 501) [put (-) sign in case of negative value]	
If item 509 is negative, low or very high, confirmation in item 510 is required.		
510.	is the entry in item 509 confirmed and substantiated with remarks in block 11/ 12? (yes - 1, no - 2)	

[6] employment particulars of the enterprise during the reference month						
serial no.	type of worker		average number of workers			
			full time		part time	
			female	male	female	male
(1)	(2)		(3)	(4)	(5)	(6)
1.	working owner					
2.	hired	skilled				
3.	worker	unskilled				
4.	other worker / helper					
5.	total (1 to 4)					

Note: Entry in column 7 of item 2/3 (item 1 in some cases) of block 6 generally imply entry in item 1 of block 7 and vice versa. If it is not so, please substantiate with remarks in block 11 / 12.

[7] compensation to workers during the reference month			
serial no.	type of emoluments		value (Rs.)
(1)	(2)		(3)
1.	salary / wages, allowances and other individual benefits (cash & kind including bonus, retirement benefits etc. apportioned for the month)		
2.	imputed value of group benefits for the month (including employer's contribution towards canteen, sports, insurance, etc.)		
3.	total emoluments (items 1 and 2)		
4.	Average daily wage for lowest paid full-time unskilled worker, if hired (excluding unpaid apprentices) (please check consistency with item 3, block 6)	female	
5.		male	

[8] fixed assets owned and hired					
serial no.	type of assets	market value of assets (Rs.) as on the date of survey		net addition to assets owned during last 365 days (Rs.)	monthly rent payable on hired assets (Rs.)
		owned	hired		
(1)	(2)	(3)	(4)	(5)	(6)
1.	land				
2.	building				
3.	plant and machinery				
4.	transport equipment				

5.	tools and other fixed assets				
6.	total (1 to 5)				

Note: Entry in item 2, column 6, block 8 should be consistent with entry in item 382 of block 3.1. Entry in items 3 to 5, column 6, block 8 should be consistent with entry in item 381 of block 3.1.

[9] loans outstanding as on the date of survey (only loans taken for enterprise to be considered)			
serial no.	source of loan	amount (Rs.)	interest payable during the reference month (Rs.)
(1)	(2)	(3)	(4)
1.	central and state level term lending institutions, government(central, state, local bodies)		
2.	commercial banks		
3.	co-operative banks and co-operative societies		
4.	other institutional agencies		
5.	money lenders		
6.	business partner(s)		
7.	suppliers / contractors		
8.	friends and relatives		
9.	others		
10.	total (1 to 9)		

[10] particulars of field operation																			
sl. no.	particulars	investigator						assistant superintendent						superintendent					
(1)	(2)	(3)						(4)						(5)					
1.	(i) name in block letters																		
	(ii) code																		
2.	date(s) of	D	D	M	M	Y	Y	D	D	M	M	Y	Y	D	D	M	M	Y	Y
	(i) survey / inspection																		
	(ii) receipt																		
	(iii) scrutiny																		
	(iv) despatch																		
3.	total time taken to canvass Sch. 2.345 (in minutes)																		
4.	signature																		

[11] remarks by investigator

[12] comments by supervisory officer(s)

RAHASIA



SE06-UMB-D

KIP:

REPUBLIK INDONESIA
BADAN PUSAT STATISTIK

SENSUS EKONOMI 2006

**PENCACAHAN PERUSAHAAN/USAHA MENENGAH BESAR
INDUSTRI PENGOLAHAN**

1. Propinsi
Province
2. Kab/Kota*
Regency/Municipality
3. Kota Administrasi
Administrative City
4. Kecamatan
Sub-regency
5. Desa/Kelurahan
Village
6. Tahun Survei
Survey Year

Disisi oleh BPS/ to be filled by BPS

7. Nama Lengkap Perusahaan
Name of Company
8. Alamat Perusahaan/Unit Produksi
Address of Company
- Kode Pos
Postal Code
- e-mail :
telp. : () Fax. ()

9. Alamat Kantor Pusat
Mailing Address
- Kode Pos
Postal Code
- e-mail :

- 10.a. Lokasi Perusahaan/*Location of Company*: 1. Di dalam kawasan industri 2. Di luar kawasan industri
Industrial estate Non industrial estate
- b. Jika diluar kawasan industri (Rinc.10 kode 2): 1. Di dalam sentra industri 2. Di luar sentra industri
If outside industrial estate (detail 10 code 2) Central industrial area Non central industrial area

☐☐

PERHATIAN / ATTENTION

- Pelaksanaan survei ini berdasarkan Undang-Undang nomor 16 Tahun 1997 tentang Statistik, Pasal 11.
Implementation of the survey is based on the Law no. 16 on Statistics, 1997, Section 11.
- Kerahasiaan data yang diberikan dijamin oleh Undang-Undang nomor 16 Tahun 1997 tentang Statistik, Pasal 21.
Confidentiality of the data is guaranteed under the Law no. 16 on Statistics, 1997, Section 21.
- Survei ini tidak memungut biaya apapun/*The survey is free of charge*
- Setiap responden wajib memberikan keterangan yang diperlukan dalam penyelenggaraan statistik dasar oleh Badan Pusat Statistik (Undang-Undang No. 16 Tahun 1997 tentang Statistik, Pasal 27)
Every respondent must provide the required information when the BPS - Statistics Indonesia is collecting basic statistic (The Law no. 16 on Statistics, 1997, Section 27)

*) Coret yang tidak perlu/*Cross out if not valid*



Penjelasan lebih lanjut hubungi Sekretariat Sensus Ekonomi 2006:
Jl. Dr Sutomo No. 6-10, Jakarta 10710
Telepon: (021) 3810291-4, 3841195, 3842508 pes:1080 Fax: (021) 386 3815
e-mail: se06@mailhost.bps.go.id
atau BPS Propinsi setempat (lihat halaman terakhir)



Sebelum mengisi kuesioner ini, mohon dibaca informasi berikut:

Prior to filling in the questionnaire, please read the following information carefully:

Perusahaan/Usaha Industri Pengolahan adalah suatu unit (kesatuan) produksi yang terletak pada suatu tempat tertentu yang melakukan kegiatan ekonomi, bertujuan untuk mengubah suatu barang secara mekanis, kimia, atau dengan tangan, sehingga menjadi benda/barang/produk baru yang nilainya lebih tinggi. Termasuk ke dalam kegiatan ini adalah perusahaan yang melakukan kegiatan jasa industri.

Jasa industri adalah kegiatan industri yang melayani keperluan pihak lain. Pada kegiatan ini bahan baku disediakan oleh pihak lain sedangkan pihak pengolah hanya melakukan pengolahannya dengan mendapat imbalan sejumlah uang atau barang sebagai balas jasa (upah makloon).

Apabila perusahaan melakukan kegiatan industri dan sektor lainnya, maka **pengisian daftar isian ini hanya mencakup kegiatan industri saja.**

Data yang berupa **nilai**, hendaknya dituliskan dalam **ribuan rupiah** dengan pembulatan, karena ribuan rupiah (000)-nya sudah tercetak di sebelahnya.

Contoh : Upah / gaji pekerja produksi yang berupa uang selama tahun 2006 adalah Rp 100.000.850,00, maka pengisian Bagian II Rincian 8.a adalah sebagai berikut:

a. Pekerja Produksi
Production Workers

Pengisian yang sifatnya uraian/penjelasan agar menggunakan huruf balok.

Untuk jawaban yang disediakan kodenya, **lingkari kode yang sesuai kemudian tuliskan di dalam kotak yang tersedia.**

A manufacturing establishment is defined as a production /processing unit located in a building or in a certain location, engaged in economic activity in processing materials or transforming them mechanically, chemically, or by hand, from raw materials into finished or semi finished product having higher value. An establishment that provides manufacturing services or assembles parts is included as a manufacturing establishment.

Manufacturing services are industrial activities that serve others. In these activities, the materials are supplied by others while the processor is processing and receiving payments for these activities as compensation.

If the manufacturing of establishment has other sector activity, that the information should be filled in this questionnaire is limited to manufacturing activity only.

*Value data should be expressed in **thousand rupiahs**.*

Example: Suppose wage /salary of production workers in cash during 2006 is 100.000.850,00 rupiahs; The entry in part II question 8.a should be as follows:

Upah/gaji (Rp) <i>Wage/salary</i>	
100.001	000

Please use block letters for descriptive answers.

*For pre-coded answer questions, **please choose one appropriate code and then write it down in the box provided.***

BAGIAN/*PART* I: KETERANGAN UMUM/*GENERAL INFORMATION***1. Periode data yang dilaporkan/*Time reference of data reported.***

Data bulan kerja yang dilaporkan pada kuesioner ini mencakup kegiatan dari bulan

The data reported in this questionnaire covers activities from

Jan	Feb	Mar	Apr	Mei	Jun	Jul	Ags	Sep	Okt	Nov	Des	Jumlah	

Jika periode tersebut kurang dari 12 bulan, sebutkan alasannya

If the data reported is less than 12 months, please state the reason

--

2. Apakah perusahaan ini merupakan/*What is the status of this unit:*

--

Kantor Pusat/*Central office* - 1

Pabrik/*Factory* - 2 (Langsung ke rincian 4/*go to question 4*)

3. Jika rincian 2 berkode 1 (Kantor Pusat) tuliskan keterangan Kantor Pusat (jika lokasi Kantor Pusat terpisah dengan pabrik)/*If question 2 is coded 1 (Central Office) Please fill in information on the Central Office (if location of the Central Office is separated from factory plant):*

a. Jumlah tenaga kerja di Kantor Pusat/ *Number of workers in the Central Office:*

--

b. Pengeluaran di Kantor Pusat Rp/*Expenditure of Central Office:*

	000
--	-----

c. Nilai aset tetap di kantor pusat (tanah, gedung/bangunan, kendaraan dan aset tetap lainnya)/*Fix capital for Central Office (Land, building, vehicles, and other fix capitals):*

	000
--	-----

d. Apakah data yang dilaporkan di kuesioner ini juga mencakup Kantor Pusat ?

Do the data reported in this questionnaire also cover data of the Central Office ?

Ya/*Yes* -1

Tidak/*No* -2

Jika kegiatan hanya kantor pusat, berhenti disini /*If central office activity only, stop here*

4. Kegiatan perusahaan industri ini/Activity of this manufacturing establishment:

--

Bila lebih dari 1 jenis kegiatan industri, tuliskan kegiatan yang mempunyai nilai produksi terbesar/
If the company is engaged in more than one activity, please choose the one having the largest production value.

5. a) Produksi utama (tuliskan terperinci, contoh : sepatu olah raga dari kulit)/Main product (please state in detail, for example: leather sport shoes):

	Diisi oleh BPS/To be Filled by BPS <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					

b) Apakah perusahaan ini sudah menggunakan standar (ISO,IEC,ITU,ASTM,JIS, BIS,NFPA,SNI) dll?
Does this establishment use standard of production process?

1. Ya/Yes

2. Tidak/No

☐

Jika Rincian 5b jawaban Ya, Apakah standar yang digunakan adalah Standar Nasional Indonesia (SNI)? *If question 5b answer Yes, Does this standard of production process used is SNI?*

1. Ya/Yes

2. Tidak/No

☐

Jenis Kode standar/a kind of standard code:

Standar Internasional

1. ISO (*International Organisation for Standardization*) adalah standar internasional secara umum.
2. IEC (*International Electrotechnical Commission*) adalah standar internasional untuk elektronik.
3. ITU (*International Telecommunication Union*) adalah standar internasional untuk telekomunikasi.
4. CAC (*Codex Alimentarius Commission*) adalah standar internasional untuk produk pangan.

Standar Negara Lain

1. AFNOR (*Association Francaise de Normalisation*) standar dari Perancis.
2. ANSI (*American National Standard Institute*) standar dari Amerika Serikat.
3. BIS (*Bureau of India Standard*) standar dari India.
4. BSI (*British Standards Institution*) standar dari Inggris.
5. DIN (*Deutsches Institut für Normung*) standar dari Jerman.
6. JISC (*Japanese Industrial Standards Committee*) standar dari Jepang.
7. SAL (*Standards Australia*) standar dari Australia.
8. SNI (*Standar Nasional Indonesia*) standar dari Indonesia yang dikeluarkan oleh Badan Standardisasi Nasional/ (BSN).

Standar Asosiasi

1. ASTM (*American Society for Testing and Material*) adalah standar untuk bahan dan pengujian dari Amerika Serikat.
2. ASME (*American Standard of Mechanical Engineering*) adalah untuk teknik mesin dari Amerika Serikat.
3. NFPA (*National Fire Protection Association*) adalah standar untuk bahaya kebakaran dari Amerika Serikat.

6. Bentuk badan hukum perusahaan/Legal status:

PN/PD/PT (Persero)/Perum/ <i>Government Company</i>	-1	Koperasi/ <i>Cooperative</i>	-5	<input type="checkbox"/>
PT/NV/ <i>Corporation</i>	-2	Yayasan/ <i>Foundation</i>	-6	
CV/ <i>Limited Partnership</i>	-3	Lainnya berbadan hukum/ <i>Other legal entity</i>	-7	
Firma/ <i>Partnership</i>	-4	Perseorangan / <i>Individually</i>	-8	

7. a. Status permodalan/Capital Source:

PMDN/ <i>Domestic</i>	-1	PMA/ <i>Foreign</i>	-2	Lainnya/ <i>Others</i>	-3	<input type="checkbox"/>
-----------------------	----	---------------------	----	------------------------	----	--------------------------

Apabila status permodalan PMA(kode 2), negara utama penanam modal adalah/
If question 7a Foreign (code 2), state the main country of the investors:

.....

b. Apakah ada kepemilikan saham/modal asing secara individual $\geq 10\%$

Do this company have the ownership of share/foreign capital individually more than 10%

Ya/Yes 1 Tidak/No 2

c. Apakah perusahaan memiliki penyertaan modal pada perusahaan diluar negeri $\geq 10\%$

Do this company have and also capital more than company beyond the foreign 10%

Ya/Yes 1 Tidak/No 2

8. Persentase permodalan/Percentage of capital owned by :

a. Pemerintah Pusat <i>Central Government</i>	<input type="text"/> %	c. Swasta Nasional <i>National Private</i>	<input type="text"/> %
b. Pemerintah Daerah <i>Local Government</i>	<input type="text"/> %	d. Asing <i>Foreign</i>	<input type="text"/> %
Jumlah/Total (a+b+c+d)			<input type="text"/> 100.00 %

9. Tahun mulai berproduksi komersial di Propinsi ini/

Starting year of commercial production in this province:

10. Banyaknya gelombang kerja/

Number of working shifts:

**BAGIAN/*PART* II: PEKERJA DAN PENGELUARAN UNTUK PEKERJA/
WORKERS AND WORKERS EXPENSES**

**11. Banyaknya pekerja/karyawan rata-rata setiap bulan selama tahun 2006/
*Average number of workers each month during 2006:***

1. Pekerja dibayar/*Paid workers:*

a. Pekerja Produksi
Production workers

b. Pekerja Lainnya
Others workers

c. Jumlah (1. a + 1. b)
Total

**2. Pekerja tak dibayar
*Unpaid workers***

Jumlah/*Total* (1c + 2)

Laki-laki/ <i>Male</i>	Perempuan/ <i>Female</i>	Jumlah/ <i>Total</i>

3). Banyaknya pekerja/karyawan yang dibayar rata-rata setiap bulan selama tahun 2006 menurut pendidikan yang ditamatkan/*Average number of paid workers each month during 2006 by educational attainment:*

**Pendidikan yang ditamatkan/
*Educational attainment:***

a). Tidak tamat Sekolah Dasar
Not finished primary school

b). Sekolah Dasar
Primary school

c). SLTP/*Junior high school*

d). SLTA/D1/D2/
Senior high school

e). Sarjana Muda/D3/*Diploma 3*

f). S1/*Bachelor*

g). S2 dan S3/*Master and Ph.D*

Jumlah/*Total*

Pekerja Produksi <i>Production Workers</i>		Pekerja Lainnya <i>Other Workers</i>	
Laki-laki <i>Male</i>	Perempuan <i>Female</i>	Laki-laki <i>Male</i>	Perempuan <i>Female</i>

Pemberian barang dari perusahaan kepada pekerja/karyawan secara cuma-cuma agar penilaiannya diperkirakan dengan harga pasar yang berlaku untuk barang-barang tersebut pada saat itu. Tetapi jika perusahaan memberikan barang kepada pekerjanya dengan pembayaran (tebusan) harga murah, maka nilai yang dicantumkan adalah selisih antara harga pasar dan nilai tebusan tadi. Penyediaan perumahan dan kendaraan yang diberikan/diserahkan pemakaiannya kepada pekerja termasuk dalam pembayaran berupa barang. Penilaiannya dengan menaksir nilai sewa atau penyusutan barang tersebut.

Goods rendered by establishments to workers as in-kind payments must be estimated by current market price. If the establishment provided goods to its workers at a price below the market value, the value of the goods recorded in this form should be their value at market price minus their value paid by workers. Housing and vehicles provided by establishments to workers are also classified as in-kind payments. To value this, estimate the rent or depreciation value of those goods.

12. Upah/gaji pekerja/karyawan selama tahun 2006/*Wage/salary of workers in 2006:*

1). Pekerja Produksi/*Production Workers:*

a. Upah/gaji/*Wage/salary*

b. Upah lembur/*Overtime*

c. Hadiah, bonus, dan sejenisnya/
Gift, bonus, and etc

d. Iuran dana pensiun, tunjangan sosial, asuransi, dan sejenisnya
/Personal funds, social security, insurance and others benefits

e. Tunjangan kecelakaan/*Accident allowance*

Jumlah/*Total*

Berupa Uang <i>in Cash</i>		Berupa barang <i>in Kind</i>		Jumlah <i>Total</i>	
	000		000		000
	000		000		000
	000		000		000
	000		000		000
	000		000		000
	000		000		000

2). Pekerja Lainnya/*Other Workers:*

a. Upah/gaji/*Wage/salary*

b. Upah lembur/*Overtime*

c. Hadiah, bonus, dan sejenisnya/
Gift, bonus, and etc

d. Iuran dana pensiun, tunjangan sosial, asuransi, dan sejenisnya
/Personal funds, social security, insurance and others benefits

e. Tunjangan kecelakaan/*Accident allowance*

Jumlah/*Total*

Berupa Uang <i>in Cash</i>		Berupa barang <i>in Kind</i>		Jumlah <i>Total</i>	
	000		000		000
	000		000		000
	000		000		000
	000		000		000
	000		000		000
	000		000		000

Pengeluaran pada rincian 12.1.d, 12.1e, 12.2d dan 12.2e adalah pengeluaran perusahaan/usaha yang dibayarkan selama tahun 2006 kepada suatu yayasan/badan yang menangani masalah tersebut untuk kepentingan pekerja/karyawan

Expenses in questions 12.1d, 12.1e, 12.2d and 12.2e refer to establishment expenses paid during 2006 to an institution dealing with pension, social security funds, insurance, and similar benefits for workers.

**BAGIAN/PART III: PENGGUNAAN BAHAN BAKAR/PELUMAS, MESIN/MOTOR LISTRIK, PENGELUARAN LISTRIK, BAHAN BAKU DAN PENGELUARAN LAIN/
FUEL/LUBRICANT USED, POWER ELECTRICITY/ELECTRIC MOTOR USE, ELECTRICITY PURCHASE, RAW MATERIAL OTHER EXPENDITURE, AND OTHER EXPENSES**

13. Bahan bakar dan pelumas/*Fuel and lubricants*

**Banyaknya dan nilai seluruh bahan bakar dan pelumas yang betul-betul dipakai selama tahun 2006/
*Quantity and value of fuel and lubricants used during 2006:***

	Satuan Standar <i>Standard Unit</i>	Seluruhnya <i>Total</i>			Untuk pembangkit tenaga listrik <i>For electrical generator only</i>		
		Banyaknya <i>Quantity</i>	Nilai (Rp) <i>Value</i>		Banyaknya <i>Quantity</i>	Nilai (Rp) <i>Value</i>	
a. Bensin/Premium/ <i>Gasoline</i>	Ltr			000			000
b. Solar/HSD/ADO/ <i>Diesel fuel/HSD/ADO</i>	Ltr			000			000
c. Minyak Diesel/IDO/ <i>Diesel oil/IDO</i>	Ltr			000			000
d. Minyak Bakar/FO/ Bunker C/MFO <i>Fuel oil/ FO/Bunker C/MFO</i>	Ltr			000			000
e. Minyak Tanah/ <i>Kerosene</i>	Ltr			000			000
f. Batubara/ <i>Coal</i>	Kg			000			000
g. Kokas/ <i>Coke</i>	Kg			000			000
h. Gas dari PGN/ <i>Public gas</i>	M ³			000			000
i. LPG/ <i>LPG</i>	Kg			000			000
j. Arang/ <i>Charcoal</i>	Kg			000			000
k. Kayu Bakar/ <i>Firewood</i>	Kg			000			000
l. Bahan Bakar Lainnya/ <i>Other fuels</i>				000			000
m. Pelumas/ <i>Lubricant</i>	Ltr			000			000
Jumlah/ <i>Total</i>				000			000

	Banyaknya <i>Quantity</i>	Kekuatan <i>Capacity</i>
14. Mesin penggerak utama (<i>prime movers</i>) yang tidak digunakan untuk menggerakkan generator (tenaganya digunakan langsung untuk menggerakkan mesin/alat produksi) <i>Prime movers used directly to drive production equipment</i>		PK
15. Mesin penggerak utama (<i>prime movers</i>) yang digunakan untuk menggerakkan generator (membangkitkan tenaga listrik)/ <i>Prime movers used for generating electricity</i>		PK

16. Motor listrik/ <i>Electric motors:</i> (Motor Listrik: mesin pengubah tenaga listrik menjadi tenaga gerak)		PK
---	--	----

17. Generator/ <i>Generators:</i> (Generator: mesin pengubah tenaga gerak menjadi tenaga listrik)		KVA/KW
--	--	--------

18. Tenaga listrik yang dibeli/
Source of electricity purchased:

	Banyaknya <i>Quantity</i>	Nilai(Rp) <i>Value</i>
a. Dari PLN/ <i>From PLN</i>	KwH	000
b. Dari Non PLN/ <i>From non PLN</i>	KwH	000

19. Banyaknya tenaga listrik yang diproduksi sendiri oleh perusahaan : <i>Electricity produced by the establishment</i>	
--	--

20. Bahan baku dan bahan penolong/*Raw materials*

Tuliskan jenis bahan baku dan bahan penolong yang dipakai selama tahun 2006 dirinci menurut "banyaknya" dan "nilai" serta asal bahan tersebut/*State the kind of raw materials used during 2006, in both quantity and value, and state the source*

Untuk industri yang menggunakan bahan baku serta bahan penolong yang banyak sekali jenis/macamnya, maka bahan yang cukup kecil nilainya dapat digabungkan pengisiannya dengan sebutan "**bahan-bahan lain**" dan cantumkan nilainya saja. Tetapi dengan ketentuan bahwa **penggabungan nilai bahan-bahan lain tersebut kurang dari 10% dari seluruh jumlah nilai pemakaian bahan.**

For an establishment that used many kinds of raw materials, the materials having lower value may be grouped and only their total value be written down, provided that their total value is not more than 10 percent of the total value of all materials used.

BAHAN BAKU DAN BAHAN PENOLONG YANG DIPAKAI SELAMA TAHUN 2006										
RAW MATERIALS USED DURING 2006										
No.	JENIS BAHAN <i>Type of materials</i>	SATUAN STANDAR <i>Standard</i> <i>Unit</i>	BERASAL DARI PRODUKSI DALAM NEGERI/ <i>Domestic</i>			BERASAL DARI IMPOR <i>Imported</i>			J U M L A H <i>Total</i>	
			BANYAKNYA <i>Quantity</i>	NILAI (Rp) <i>Value</i>		BANYAKNYA <i>Quantity</i>	NILAI (Rp) <i>Value</i>		BANYAKNYA <i>Quantity</i>	NILAI (Rp) <i>Value</i>
(1)	(2)	(3)	(4)	(5)		(6)	(7)		(8)	(9)
1.					000			000		000
2.					000			000		000
3.					000			000		000
4.					000			000		000
5.					000			000		000
6.					000			000		000
	Sub Jumlah/ <i>Sub Total</i>				000			000		000

(bersambung/*continued to next page*)

(sambungan/*continuation*)

BAHAN BAKU DAN BAHAN PENOLONG YANG DIPAKAI SELAMA TAHUN 2006 <i>RAW MATERIALS USED DURING 2006</i>										
No.	JENIS BAHAN <i>Type of materials</i>	SATUAN STANDAR <i>Standard Unit</i>	BERASAL DARI PRODUKSI DALAM NEGERI/ <i>Domestic</i>		BERASAL DARI IMPOR <i>Imported</i>		J U M L A H <i>T o t a l</i>			
			BANYAKNYA <i>Quantity</i>	NILAI (Rp) <i>Value</i>	BANYAKNYA <i>Quantity</i>	NILAI (Rp) <i>Value</i>	BANYAKNYA <i>Quantity</i>	NILAI (Rp) <i>Value</i>	BANYAKNYA <i>Quantity</i>	NILAI (Rp) <i>Value</i>
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)		
	Sub Jumlah/ <i>Sub Total</i> (dari hal. 9/ <i>from page 9</i>)			000		000		000		000
7.				000		000		000		000
8.				000		000		000		000
9.				000		000		000		000
10.				000		000		000		000
11.				000		000		000		000
12.				000		000		000		000
13.				000		000		000		000
14.				000		000		000		000
15.				000		000		000		000
16.				000		000		000		000
17.				000		000		000		000
18.				000		000		000		000
	Sub Jumlah/ <i>Sub Total</i>			000		000		000		000

21. Pengeluaran lain/*Other Expenses*

Isikan semua pengeluaran di luar pengeluaran untuk bahan baku dan bahan penolong selama tahun 2006
Fill in other expenses outside the expenses for raw materials during 2006

1). Pengeluaran untuk barang/ *Expenses for other goods:*

- a. Kemasan dan bahan pembungkus/pengepak
Packaging
- b. Suku cadang (spareparts), bahan-bahan untuk pemeliharaan, dan perbaikan kecil barang modal (tidak termasuk yang dibeli oleh pihak lain).
Spareparts and maintenance.
- c. Alat tulis dan keperluan kantor
Stationery

Jumlah/*Total*

Dalam negeri <i>Domestic</i> (Rp)		Import <i>Imported</i> (Rp)	
	000		000
	000		000
	000		000
	000		000

2). Pengeluaran untuk jasa industri/*Expenses for manufacturing services:*

Termasuk jenis pengeluaran ini suku cadang/bahan-bahan yang dibeli dan dikerjakan pihak lain/
Including expenses for spareparts/goods bought and processed by others:

- a. Jasa industri yang dikerjakan oleh pihak lain.
Manufacturing services provided by others.
- b. Ongkos pemeliharaan dan perbaikan kecil barang modal.
Maintenance and minor repair expenses for capital goods.

Jumlah/*Total*

Nilai (Rp) <i>Value</i>	
	000
	000
	000

3). Pengeluaran untuk sewa/*Expenses for rent:*

Pembayaran sewa untuk jangka waktu lebih dari 1 tahun agar diperkirakan hanya pada tahun 2006 saja.
For rent of more than one year, estimate only that portion which corresponds to the year 2006.

- 1). Gedung, mesin, serta alat-alat
Building, machinery and tools.
- 2). Tanah/*Land.*

Jumlah/*Total*

Nilai (Rp) <i>Value</i>	
	000
	000
	000

Nilai (Rp) Value	
	000

4) Pajak tak langsung/*Indirect taxes*:

Misalnya: pajak penjualan yang dikenakan atas barang (sales tax), ijin perusahaan, PBB, SWP3D, bea balik nama, bea masuk, cukai, dsb, kecuali pajak upah/pendapatan dan pajak perseorangan
For examples: sales tax, establishment license, building and land tax, SWP3D, import duty, custom fee etc except income and personal taxes

5). Pengeluaran lainnya/*Other expenses*:

- a). Bunga atas pinjaman (netto)
Net interest on loan
- b). Sumbangan, derma, dan sejenisnya
Gifts, charities, donations, etc
- c). Biaya representasi
representation allowance
- d). Royalties
Royalty
- e). Management fee
Management fee
- f). Biaya promosi/iklan
Promotion/advertising
- g). Rekening air dan PAM
Water expenses
- h). Biaya pos, telepon, telegram, fax, telex, internet/email
Internet/email, Postage, telex, facsimile and phone expenses
- i). Biaya perjalanan dinas pekerja/karyawan
Travel expenses
- j). Biaya pencegahan pencemaran lingkungan
Preventive environmental pollution expenses
- k). Biaya penelitian, pengembangan dan rekayasa produksi
Research and Development, production engineering expenses
- l). **Biaya Peningkatan SDM** (misal: Kursus Ketrampilan pegawai)
Human resources development cost (example: Employee skill Development course)
- m). Lainnya/*Others*

Jumlah/*Total*

Nilai (Rp) Value	
	000
	000
	000
	000
	000
	000
	000
	000
	000
	000
	000
	000
	000

**BAGIAN/PART IV: PRODUKSI (BARANG YANG DIHASILKAN)/
PRODUCTION (GOODS PRODUCED)**

22. Tuliskan semua produksi yang dihasilkan selama tahun 2006 dirinci menurut jenis barang, banyaknya, dan nilai./State all goods produced during 2006 (by product name, quantity, value):

No	Jenis Barang <i>Type of goods</i>	Satuan Standar <i>Standard unit</i>	Banyaknya <i>Quantity</i>	Nilai (Rp) <i>Value</i>
1.				000
2.				000
3.				000
4.				000
5.				000
6.				000
7.				000
8.				000
9.				000
10.				000
11.				000
12.				000
13.				000
14.				000
15.				000
16.				000
17.				000
18.				000
	J u m l a h/ <i>T o t a l</i>			000

**23. Persentase realisasi produksi selama tahun 2006 terhadap kapasitas terpasang/
Percentage of actual production to production capacity during 2006 :**

 %

Jika kurang dari 50%, tuliskan alasannya
If less than 50 % please explain why

**24. a. Apakah ada hasil produksi tahun 2006 yang diekspor?
Was any portion of the 2006 production exported?**

Ya/Yes

- 1

Tidak/No

- 2

ke rincian 25
(to question 25)

**b. Persentase hasil produksi selama tahun 2006 yang diekspor/
Percentage of 2006 output that was exported:**

 %

BAGIAN/PART V: PENDAPATAN/PENERIMAAN LAIN/OTHER INCOME SOURCES

Isikan semua pendapatan/penerimaan lain yang diterima selama tahun 2006
 Fill in all other income sources during 2006

	Nilai (Rp) Value
25. Pendapatan dari jasa industri (makloon) <i>Manufacturing services</i>	000
26. Penjualan barang/ <i>Goods sold without modification:</i>	
a). Nilai pembelian <i>Purchase value</i>	000
b). Nilai penjualan <i>Value of sale</i>	000
c). Keuntungan/kerugian (26b-26a) <i>Profit/loss</i>	000
27 a). Pendapatan kotor dari menyewakan gedung, mesin, dan alat-alat, penerimaan jasa angkutan, dan jasa-jasa non industri lainnya/ <i>Gross income from building or machinery leasing, transport services and other income from non manufacturing activities</i>	000
b). Pendapatan dari penjualan limbah/barang-barang bekas, misalnya penjualan sisa/potongan kayu, kertas, kain, karung bekas, dsb/ <i>Gross income from sale industrial waste/use goods, for instance, sale of leftover Wood, paper, cloth, used sack and others.</i>	000
28. Tenaga listrik yang dijual <i>Electricity sold to others</i>	
	000
Jumlah/ <i>Total</i> (25 + 26 + 27 + 28)	000

BAGIAN/PART VI: KEADAAN STOK/STOCK**29. Keadaan stok/persediaan pada awal tahun (tanggal 1 Januari) dan akhir tahun (tanggal 31 Desember) 2006/ *Stock inventory at the beginning and the end of 2006***

	Awal (Rp) <i>Beginning</i>	Akhir (Rp) <i>End</i>	Akhir - Awal (Rp) <i>End-Beginning</i>
a. Nilai stok bahan baku, bahan penolong, bahan bakar, bahan pembungkus, dan lain-lain <i>Stock of raw materials, fuel, packaging, and other materials</i>	000	000	000
b. Nilai stok barang produksi setengah jadi (dinilai sesuai dengan nilai bahan baku ditambah nilai pekerjaan yang lakukan) <i>Stock of semi-finished products (work process)</i>	000	000	000
c. Nilai stok barang jadi yang dihasilkan <i>Stock of finished products</i>	000	000	000
Jumlah/ <i>Total</i>	000	000	000

BAGIAN/PART VII : REALISASI INVESTASI/ACTUAL INVESTMENT**30. Realisasi investasi yang diinvestasikan selama tahun 2006 menurut harga pasar yg berlaku
*Actual investment during 2006 based on current prices***Sumber Dana/*Source of Capital:*

- a. Swasta Nasional/*sendiri/Private*
- b. Laba yang ditanam kembali/*Retained earnings*
- c. Saham/surat berharga/*Stock/bonds*
- d. Pinjaman Nasional (Dalam Negeri)/*Domestic loan*
- e. Pinjaman Asing/*Foreign loan*
- f. Modal Asing/*Foreign investment*
- g. Pemerintah/*Government*
- h. Pasar Modal/*Capital market*

Jumlah/*Total*

Nilai (Rp)/ <i>Value</i>	
	000
	000
	000
	000
	000
	000
	000
	000
	000

BAGIAN/PART VIII: STRUKTUR NERACA PERUSAHAAN/FINANCIAL STRUKTUR

Struktur Neraca Perusahaan menggambarkan keadaan keuangan perusahaan pada akhir tahun, yang terdiri dari aktiva yang dimiliki perusahaan atau pengguna modal, pasiva perusahaan (pinjaman dan modal sendiri) atau sumber modal.

Financial structure of an establishment depict then financial status of the establishment shown in a balance sheet. The Balance sheet consists of asset or uses of capital, liabilities, and owner's equity or sources of capital

	2005 <i>(End of year)</i>	2006 <i>(End of year)</i>
31. AKTIVA/ASSETS:		
a. Aktiva Lancar/ <i>Current Assets</i>		
b. Aktiva Tetap/ <i>Fixed Assets</i>		
c. Aktiva Lainnya/ <i>Other Assets</i>		
Jumlah/ <i>Total</i>		

	2005 <i>(End of year)</i>	2006 <i>(End of year)</i>
32. STRUKTUR MODAL DAN PINJAMAN/ <i>LIABILITIES AND OWNER'S EQUITY:</i>		
a. Kewajiban/ <i>Liabilities</i>		
- Lancar/ <i>Current</i>		
- Jangka Panjang/ <i>Long Term</i>		
b. Modal/ <i>Equity</i>		
- Modal Awal/ <i>In Equity</i>		
- Penambahan Modal (Termasuk pengeluaran saham baru)/ <i>Additional Equity issued shares</i>		
Jumlah/ <i>Total</i>		

Apakah perusahaan memiliki aset diluar negeri :
Do this establishment have assets in the foreign?

1 Ya/*Yes*

2. Tidak/*No*

☐

BAGIAN/*PART* IX: MODAL TETAP/*FIXED CAPITAL*

Perbaikan besar adalah perombakan/pembaharuan sehingga menambah kapasitas/meningkatkan daya kerja, mengubah bentuk, atau menambah umur barang modal tersebut.

Nilai pembuatan dan perbaikan besar barang modal dibedakan atas yang dikerjakan pihak lain dan perusahaan sendiri. Penilaian terhadap pembuatan dan perbaikan besar yang dikerjakan oleh perusahaan itu sendiri adalah berdasarkan harga pasar. Jika tidak mungkin, maka nilai pembuatan dan perbaikan besar yang dikerjakan sendiri dihitung dengan menjumlahkan semua nilai bahan-bahan (material) dan jasa-jasa serta ongkos-ongkos lainnya untuk kepentingan pembuatan dan perbaikan tersebut dan dinilai dengan harga yang berlaku pada saat itu.

Untuk barang modal yang pembuatannya memerlukan waktu lebih dari satu tahun, seperti pembuatan gedung, maka nilai yang dicatat adalah nilai yang benar-benar telah diinvestasikan selama tahun 2006 saja.

Major repairs are alterations/renovation of fixed capital to increase capacity/performance, change shape, or increase the working life of the good.

Value of construction and major repairs of fixed capital is divided into own repairs and repair by others. Value of own construction and repairs is based on market value. If it's not possible, value of own construction and major repairs is obtained by calculating the total current value of raw materials and services and other expenses of the construction and major repairs.

For fixed capital which is taking more than one year to be constructed, such as a building, then this value recorded is the actual value of investment during 2006

33. Penambahan/pengurangan/perbaikan besar barang modal tetap selama tahun 2006/

Addition/reduction/major repairs of fixed capital during 2006

Pembelian/penambahan <i>Purchase/addition</i>		Pembuatan/perbaikan besar <i>Construction/major repairs</i>		Penjualan/ pengurangan barang bekas (Rp) <i>Sale/reduction of used merchandise</i>	
Barang modal baru (Rp) <i>New fixed capital</i>	Barang modal bekas dalam negeri (Rp) <i>Local used fixed capital</i>	Oleh pihak lain (Rp) <i>by others</i>	Oleh perusahaan sendiri (Rp) <i>By own</i>		
1. Tanah/ <i>Land</i>					
2. Gedung/ <i>Building</i>					
3. Mesin & perlengkapan/ <i>Machinery & Equipment</i>					
4. Kendaraan/ <i>Vehicles</i>					
5. Modal tetap Lainnya/ <i>Other fixed capital</i>					
Jumlah/ <i>Total</i>					

BAGIAN/PART X: KENDALA & PROSPEK USAHA/BUSINESS CONSTRAINTS AND PROSPECT

34. a. Apakah ada pekerja di dalam usaha ini yang pernah mengikuti pelatihan?

Are there any workers in this establishment which were exposed to some training ?

Ya/Yes

-1

Tidak/No

-2

ke rincian 35
to question 35

☐

b . Pelatihan tersebut diselenggarakan oleh:

Training was organized by:

Sendiri/Company

- 1

Pihak lain,Pemerintah/*Others, government*

-2

Pihak lain, bukan Pemerintah

- 4

Others, non government

☐

c. Jenis pelatihan yang diikuti/type of training:

Manajerial/*Management*

- 1

Pemasaran/*Marketing*

-4

Ketrampilan/*teknik produksi*

-2

Lainnya (sebutkan)

-8

Techincal/production skill Others (please state)

☐

35. a. Apakah usaha ini menjadi bapak angkat?

Has this establishment become a "foster parent" company?

Ya/Yes

-1

Tidak/No

-2

☐

b jika "ya:", fasilitas yang diberikan:

if yes, the type of facilities rendered:

Uang/barang modal/*Money/capital goods*

- 1

Pengadaan bahan baku/*Raw materials*

-2

Pemasaran/*Marketing*

-4

Bimbingan/pelatihan/penyuluhan/*Guidance/training/campaign*

-8

Lainnya (sebutkan)/*Others (please state.....)*

-16

☐

36. a. Apakah usaha ini menjadi anak angkat?

Does this establishment have a "foster parent"?

Ya/Yes

-1

Tidak/No

-2

☐

b. Jika "ya", fasilitas yang diterima/if yes, the type of facilities received:

Uang/barang modal/*Money/capital goods*

- 1

Pengadaan bahan baku/*Raw materials*

-2

Pemasaran/*Marketing*

-4

Bimbingan/pelatihan/penyuluhan/*Guidance/training/campaign*

-8

Lainnya (sebutkan)/*Others (please state.....)*

-16

☐

37. a. Apakah ada kendala utama perusahaan ini yang belum teratasi/terpecahkan sampai dengan akhir tahun 2006 ?/*Major constraint which could not be overcome up to the end of 2006 ?*

Ada/Yes

-1

Tidak ada /No

-2

☐

b. Jika ada, jenis kendala/*If yes, the type of constraint:*

Kesulitan modal

-1

Pemasaran

-2

Capital

Marketing

Bahan baku

-4

Tenaga kerja trampil

-8

Raw material

Skilled employees

Birokrasi administrasi

-16

Angkutan

-32

Bureucracy

Transportation

Lainnya (sebutkan)/*Others (please state)*

-64

☐

38. Jika ada kendala yang dialami selama tahun 2006 adalah kekurangan modal, usaha yang dilakukan untuk mengatasi kendala tersebut:

if the main constraint experienced in 2006 is lack of capital, what is the establishment's efforts to overcome this constraint:

Meminjam dari Bank

-1

Menjual asset

-2

Bank loan

Sale of assets

Menjual saham/obligasi

-4

Lainnya (sebutkan.....)

-8

Sale of shares/obligation

Others (please state)

☐

39. Bagaimana perolehan laba operasi usaha tahun 2006 dibandingkan dengan tahun 2005:

How is the profit in 2006 compared with that of 2006?

Menurun/ <i>Decreased</i>	-1	Meningkat/ <i>Increased</i>	-3
Tatap/ <i>Constant</i>	-2		

☐

40. a. Bagaimana perkiraan perkembangan usaha ini pada tahun yang akan datang?

What is the prospect of the establishment's development in the future?

Lebih buruk/ <i>Worse</i>	-1	Lebih baik/ <i>Better</i>	-3
Sama saja/ <i>The same</i>	-2		

☐

b. Apakah perusahaan ini menjual jasa kepada perusahaan/perorangan bukan penduduk Indonesia?

Do this company sell service to other company/individually non resident of Indonesia?

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

c. Apakah perusahaan ini membeli jasa dari perusahaan/perorangan bukan penduduk Indonesia?

Do this company buy service to other company/individually non resident of Indonesia?

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

41 a. Apakah ada rencana untuk mengembangkan/memperluas usaha ini dimasa datang?

Is there any plan to expand the establishment in the future?

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

b. Jika "tidak", alasan utama adalah/*If no, the main reasons are:*

Kekurangan modal? <i>/lack of capital</i>	-1
Kesulitan pemasaran/ <i>Difficulty in marketing</i>	-2
Kurang keahlian/ <i>Lack of skills</i>	-3
Lainnya (sebutkan/ <i>Others (please state</i>)	-4

☐

42. a. Apakah perusahaan ini anggota grup perusahaan?

Does this establishment belong to any group of companies?

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

b. Bila "ya", tuliskan nama dan alamat grup perusahaan tersebut:

If "yes", please state the name and address of that group:

Nama kelompok/ <i>grup name</i>	:	.....
Alamat kelompok/ <i>grup address</i>	:	.....
Kabupaten/Kota*)/ <i>Regency/Municipality</i>	:	.....
Provinsi/ <i>Province</i>	:	.....
No.Telepon/Faksimili/ <i>Telephone/faximile</i>	:	(.....)

BAGIAN/PART XI: PENELITIAN DAN PENGEMBANGAN/RESEARCH AND DEVELOPMENT

43. a. Apakah mempunyai unit Penelitian dan Pengembangan (Litbang)?/*Does this establismnt have a research and development unit*

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

b. Bila "ya" tuliskan jumlah tenaga kerja yang bekerja pada unit Litbang tersebut?

If "yes", please state the number of employees working in this unit?

c. Apakah selama tahun 2006 perusahaan melakukan inovasi produk/proses?/*Does this establismnt have innovation product/process during 2006?*

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

44. a. Apakah selama tahun 2006 perusahaan menggunakan komputer ?

Does this establishment personal computer used during 2006?

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

b. Bila "ya", Apakah komputer tsb digunakan unuk mengakses Website dan elektroni mail (e-mail), internet? *If 'yes' Do the personal computer used online website and electronic mail, internet?*

Ya/ <i>Yes</i>	-1	Tidak/ <i>No</i>	-2
----------------	----	------------------	----

☐

BAGIAN/*PART* XII: PERNYATAAN/*STATEMENT*

45. Data yang tercantum dalam daftar isian ini diisi dengan sebenarnya dan menurut keadaan yang sesungguhnya/ *Data stated in this form has been filled out truthfully and accurately by*

- 1). Nama/*Name* :
- 2). Jabatan/*Occupation* :
- 3). Telpon/*Telephone*: Facsimile :
- 4). Tanda Tangan & Cap Perusahaan
Signature and company seal :
- 5). Tanggal/*Date* : / /2006

46. Bagian ini hanya diisi oleh petugas BPS
For BPS enumerator's use only

- 1). Nama & Nomor Petugas :
- 2). Jabatan : Mantis / Staf KS Tk.II / Staf KS. Tk.I / Staf BPS / Lainnya *)
- 3). Tanggal Penyerahan Dokumen : / / 2006
- 4). Tanggal Penerimaan Dokumen : / / 2006
- 5). Tanda Tangan :
- 6). Nama Pengawas/Pemeriksa :
- 7). Tanggal Pengawasan/Pemeriksaan : / /2006
- 8). Tanda Tangan :

47. 1. Catatan Petugas
Enumerator's notes

BAGIAN/*PART* XIII: RINGKASAN (Diisi oleh pengawas lapangan)*SUMMARY (To be filled by supervisor)***48. PENGELUARAN**

1. Pengeluaran untuk pekerja (12)
2. Pemakaian bahan bakar (13)
3. Tenaga listrik yang dibeli (18)
4. Pemakaian bahan baku dan penolong (20)
5. Pengeluaran lainnya (21.1+21.2+21.3+21.4+21.5)

J u m l a h

Nilai (Rp)	
	000
	000
	000
	000
	000
	000

49. PENDAPATAN

1. Barang-barang yang dihasilkan (22)
2. Pendapatan dari jasa industri (25)
3. Keuntungan/kerugian dari penjualan barang (26c)
4. Pendapatan kotor dari menyewakan gedung, mesin dan alat-alat serta
penjualan limbah/barang bekas (27a + 27b)
5. Listrik yang dijual (28)
6. Selisih nilai stok barang produksi setengah jadi (29b)

J u m l a h

Nilai (Rp)	
	000
	000
	000
	000
	000
	000
	000

50. NILAI TAMBAH**a. Pengeluaran lain yang merupakan komponen nilai tambah**

1. Rincian 21,3.2 Sewa tanah
2. Rincian 21.4 Pajak tak langsung
3. Rincian 21.5a Bunga atas pinjaman
4. Rincian 21.5b Sumbangan, derma, dan sejenisnya

Jumlah

Nilai (Rp)	
	000
	000
	000
	000
	000

b. Nilai tambah [(49 – 48) + (12 - 50.a)]

	000
--	-----

ALAMAT PERWAKILAN BADAN PUSAT STATISTIK
ADDRESS OF REGIONAL STATISTICS OFFICE

Propinsi	Alamat	No.Telpon & Fax	Propinsi	Alamat	No.Telpon & Fax
1. NAD	Jl. Daud Beureuh 50 Banda Aceh 23121	Telp.(0651) 22862,230005 Fax.(0651) 33632	18. N.T.B	Jl. Gunung Rinjani No.2 Mataram 83125	Telp.(0370) 641242,621385 Fax.(0370) 623801
2. Sumatera Utara	Jl. Asrama No.179 Medan 20123	Telp.(061) 8452343 -hunting Fax.(061) 8452773	19. N.T.T	Jl. Suprpto No.5 Kupang 85111	Telp.(0380) 826289,821755 Fax.(0380) 833124
3. Sumatra Barat	Jl. Khotib Sulaeman No.48 Padang 25136	Telp.(0751) 442158-59 Fax.(0751) 442161	20. Kalimantan Barat	Jl. Sultan Syahrir No.24/42 Pontianak 78116	Telp.(0561) 735345, 765742, Fax.(0561) -
4. R i a u	Jl. Pattimura No.12 Pekanbaru 28131	Telp.(0761) 23042 Fax.(0761) 21336	21. Kalimantan Tengah	Jl. Kapten P. Tendean no.6 Palangkaraya 73112	Telp.(0536) 3228105 Fax.(0536) 3221380
5. J a m b i	Jl. A. Yani No.4 Telanaipura Jambi 36122	Telp.(0741) 60497 Fax.(0741) 60802	22. Kalimantan Selatan	Jl. K.S. Tubun No.117 Banjarmasin 70242	Telp.(0511) 3262314 Fax.(0511) 3261585
6. Sumatra Selatan	Jl. Kapten Anwar Sastro No.1694/1131 Palembang 30129	Telp.(0711) 318456 Fax.(0711) 353174	23. Kalimantan Timur	Jl. Kemakmuran No.4 Samarinda 75117	Telp.(0541) 743372, 732793 Fax.(0541) 201121
7. Bengkulu	Jl Adam Malik Km.8 Gading Cempaka Kota Bengkulu 38225	Telp.(0736) 349117-118 Fax.(0736) 349115	24. Sulawesi Utara	Jl. 17 Agustus Manado 95119	Telp.(0431) 847044 Fax.(0431) 847044
8. Lampung	Jl. Basuki Rahmat No.16 Teluk Betung Bandar Lampung 35215	Telp.(0736) 349117-118 Fax.(0736) 349115	25. Sulawesi Tengah	Jl. Prof.Moh.Yamin No.48 Palu 94114	Telp.(0451) 483610, 483611 Fax.(0451) 983612
9. Bangka Belitung	Perkantoran Pemerintah Propinsi Kep.Bangka Belitung, Air Itam	Telp.(0717) 439421 Fax.(0717) 439425	26. Sulawesi Selatan	Jl. Haji Bau No.6 Makasar 90125	Telp.(0411) 872879 Fax.(0411) 851225
10. Kepulauan Riau	Jl. Ir.Sutami no.34 Tanjung Pinang 29100	Telp.(0771) 23680 Fax.(0771) 312718	27. Sulawesi Barat	Jl. KH Ahad No.9 Mamuju 91511	Telp.(0426) 21116 Fax.(0426) -
11. D.K.I. Jakarta	Gedung BIPI Lt.3 & 4 Jl. Jend. Suprpto Kav.3 Jakarta Pusat	Telp.(021) 3822290 Fax.(021) 3840084	28. Sulawesi Tenggara	Jl. Made Sabara No.3 Kendari 93111	Telp.(0401) 321751 Fax.(0401) 322355
12. Jawa Barat	Jl. Penghulu Hasan Mustapa No.43 Bandung 40124	Telp.(022) 7272595,7201696 Fax.(022) 7213572	29. Gorontalo	Jl. Taman Pendidikan No.117 Gorontalo	Telp.(0435) 834596 ext.102 Fax.(0435) 834597
13. Jawa Tengah	Jl. Pahlawan No.6 Kota Semarang 50241	Telp.(024) 8311242,8412802 Fax.(024) 8311195	30. Maluku	Jl. Haruhun Karang Panjang Komplek Puleh Ambon 97121	Telp.(0911) 353306,342280 Fax.(0911) 343001
14. D.I. Yogyakarta	Jl. Brigjen Katamso Komplek THR Yogyakarta 55152	Telp.(0274) 387752 Fax.(0274) 375310	31. Maluku Utara	Jln. Stadion No.65 Ternate Selatan Ternate 97112	Telp.(0921) 327878 Fax.(0921) 326301
15. Jawa Timur	Jl. Raya kendangsari Industri No.43-44 Surabaya 60292	Telp.(031) 8438873 Fax.(031) 8494007	32. Papua	Jl. Dr. Sam Ratulangi Dok II Jayapura 99112	Telp.(0967) 534519,533028 Fax.(0967) 536490
16. Banten	Pusat PemProv Banten Kav.H1-2 Blok Instansi Vertikal Jl. Raya Palima Pakupatan Serang Banten 42171	Telp.(0254) 7011561, 7038810 Fax.(0254) -	33. Papua Barat	Jl. Drs. Esau Sesa(Depan Hotel Papua Forest), Manokwari Papua Barat	Telp.(0986) 213995 Fax.(0986) 211241
17. Bali	Jl. Raya Puputan no.3 Renon Denpasar 80226	Telp.(0361) 238159,234696 Fax.(0361) 238162			

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REPUBLIC OF MAURITIUS

CENTRAL STATISTICS OFFICE

Ministry of Finance and Economic Development

2007 COLLECTION OF STATISTICS OF ECONOMIC ACTIVITIES

SMALL AND ITINERANT UNITS

CONSTRUCTION

REFERENCE MONTH

--	--

GEOGRAPHICAL DISTRICT, MUNICIPAL/VILLAGE COUNCIL AREA

--	--	--	--

URBAN/RURAL

--

NSIC CODE

--	--	--	--	--

NAME OF INTERVIEWER: DATE SUBMITTED:

NAME OF SUPERVISOR: DATE SUBMITTED:

FOR OFFICE USE

EDITED AND CODED BY INPUT BY:

CHECKED BY: VERIFIED BY:

1. CHARACTERISTICS OF ESTABLISHMENT

1.1 Name of establishment

1.2 Address of establishment

.....

(Circle appropriate code)

1.3 Is the establishment registered with the Registrar of Businesses?

Yes 1 No 2

1.4 Activities of establishment

1. Main activity

--	--	--	--	--	--

2. Secondary activity (if any)

(i)

--	--	--	--	--	--

(ii)

--	--	--	--	--	--

1.5 Date of start of operation: Month Year

--	--	--	--	--	--

1.6 Type of ownership of establishment (*circle appropriate code*)

- | | | | | |
|--|---|-------------------------------------|---|----------------------|
| (i) Individual proprietor | 1 | (iv) Company | 4 | } <i>skip to 2.1</i> |
| (ii) Household members | 2 | (v) Cooperative | 5 | |
| (iii) Partnership with members
of other household | 3 | (vi) Other (<i>specify</i>) | 6 | |

(Circle appropriate code)

1.7 Is the establishment's expenditure separate from that of the owner's household?

Yes 1 No 2

1.8 Are the establishment's assets separate from those of the owner's household?

Yes 1 No 2

1.9 Do you keep any record of accounts (Receipts & Expenditure) for your establishment?

Yes 1 No 2

**2. EMPLOYMENT, HOURS OF WORK AND LABOUR COST
FOR THE REPORTING MONTH****2.1 Employment (including expatriates) and hours of work**

Employment status	Number of persons engaged on last Thursday of the month				Total hours worked during the month
	Full time		Part time ¹		
	Male	Female	Male	Female	
1. Employer					
2. Own account worker					
3. Employee including apprentice					
4. Contributing family worker					
5. Other (<i>specify</i>)					
Total					
<i>of whom expatriates</i>					

¹ Persons working less than half of usual working hours of the establishment

2.2 Wages, salaries and other benefits paid for the reporting month

	Rupees														
	Male					Female					Total				
1. Wages and Salaries															
2. Overtime payments															
3. Travelling allowance															
4. Payment in kind															
5. Employer's contribution to:															
(i) HRDC															
(ii) N.P.F															
(iii) Other (e.g. NSF, etc)															
6. Training expenses															
7. Other (<i>specify</i>)															
Total															

2.3 Average earnings per day (employees only)

Occupation		No of persons employed	Basic Wages	Other Payments	Total
1.					
2.					
3.					
4.					
5.					

3. CONSUMPTION OF MATERIALS, FUEL AND SERVICES DURING THE REPORTING MONTH

3.1 Electricity & water consumed, and waste water charges for reporting month at purchaser's price¹

Description	(Rupees)
1. Electricity	
2. Water	
3. Waste water charges	

¹ Excluding deductible VAT

3.2 Fuel consumed during reporting month at purchaser's price¹

(Rupees)

	Diesel					Gasoline					LPG (Gas)					Other					Total				
1. Fuel for plant and machinery																									
2. Fuel for vehicles																									
3. Fuel for other purposes																									
Total																									

3.3 Materials consumed during the reporting month at purchaser's price¹ (excluding electricity, water, fuel and ICT related materials)

Description of main materials	(Rupees)									
1. Cement										
2. Sand/rocksand										
3. Aggregates (macadam)										
4. Blocks										
5. Steel/iron bars and sheets										
6. Electrical fittings										
7. Plumbing (water fittings)										
8. Tiles and sanitary wares										
9. Timber (carpentry and joinery)										
10. Paint										
11. Openings:										
(i) Metal										
(ii) Other (specify)										
12. Other (specify) : (i)										
(ii)										
(iii)										
Total										

¹ Excluding deductible VAT

3.4 Expenses on services at purchaser's price¹ (excluding IT & telecommunications related services)

Description of services	(Rupees)
1. Printing and stationery	
2. Postage	
3. Hire of transport	
4. Security services	
5. Consultancy and management services	
6. Rental of machinery and equipment	
7. Environment protection services (e.g. waste disposal, pollution control, embellishment, etc.)	
8. Payment for works subcontracted	
9. Rental of premises	
10. Minor repairs and maintenance:	
(i) Machinery and equipment	
(ii) Vehicles	
(iii) Building	
(iv) Other (<i>specify</i>)	
11. Business services:	
(i) Accounting	
(ii) Advertising	
(iii) Other (<i>specify</i>)	
12. Other services (<i>specify</i>)	
Total	

¹ Excluding deductible VAT

4. OTHER PAYMENTS

4.1 Other payments

Description	Imputed monthly amount(Rs)
1.Rates and licenses:	
(i) Trade licence	
(ii) Tenant's tax	
(iii) Road tax	
(iv) Other (specify)	
2.Value added tax (net amount paid)	
3. Interest (on loan, overdraft etc.)	
4. Insurance premium	
5. Income tax	
6. Purchases of shares during the last twelve months	
7. Current transfers to abroad	
8. Other (specify)	
Total	

5. INFORMATION & COMMUNICATION TECHNOLOGY (ICT) RELATED SERVICES

5.1 Number of computers in use at establishment

5.2 Number of persons (working in establishment) using a computer for work purposes

(circle appropriate code)

5.3(a) Does establishment have: (i) Internet facilities Yes 1 No 2

(ii) Email facilities Yes 1 No 2

(iii) website Yes 1 No 2

(iv) broadband connectivity Yes 1 No 2

5.3(b) Number of persons using the internet for business purposes

5.4 Recurrent expenses incurred for the reporting month on:

Rupees

(i) telecommunication items (e.g. fixed and mobile telephone, telex, fax, etc)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(ii) internet/email account	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(iii) maintenance/repairs of ICT equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(iv) training in ICT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(v) consultancy services in ICT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(vi) broadband connectivity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(vii) other current ICT related items (specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(e.g. toner, cartridges, etc.)									

5.5 Capital expenses for the last twelve months on:

Rupees

(i) purchase of software (including upgrades)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(ii) purchase of hardware (including upgrades)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(iii) software development	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(iv) website development	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(v) other (specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(Circle appropriate code)

5.6(a) Does your establishment receive orders through the internet?

Yes 1 No 2

If yes, state value of orders received during the last 12 months: (Rs)..... | | | | | | | | |

5.6(b) Does your establishment place orders through the internet?

Yes 1 No 2

If yes, state value of orders placed during the last 12 months (Rs)..... | | | | | | | | |

6. OUTPUT

6.1 Value of goods produced/services rendered during reporting month at basic price¹

Description		Value (Rs)
1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>
Total		<input type="text"/>

¹Excluding deductible VAT

7. CONSTRUCTION OPERATIONS

7.1 Details of construction operations during last twelve months

Item no.	Person, firm or authority for whom the work is being done	Site address of job	Type ¹	Area ² (sq mt)	Contract value Rs (000)	Value of work done during last 12 months Rs (000)	Duration in months for <u>whole project</u>
1							
2							
3							
4							
5							
6							
7							

¹ e.g. house, bungalow, school, factory, road, bridge, etc.

² For construction work such as pipe laying, etc. state the length in metres

8. OTHER RECEIPTS

8.1 Other receipts during reporting month

Rupees

[illegible]

9. GROSS FIXED CAPITAL FORMATION

9.1 Value of additions to and sales of, fixed assets during last twelve months (excluding ICT related items reported at 5.5)

$$\mathbf{R}_s(\mathbf{000})$$
[illegible]

¹ including second hand imported (for items 4-6)

10. MISCELLANEOUS

Rupees

10.1 Outstanding debt

(i) Commercial Banks

(ii) Development Bank of Mauritius (DBM)

(iii) Other (*specify*)

10.2 Monthly debt repayment

.....

10.3 Construction charges

Average price charged for construction work mentioned at 7.1			
Item no.	Labour only Rs/sq mt ¹	Labour and materials	
		Rs/sq mt ¹	Materials provided
1			
2			
3			
4			
5			
6			

¹ For construction work such as pipe laying, etc. state the price per metre.

<p>Contact person(Mr/Miss/Mrs)</p> <p>Status in business</p> <p>Telephone No</p> <p>E-mail address</p>
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INTERVIEWER'S COMMENTS

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.....

.....

SUMMARY DATA

	Rs(000)
A. GROSS OUTPUT	<input type="text"/>
6.1 Value of goods produced
B. INTERMEDIATE CONSUMPTION	<input type="text"/>
2.2.6 Training expenses
3.1 Electricity, water and waste water charges
3.2 Fuel consumed
3.3 Materials consumed
3.4 Expenditure on services, excluding ICT related services
5.4 Expenditure on ICT related services
C. VALUE ADDED (A-B)	<input type="text"/>
D. COMPENSATION OF EMPLOYEES (2.2 - 2.2.6 - 2.2.5(i))	<input type="text"/>
E. OTHER TAXES ON PRODUCTION (2.2.5(i) + 4.1.1 - 8.1.4)	<input type="text"/>
F. GROSS OPERATING SURPLUS (C - D)	<input type="text"/>
G. TOTAL VALUE OF ADDITIONS (5.5 + 9.1 - 9.1.2)	<input type="text"/>
<i>of which new</i>	<input type="text"/>

CONFIDENTIAL

CEAS 3

SERIAL NUMBER

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REPUBLIC OF MAURITIUS

CENTRAL STATISTICS OFFICE

Ministry of Finance and Economic Development

2007 COLLECTION OF STATISTICS OF ECONOMIC ACTIVITIES

SMALL AND ITINERANT UNITS

LAND TRANSPORT

REFERENCE MONTH

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GEOGRAPHICAL DISTRICT, MUNICIPAL/VILLAGE COUNCIL AREA

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URBAN/RURAL

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NSIC CODE

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NAME OF INTERVIEWER: DATE SUBMITTED:

NAME OF SUPERVISOR: DATE SUBMITTED:

FOR OFFICE USE

EDITED AND CODED BY: INPUT BY:

CHECKED BY: VERIFIED BY:

1. CHARACTERISTICS OF ESTABLISHMENT

1.1 Name of establishment

1.2 Address of establishment

.....

(Circle appropriate code)

1.3 Is the establishment registered with the Registrar of Businesses? Yes 1 No 2

1.4 Activities of establishment

1. Main activity

--	--	--	--	--

2. Secondary activity (if any) (i)

--	--	--	--	--

(ii)

--	--	--	--	--

1.5 Date of start of operation: Month Year

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1.6 Type and number of commercial vehicles

		<u>Number of vehicles</u>
Car	Taxi
	Contract
Bus	Individual	.....
	Contract – School	.....
	– Other	.....
Lorry	Taxi	.....
Van	Taxi	.....

1.7 Details of vehicles (*for bus and lorry only*)

	<u>Vehicle 1</u>	<u>Vehicle 2</u>	<u>Vehicle 3</u>
Bus :Seating capacity	.....	.....	.....
Lorry :Load (Tonnes)	.....	.....	.....
:Type of goods carried (<i>circle code for main type of goods carried</i>)			
Sugarcane	1	1	1
Goods in container	2	2	2
Foodstuffs	3	3	3
Construction materials	4	4	4
Waste: (i) Solid	5	5	5
(ii) Liquid	6	6	6
Other (<i>specify</i>)	7	7	7

1.8 Type of ownership of establishment (*circle appropriate code*)

(i) Individual proprietor	1	(iv) Company	4	} skip to 2.1
(ii) Household members	2	(v) Cooperative	5	
(iii) Partnership with members of other household	3	(vi) Other (<i>specify</i>)	6	

(Circle appropriate code)

- 1.9 Is the establishment's expenditure separate from that of the owner's household? **Yes** 1 **No** 2
- ### Are the establishment's assets separate from those of the owner's household? **Yes** 1 **No** 2
- ### Do you keep any record of accounts (Receipts & Expenditure) for your establishment? **Yes** 1 **No** 2

2. EMPLOYMENT, HOURS OF WORK AND LABOUR COST FOR THE REPORTING MONTH

2.1 Employment (including expatriates) and hours of work

Employment status	Number of persons engaged on last Thursday of the month				Total hours worked during the month
	Full time		Part time ¹		
	Male	Female	Male	Female	
1. Employer					
2. Own account worker					
3. Employee including apprentice					
4. Contributing family worker					
5. Other (<i>specify</i>)					
Total					
<i>of whom expatriates</i>					

2.2 Wages, salaries and other benefits paid for the reporting month

	Rupees											
	Male						Female					
1. Wages and Salaries												
2. Overtime payments												
3. Travelling allowance												
4. Payment in kind												
5. Employer's contribution to:												
(i) HRDC												
(ii) N.P.F												
(iii) Other (e.g. NSF, etc)												
6. Training expenses												
7. Other (<i>specify</i>)												
Total												

¹ Persons working less than half of usual working hours of the establishment

3. CONSUMPTION OF MATERIALS, FUEL AND SERVICES DURING THE REPORTING MONTH

3.1 Electricity & water consumed, and waste water charges for reporting month at purchaser's price¹

Description	(Rupees)					
1. Electricity						
2. Water						
3. Waste water charges						

3.2 Fuel consumed during reporting month at purchaser's price¹

(Rupees)

	Diesel	Gasoline	LPG (Gas)	Other	Total
1. Fuel for plant and machinery					
2. Fuel for vehicles					
3. Fuel for other purposes					
Total					

3.3 Materials consumed during month at purchaser's price¹ (excluding electricity, water, fuel and ICT related materials)

Description of main materials	Imputed monthly value (Rs)					
1. Lubricants						
2. Tyres and tubes						
3. Spare parts						
4. Uniforms						
5. Other (specify):						
(i)						
(ii)						
(iii)						
Total						

¹ Excluding deductible VAT

3.4 Expenses on services at purchaser's price¹ (excluding IT & telecommunications related services)

Description of services	(Rupees)
1. Printing and stationery	
2. Postage	
3. Hire of transport	
4. Security services	
5. Consultancy and management services	
6. Rental of machinery and equipment	
7. Vehicle examination fees (NTA)	
8. Environment protection services (e.g. waste disposal, pollution control, embellishment, etc.)	
9. Rental of premises	
10. Repairs and maintenance (excluding motor vehicle spare parts):	
(i) Machinery and equipment	
(ii) Vehicles	
(iii) Building	
(iv) Other (<i>specify</i>)	
11. Business services:	
(i) Accounting	
(ii) Advertising	
(iii) Other (<i>specify</i>)	
12. Other services (<i>specify</i>):	
(i)	
(ii)	
Total	

¹ Excluding deductible VAT

4. OTHER PAYMENTS

4.1 Other payments

Description	Imputed monthly amount(Rs)
1.Rates and licenses:	
(i) Trade licence	
(ii) Tenant's tax	
(iii) Road tax	
(iv) Other (<i>specify</i>)	
2.Value added tax (net amount paid)	
3. Interest (on loan, overdraft etc.)	
4. Insurance premium	
5. Income tax	
6. Purchases of shares during the last twelve months	
7. Other (<i>specify</i>)	
Total	

5. INFORMATION & COMMUNICATION TECHNOLOGY (ICT) RELATED SERVICES

5.1 Number of computers in use at establishment

5.2 Number of persons (working in establishment) using a computer for work purposes

(*circle appropriate code*)

5.3(a) Does establishment have: (i) Internet facilities Yes 1 No 2

(ii) Email facilities Yes 1 No 2

(iii) website Yes 1 No 2

(iv) broadband connectivity Yes 1 No 2

5.3(b) Number of persons using the internet for business purposes

5.4 Recurrent expenses incurred **for the reporting month** on:

Rupees

(i) telecommunication items (e.g fixed and mobile telephone, telex, fax, etc)	<input type="text"/>
(ii) internet/email account	<input type="text"/>
(iii) maintenance/repairs of ICT equipment	<input type="text"/>
(iv) training in ICT	<input type="text"/>
(v) consultancy services in ICT	<input type="text"/>
(vi) broadband connectivity	<input type="text"/>
(vii) other current ICT related items (specify)	<input type="text"/>
(e.g. toner, cartridges, etc.)		

5.5 Capital expenses for the **last twelve months** on:

Rupees

(i) purchase of software (including upgrades)	<input type="text"/>
(ii) purchase of hardware (including upgrades)	<input type="text"/>
(iii) software development	<input type="text"/>
(iv) website development	<input type="text"/>
(v) other (specify)	<input type="text"/>

(Circle appropriate code)

5.6(a) Does your establishment receive orders through the internet?

Yes 1 No 2

If yes, state value of orders received during the last 12 months

(Rs).....

5.6(b) Does your establishment place orders through the internet?

Yes 1 No 2

If yes, state value of orders placed during the last 12 months

(Rs).....

6. OUTPUT

6.1 Value of services provided during reporting month at basic price¹

Description	(Rupees)
1. Receipts for transport provided during the reporting month	<input type="text"/>
2. Subsidy from government (buses only):	<input type="text"/>
(i) Free transport	<input type="text"/>
(ii) Fuel	<input type="text"/>
3. Other (specify)	<input type="text"/>
Total	<input type="text"/>

¹ Excluding deductible VAT

7. OTHER RECEIPTS

7.1 Other receipts during reporting month

Rupees

1. Interests (on deposits, advances, etc.)						
2. Insurance claims						
3. Dividends						
4. Refund from HRDC						
5. Other (<i>specify</i>)						
Total						

8. GROSS FIXED CAPITAL FORMATION

8.1 Value of additions to and sales of, fixed assets during last twelve months (excluding ICT related items reported at 5.5)

Rs(000)

Description	Sales	Additions	
		Total value	of which NEW ¹
1. Building and structure			
2. Land acquisition			
3. Land improvement			
4. Machinery and transport equipment:			
(<i>i</i>) Transport equipment			
(<i>ii</i>) Other machinery and equipment			
5. Furniture and fittings			
6. Other (<i>specify</i>)			
Total			

¹ including second hand imported (for items 4-6)

9. MISCELLANEOUS

Rupees

9.1 Outstanding debt

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(i) Commercial Banks

--	--	--	--	--	--	--	--

(ii) Development Bank of Mauritius (DBM)

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(iii) Other (*specify*)

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9.2 Monthly debt repayment

.....

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9.3 Average number of days in operation per month

.....

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9.4 For buses only

	Vehicle 1	Vehicle 2	Vehicle 3
No. of trips performed (daily)			
No. of kilometres covered (daily)			
No. of passengers carried (daily)			

Contact person(Mr/Miss/Mrs)

Status in business

Telephone No

E-mail address

INTERVIEWER'S COMMENTS

.....

.....

.....

.....

SUMMARY DATA

	Rs(000)
A. GROSS OUTPUT	<input type="text"/>
6.1 Receipts from services provided
B. INTERMEDIATE CONSUMPTION	<input type="text"/>
2.2.6 Training expenses
3.1 Electricity, water and waste water charges
3.2 Fuel consumed
3.3 Material consumed
3.4 Expenditure on services, excluding ICT related services
5.4 Expenditure on ICT services
C. VALUE ADDED (A-B)	<input type="text"/>
D. COMPENSATION OF EMPLOYEES (2.2 - 2.2.6 - 2.2.5(i))	<input type="text"/>
E. OTHER TAXES ON PRODUCTION (2.2.5(i) + 4.1.1 - 7.1.4)	<input type="text"/>
F. GROSS OPERATING SURPLUS (C - D)	<input type="text"/>
G. TOTAL VALUE OF ADDITIONS (5.5 + 8.1 - 8.1.2)	<input type="text"/>
<i>of which new</i>	<input type="text"/>

CONFIDENTIAL

CEAS 1



SERIAL NUMBER

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REPUBLIC OF MAURITIUS

CENTRAL STATISTICS OFFICE

Ministry of Finance and Economic Development

2007 COLLECTION OF STATISTICS OF ECONOMIC ACTIVITIES

SMALL AND ITINERANT UNITS

MANUFACTURING, TRADE AND SERVICES

REFERENCE MONTH

--	--

GEOGRAPHICAL DISTRICT, MUNICIPAL/VILLAGE COUNCIL AREA

--	--	--	--

URBAN/RURAL

--

NSIC CODE

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NAME OF INTERVIEWER: DATE SUBMITTED:

NAME OF SUPERVISOR: DATE SUBMITTED:

FOR OFFICE USE

EDITED AND CODED BY: INPUT BY:

CHECKED BY: VERIFIED BY:

1. CHARACTERISTICS OF ESTABLISHMENT

1.1 Name of establishment

1.2 Address of establishment

.....

(Circle appropriate code)1.3 Is the establishment registered with the Registrar of Businesses? **Yes 1 No 2**

1.4 Activities of establishment

1. Main activity

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2. Secondary activity (if any) (i)

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(ii)

--	--	--	--	--

1.5 Date of start of operation: Month Year

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1.6 Location of work place (*circle appropriate code*)

(i) Commercial/industrial building 1 (iv) In the yard 3

(ii) Partly residential building 2 (v) Fixed stall in market/fair 4

(iii) Within owner/partner's home 3 (vi) Other (*specify*) 51.7 Floor area of premises in **m²** (if applicable)

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1.8 Type of ownership of establishment (*circle appropriate code*)

(i) Individual proprietor 1 (iv) Company 4

(ii) Household members 2 (v) Cooperative 5

(iii) Partnership with members 3 (vi) Non profit institution 6

of other household 3 (e.g. APEIM, PILS, etc.)

(vii) Other (*specify*) 7*skip
to 1.12***(Circle appropriate code)**1.9 Is the establishment's expenditure separate from that of the owner's household? **Yes 1 No 2**1.10 Are the establishment's assets separate from those of the owner's household? **Yes 1 No 2**1.11 Do you keep any record of accounts (Receipts & Expenditure) for your establishment? **Yes 1 No 2**1.12 Is the establishment operating under any particular scheme? **Yes 1 No 2**If Yes, specify

--

1.13 Was the establishment operating under any particular scheme, prior to 2006? **Yes 1 No 2**If Yes, specify

--

2. EMPLOYMENT, HOURS OF WORK AND LABOUR COST FOR THE REPORTING MONTH

2.1 Employment (including expatriates) and hours of work

Employment status	Number of persons engaged on last Thursday of the month				Total hours worked during the month
	Full time		Part time ¹		
	Male	Female	Male	Female	
1. Employer					
2. Own account worker					
3. Employee including apprentice					
4. Contributing family worker					
5. Other (<i>specify</i>)					
Total					
<i>of whom expatriates</i>					

2.2 Outworkers (i.e. persons working for the establishment at home)

1. Number of outworkers

2. Payment to outworkers(Rupees)

2.3 Wages, salaries and other benefits paid for the reporting month (excluding those of outworkers)

	Male				Female				Total			
1. Wages and Salaries												
2. Overtime payments												
3. Travelling allowance												
4. Payment in kind												
5. Employer's contribution to:												
(i) HRDC												
(ii) N.P.F												
(iii) Other (e.g. NSF, etc)												
6. Training expenses												
7. Other (<i>specify</i>)												
Total												

¹ Persons working less than half of usual working hours of the establishment

3. CONSUMPTION OF MATERIALS, FUEL AND SERVICES DURING THE REPORTING MONTH

3.1 Electricity & water consumed, and waste water charges for reporting month at purchaser's price¹

Description	(Rupees)
1. Electricity	
2. Water	
3. Waste water charges	

3.2 Fuel consumed during reporting month at purchaser's price¹ (Rupees)

	Diesel	Gasoline	LPG (Gas)	Other	Total
1. Fuel for plant and machinery					
2. Fuel for vehicles					
3. Fuel for other purposes					
Total					

3.3 Materials consumed during reporting month at purchaser's price¹ (excluding electricity, water, fuel and ICT related materials)

Description of main materials	(Rupees)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
Total	

¹ Excluding deductible VAT

3.4 Expenses on services at purchaser's price¹ (excluding IT & telecommunications related services)

Description of services		(Rupees)							
1. Printing and stationery									
2. Postage									
3. Warehousing and storage									
4. Hire of transport									
5. Security services									
6. Consultancy and management services									
7. Rental of machinery and equipment									
8. Environment protection services (e.g. waste disposal, pollution control, embellishment, etc.)									
9. Research and development									
10. Payment for works subcontracted									
11. Rental of premises									
12. Minor repairs and maintenance:									
(i) Machinery and equipment									
(ii) Vehicles									
(iii) Building									
(iv) Other (specify)									
13. Business services:									
(i) Accounting									
(ii) Advertising									
(iii) Other (specify)									
14. Other services (specify): (i)									
(ii)									
Total									

¹ Excluding deductible VAT

4. OTHER PAYMENTS

4.1 Other payments

Description	Imputed monthly amount(Rs)
1.Rates and licenses:	
(i) Trade licence	
(ii) Tenant's tax	
(iii) Road tax	
(iv) Other (<i>specify</i>)	
2.Value added tax (net amount paid)	
3. Interest (on loan, overdraft etc.)	
4. Insurance premium	
5. Income tax	
6. Purchases of shares	
7. Current transfers to abroad	
8. Other (<i>specify</i>)	
Total	

5. INFORMATION & COMMUNICATION TECHNOLOGY (ICT) RELATED SERVICES

5.1 Number of computers in use at establishment

--	--

5.2 Number of persons (working in establishment) using a computer for work purposes

(circle appropriate code)

5.3(a) Does establishment have: (i) Internet facilities Yes 1 No 2

(ii) Email facilities	Yes 1	No 2
-----------------------	-------	------

(iii) website	Yes 1	No 2
---------------	-------	------

(iv) broadband connectivity	Yes 1	No 2
-----------------------------	-------	------

5.3(b) Number of persons using the internet for business purposes

5.4 Recurrent expenses incurred for the reporting month on: Rupees

(i) telecommunication items

--	--	--	--	--	--

(e.g fixed and mobile telephone, telex, fax, etc)

(ii) internet/email account

--	--	--	--	--	--

(iii) maintenance/repairs of ICT equipment						
--	--	--	--	--	--	--

(iv) training in ICT						
----------------------	-------	--	--	--	--	--	--

(v) consultancy services in ICT						
---------------------------------------	--	--	--	--	--	--

(vi) broadband connectivity						
-----------------------------	-------	--	--	--	--	--	--

(vii) other current ICT related items (*specify*)
(e.g. toner, cartridges, etc.)

5.5 Capital expenses for the **last twelve months** on: **Rupees**

(i) purchase of software

--	--	--	--	--	--

(ii) purchase of hardware (including upgrades)						
---	-------	--	--	--	--	--	--

(iii) software development						
----------------------------	-------	--	--	--	--	--	--

(iv) website development

--	--	--	--	--	--

(v) other (*specify*)

--	--	--	--	--	--

(Circle appropriate code)

5.6(a) Does your establishment receive orders through the internet? Yes 1 No 2

If yes, state value of orders received during the last 12 months (Rs).....

5.6(b) Does your establishment place orders through the internet? Yes 1 No 2

If yes, state value of orders placed during the last 12 months (Rs).....

6. OUTPUT

6.1 Value of goods produced during reporting month at basic price¹

Description	Unit	Quantity	Value (Rs)
1.			
2.			
3.			
4.			
Total			
of which exports			

6.2 Receipts for services² provided during reporting month at basic price¹

Description of services provided	Value (Rs)
1.	
2.	
3.	
Total	
of which exports	

6.3 Contract work during reporting month (Work done for others on their own materials)

Value (Rs)
Total receipts

6.4 Trading activity during reporting month (Gross margin)

Value (Rs)
1. Total purchases during the month
2. Total sales during the month
3. Cost of goods sold (Imputed from information in diaries)
4. Gross margin (2) - (3)

¹Excluding deductible VAT

² Including all services except trading activity at 6.4

Ruppes

7. Other Receipts		Rupees					
1. Interests (on deposits, advances, etc.)							
2. Insurance claims							
3. Dividends							
4. Refund from HRDC							
5. Current transfers from abroad							
6. Other (specify)							
Total							

8. GROSS FIXED CAPITAL FORMATION

8.1 Value of additions to and sales of, fixed assets during last twelve months (excluding ICT related items reported at 5.5)

Items Reported at Sale)

Description	Sales	Rs(000)											
		Additions						of which NEW ¹					
		Total value											
1. Building and structure													
2. Land acquisition													
3. Land improvement													
4. Machinery and transport equipment:													
(i) Production equipment													
(ii) Transport equipment													
(iii) Other (specify)													
5. Furniture and fittings													
6. Other (specify)													
Total													

¹ including second hand imported (for items 4-6)

8.2 No. of vehicles owned

(i) Car

(ii) Lorry

(iii) Bus

(iv) Other, specify

9. MISCELLANEOUS

Rupees

9.1 Outstanding debt

--	--	--	--	--	--	--	--

(i) Commercial Banks

.....

--	--	--	--	--	--	--	--

(ii) Development Bank of Mauritius (DBM)

.....

--	--	--	--	--	--	--	--

(iii) Other (*specify*)

.....

--	--	--	--	--	--	--	--

9.2 Monthly debt repayment

.....

--	--	--	--	--	--

Contact person(Mr/Miss/Mrs)

Status in business

Telephone No

E-mail address

INTERVIEWER'S COMMENTS

.....

.....

.....

.....

SUMMARY DATA

	Rs(000)
A. GROSS OUTPUT	<input type="text"/>
6.1 Value of goods produced
6.2 Receipts from services provided
6.3 Contract work
6.4.4 Gross margin
B. INTERMEDIATE CONSUMPTION	<input type="text"/>
2.2.2 Payments to outworkers
2.3.6 Training expenses
3.1 Electricity, water and waste water charges
3.2 Fuel consumed
3.3 Materials consumed
3.4 Expenditure on services, excluding ICT related services
5.4 Expenditure on ICT related services
C. VALUE ADDED (A-B)	<input type="text"/>
D. COMPENSATION OF EMPLOYEES (2.3 - 2.3.6 - 2.3.5(i))	<input type="text"/>
E. OTHER TAXES ON PRODUCTION (2.3.5(i) + 4.1.1 - 7.1.4)	<input type="text"/>
F. GROSS OPERATING SURPLUS (C - D)	<input type="text"/>
G. TOTAL VALUE OF ADDITIONS (5.5 + 8.1 - 8.1.2)	<input type="text"/>
<i>of which new</i>	<input type="text"/>

Interregional Cooperation on Measurement of the Informal Sector and Informal Employment

Generic Questionnaire for Phase 1 of “1-2 Survey”

The objectives of the Phase 1 Questionnaire are:

- (1) To identify and construct a sampling frame of household unincorporated enterprises engaged at least partially in market production (HUEMs) among the enterprises in which employed persons work;
- (2) To provide data for estimating employment in informal sector enterprises; and
- (3) To provide data for estimating informal employment.

In this document, the questionnaire items relating to each of these objectives are grouped into three modules—a module to identify HUEMs, a module on the registration and employment size criterion for identifying informal sector enterprises, and a module on informal employment.

These questions should be preceded by questions for identifying employed persons, including employment in second jobs, as formulated in a standard labour force survey which follows the international recommendations on employment and unemployment.

Questionnaire Module for Identifying Household Unincorporated Enterprises engaged at least partially in market production (HUEM) in the LFS

The questions in the module, labeled QHUEM, obtain information on the characteristics of the enterprise where employed persons work with the objective of identifying household unincorporated enterprises engaged, at least partially, in market production (HUEMs). The information collected pertain to three criteria—(1) legal organization, (2) book-keeping practice and (3) product destination. The questions provide the necessary information for constructing a frame of HUEMs.

These questions apply to all employed individuals regardless of status in employment, unless otherwise specified, and are to be asked with reference to the first job and, where applicable, separately also for the second job.

QHUEM0. These two questions are asked in order to obtain the physical location of the enterprise which is needed for constructing a frame of HUEMs. In addition, QHUEM0_1 is useful for identifying specific types of workers in the informal sector such as homeworkers, street vendors, etc. When integrated into the LFS questionnaire, it is recommended that these questions follow the question on status in employment.

QHUEM0_1. Where do you mainly undertake your work?

- ***Fixed premises***
- Home of employed person
 1. At my home with no special work space
 2. At my home with work space inside/attached to the home)
- Establishment outside of the home of employed person

3. Business premises with fixed location independent from my home (e.g. factory, office, workshop, shop, kiosk, etc)
4. Farm or individual agricultural/subsidiary plot
5. Home or workplace of client
6. Construction site
7. Market, bazaar stall, trade fair
8. Street pavement or highway with fixed post
 - Employer's home (e.g., domestic help)
9. Employer's home
 - **No fixed premises**
10. Transport vehicle
11. No fixed location (e.g., mobile; door-to-door; street without fixed post)

Note: Include additional places of work which are common, specific to national situations (e.g., mining site; railway station; garbage area)

90. Other, specify ...

QHUEM0_2. What is the full name and address/location of the enterprise in which you work/are employed, or the name and address of your employer?

The name and address of the establishment where I work or of my employer are:

Name of enterprise/employer: _____

Address: _____

Notes: Operational notes

a) If QHUEM0_1=1 or 2, the business address is the same as the house address.

b) If QHUEM0_1 ~ = 1,2 or 3 and if the status of employment of the employed person is employer, own account or contributing family worker, then the business address is the same as the house address.

=====

HUEM1. On legal organization

This sequence of three questions are intended to distinguish private unincorporated enterprises from corporations, quasi-corporations, non-profit institutions, and government.

QHUEM1_1 filters out all enterprises that are not privately owned.

QHUEM1_1: What is the type of ownership of the enterprise in which you work?

- | | |
|---|-------------------------------------|
| 1. National/local government/public sector | <i>Not HUEM- Skip rest of QHUEM</i> |
| 2. State-owned (fully or partly) enterprise | <i>Not HUEM- Skip rest of QHUEM</i> |
| 3. Nonprofit institutions, NGOs (e.g., development organizations), associations, international agencies | <i>Not HUEM- Skip rest of QHUEM</i> |
| 4. Privately owned enterprise | Go to QHUEM1_2 |
| 5. Private employer | Go to QHUEM1_2 |

Note: Codes 1-3 cover enterprises that are definitely not in the household sector.

Note: Code 5- “Private employer” refers to the case where an employee is employed by a household as domestic worker (e.g., maid, gardener, driver, nanny, utility worker).

Note: As in QHUEM1_1, in what follows, “Skip rest of QHUEM” means that the enterprise in which the employed person works is not a HUEM.

A privately-owned enterprise may be further classified by legal status. The objective of this question is to identify unincorporated enterprises from all other private enterprises. The categories for legal status in QHUEM1_2 should reflect those prescribed in existing laws and regulations of the country. The generic categories listed below should be made more specific according to these laws or regulations.

QHUEM1_2: What is the legal status/organization of the private enterprise where you work?

- | | |
|--|-------------------------------------|
| 1. Joint stock company/corporation | <i>Not HUEM- Skip rest of QHUEM</i> |
| 2. Limited liability company/partnership | <i>Not HUEM- Skip rest of QHUEM</i> |
| 3. Registered cooperative | <i>Not HUEM- Skip rest of QHUEM</i> |
| 4. Individual business/partnership with members of household | Go to QHUEM2_1 |
| 5. Ordinary partnership with members of other households | Go to QHUEM2_1 |
| 6. Private household employing domestic staff | <i>Not HUEM- Skip rest of QHUEM</i> |
| 90. Other, specify _____ | Go to QHUEM1_2a |
| 98. Do not know | Go to QHUEM1_2a |

Note: Codes 4 and 5 pertain to household enterprises.

Note: Code 6- Private household employing domestic staff are considered as non-market household enterprises engaged in producing services for own final use and, thus, are not HUEMs.

Note: QHUEM1_2a is intended to supplement QHUEM1_2; it is designed to elicit a response from those who are not able to classify the legal status of their enterprises into any of the specified response categories.

QHUEM1_2a: At which type of enterprise do you work?

- | | |
|---|-------------------------------------|
| 1. Factory or plantation | <i>Not HUEM- Skip rest of QHUEM</i> |
| 2. Bank or insurance company | <i>Not HUEM- Skip rest of QHUEM</i> |
| 3. Commercial/restaurant/service chain | <i>Not HUEM- Skip rest of QHUEM</i> |
| 4. Construction company | <i>Not HUEM- Skip rest of QHUEM</i> |
| 5. Private hospital or school | <i>Not HUEM- Skip rest of QHUEM</i> |
| 6. Engineering firm | <i>Not HUEM- Skip rest of QHUEM</i> |
| 7. Farm, small workshop/garage/shop/restaurant/service shop | Go to QHUEM2_1 |
| 90. Other, specify ... | Go to QHUEM2_1 |

Note: Codes 1-6 are intended to cover the most common types of enterprises that are likely to be incorporated.

=====

HUEM2. Book-keeping and accounting practices

This set of questions are intended to distinguish household unincorporated enterprises from other unincorporated enterprises.

As household production units, these enterprises do not constitute separate legal entity independently of the household members who own them. Fixed and other capital used does not belong to the enterprise as such but to the household members. As expenditure for production is often indistinguishable from household expenditure and capital equipment such as buildings or vehicles may be used indistinguishably for business and household purposes, these enterprises do not keep complete set of accounts, thus can not be treated as quasi-corporations and delegated to the corporate sector.

To obtain this information, different questions are asked for own-account workers, employers, and contributing family workers (QHUEM2_1 – QHUEM2_3) and for employees (QHUEM2-4).

The categories for book-keeping and accounting practices in QHUEM2_1 should reflect those prescribed in existing laws and regulations of the country. The generic categories listed below should be made more specific according to these laws or regulations.

For own-account workers, employers, and contributing family workers

QHUEM2_1: How does your enterprise/business maintain its records or accounts?

- | | |
|---|-------------------------------------|
| 1. Complete bookkeeping (<i>balance sheet and operating statements</i>) | <i>Not HUEM- Skip rest of QHUEM</i> |
| 2. Simplified legal accounts | Go to QHUEM2_2 |
| 3. Only through informal records of orders, sales, purchases | Go to QHUEM2_2 |
| 5. No written records are kept | Go to QHUEM2_2 |
| 90. Others, specify ... | Go to QHUEM2_2 |

Notes:

Code 1- Complete bookkeeping corresponds to legal requirements for corporations, as specified in the relevant corporate laws. All businesses that keep such accounts are definitely not unincorporated enterprises.

Code 2- Simplified legal accounts takes care of the situations where existing laws and legislations require specific types of businesses to submit formal accounts, such as for payment of taxes, but are different from the requirements for corporations.

QHUEM2_2 and QHUEM2_3 are additional questions that intend to further clarify the nature of the accounts kept by the business and serve as consistency checks for the responses given in QHUEM2_1.

QHUEM2_2: As owner of the business, are you able to take out a bank loan in the name of the business?

1. Yes
2. No
98. Don't know

Note: In QHUEM2_2, if a bank loan is taken out in the name of the business this means that formal sets of accounts must be available; it also means that the business has a legal status separate from that of its owner.

QHUEM2_3: As owner of the enterprise do you pay tax on income from the business?

1. Yes, separately in the name of the business [*refers to corporate tax, business tax or tax on profits; not VAT, license tax, etc*]
2. Yes, as part of my personal income tax
3. No
80. Not applicable
98. Don't know

Note: The categories in QHUEM2_3 should reflect the type of taxes on income from business specified in the country's tax laws. These terminologies should be used. Code 1 refers to taxes paid by corporations and quasi-corporations. Code 2 corresponds to taxes paid by unincorporated enterprises.

For employees:

QHUEM2_4: Do you get a pay slip?

1. Yes, complete with information on withholding tax payments, regular and overtime pay, deductions for social security, employer's contribution to social security, insurance, etc
2. Yes, simple pay slip
3. No

Note: The response categories reflect the nature of book-keeping and accounting practices of the business. Code 1 implies that the business keeps a formal set of accounts.

HUEM3. Product destination- at least some part of output is marketed

This question determines if the HUEM production is marketed, at least in part. This is the last question for identifying HUEMs.

For all employed persons

QHUEM3_1: Does the enterprise you own/where you work sell or barter its goods and/or services?

1. Yes, at least some part of it on a regular basis
2. Yes, at least some part of it from time-to-time
3. No
4. Don't know

Not HUEM
Not HUEM

Identifying HUEMs

The following table presents the conditions under which an enterprise in which a persons works is a HUEM

<i>Where status in employment= employer, own account worker or contributing family worker</i>	
1	QHUEM1_1= 4 &QHUEM1_2= 4 or 5 & QHUEM2_1 ~=1 & QHUEM3_1= 1 or 2
2	QHUEM1_1= 4 &QHUEM1_2= 90 or 98 &QHUEM1_2a= 7 & QHUEM2_1 ~=1 & QHUEM3_1= 1 or 2

<i>Where status in employment= employee</i>	
1	QHUEM1_1= 4 &QHUEM1_2= 4 or 5 & QHUEM2_4 ~=1 & QHUEM3_1= 1 or 2
2	QHUEM1_1= 4 &QHUEM1_2= 90 or 98 &QHUEM1_2a= 7 & QHUEM2_4 ~=1 & QHUEM3_1= 1 or 2

Note. There are some issues related to the use of the information provided by employees for identifying HUEMs. The first is that the information provided may not be accurate; it has been shown that the chances are high that employees may not know the characteristics of the enterprises in which they work. The second is that, given that the information is accurate, there is a risk that the employer may take issue with the fact that he or she was included in a survey because of information provided by an employee. This could be so in the case, for example, when the business is concealing its labour practices or non-registration status or non-tax paying status.

Thus, the statistical office will need to assess these risks when deciding whether to include or exclude employee-identified HUEMs for the phase 2 survey.

Questionnaire Module for Identifying Informal Sector Enterprises

This module consists of questions on employment size and registration of the enterprise. These are considered the main additional criteria for delineating informal sector enterprises from among HUEMs.

Apart from HUEMs, the ICLS definition of informal sector contains additional enterprise-based criteria about the size of employment, the non-registration of the enterprise and/or its employees of which their application may vary depending on national considerations and circumstances. These additional criteria are applied to restrict the scope of informal sector enterprises from among HUEMs to the following two sub-sets of enterprises:

- a) Own-account enterprises: either all own-account enterprises may be considered informal, or only those not registered under specific forms of national legislation (such as commercial laws, tax and social security laws and regulatory laws).*
- b) Enterprises of employers: enterprises may be considered informal if they meet one or more of the following: (1) small size of the enterprise in terms of employment, (2) non-registration of the enterprise, and (3) non-registration of its employees.*

With these additional criteria, the production unit in the informal sector is defined as a household enterprise with at least some production for sale or barter for which one or more of the criteria of a limited size of employment, the non-registration of the enterprise and/or its employees are met.

The questions should be preceded by questions for identifying HUEMs (see Questionnaire Module for Identifying HUEMs in the LFS). For purposes of obtaining a unifying definition of the informal sector, the category/responses presented in this module should be used uniformly by countries. While countries should be able to tabulate results of the survey based on national definitions of the informal sector, the survey results should also provide information to enable tabulations using the unifying definition of the informal sector.

The questions apply to all employed individuals regardless of status in employment, unless otherwise specified. The questions are to be asked with reference to the main job and, where applicable, separately also for secondary jobs.

=====

IS1. Employment size

QIS1_1 provides information on the total size of the enterprise. QIS1_2 provides information needed for estimating total employment in the informal sector. QIS1_3 specifically asks about the number of paid employees; the data is needed to be able to implement the Delhi group recommendations on international comparability.

QIS1_1: How many persons (including yourself) usually work in your enterprise/the enterprise where you are employed?

1. Only myself
2. 2 - 5
3. 6 - 9
4. 10 - 19
5. 20 - 49
6. 50 - 99
7. 99 - 499
8. 500 or more

Note: The response categories may be expanded as may be relevant to specific country laws such as those defining sizes of micro-, small-, and medium enterprises.

QIS1_2: Please give the exact number:

Total /_/_/_/_/ **Women** /_/_/_/_/ **Men** /_/_/_/_/

Note: This question must have a response if QIS1_1={1, 2, 3, 4}.

QIS1_3: How many are paid employees?

1. less than 5
2. 5 or more

or

Number of paid employees:

Total /_/_/_/_/ **Women** /_/_/_/_/ **Men** /_/_/_/_/

=====

IS2. Registration

Two options are presented here for obtaining information on registration status of an enterprise.

Option 1- Obtain directly information about status and type of registration

QIS2_1: Is the enterprise in which you work registered in any national/state or local government agency?

- | | |
|--|--------------|
| 1. Yes | |
| 2. Is in the process of being registered | |
| 3. No | Skip QIS2_1a |
| 4. Do not want to answer | Skip QIS2_1a |
| 90. Do not know | Skip QIS2_1a |

QIS2_1a: Under which form is the enterprise registered?

- | | | |
|---|-----|----|
| 1. Tax agency | Yes | No |
| 2. Business registration, local government | Yes | No |
| 3. Business registration, national legislation | Yes | No |
| 4. Social security agency | Yes | No |
| <i>Other response categories applicable to national circumstances</i> | Yes | No |

Note: Nomenclature used in the response categories above should be consistent with the legal registration process in the country and should distinguish between registration mandated by law for ALL enterprises and those that are for specific types of activities (e.g., related to licensing, health inspections, small/medium). Since an enterprise may be required to register in more than one agency, this is formulated as a multiple response question.

Option 2

QIS2_1': What is the type of tax payment by the enterprise?

1. No tax payment
2. Corporate tax
3. Other types of taxes (e.g., *lump sum tax, special regime tax, patente*)

Note: Nomenclature use in response categories codes 2 and 3 above should be consistent with the tax laws of the country.

Questionnaire Module on Informal Employment in the LFS

For employees only: (to be asked for main job and, where applicable, also for secondary jobs)

Several aspects pertaining to the informality/formality of jobs are covered by the questions. The objective is to be able to analyze nature of informality as well as degree (according to number of conditions that hold) of informality.

QIE1: What is the duration/nature/stability of your employment?

1. Permanent job/business/unpaid family work
2. Short-term or seasonal or casual job/unpaid family work
3. Worked for different employer on day-to-day or week-to-week basis

QIE2: Are the terms of your employment covered by a written contract?

1. Yes, I have a written contract for long-term employment
2. Yes, I have a written contract for short-term employment
3. No, I only have a verbal contract
4. No, I do not have any contract

QIE3: Does your employer pay contributions to the legislated pension fund for you?

1. Yes
2. No
3. Do not know

QIE4: Do you benefit from paid annual leave/holiday leave or from compensation instead of it?

1. Yes
2. No
3. Do not know

QIE5: In case of incapacity to work due to health reasons, would you benefit from paid sick leave?

1. Yes
2. No
3. Do not know

QIE6: In case of birth of a child, would you be given the opportunity to benefit from maternity leave?

1. Yes
2. No
3. Do not know
4. Not applicable

QIE7: Unless there is due cause, could your employment be terminated by your employer without advance notice?

1. Yes
2. No
3. Do not know

QIE8: In case of termination of employment (either initiated by you or your employer), would you receive the benefits and compensation specified in the existing labour laws?

1. Yes
2. No
3. Do not know

Classifying Jobs of Employees as Informal Jobs

1. “At least one” criterion: A job is said to be informal if at least one of the responses to questions QIE1 – QIE8 corresponds to “informal job”:

Question	Response category	
	Formal job	Informal Job
QIE1	1	2, 3
QIE2	1, 2	3, 4
QIE3	1	2
QIE4	1	2
QIE5	1	2
QIE6	1	2
QIE7	2	1
QIE8	1	2

2. A minimum (>1) specified set of benefits is not received— can be developed with the objective of analyzing degree of informality

Generic Questionnaire for Survey on Household Unincorporated Enterprises & the Informal Sector

NOTE: IDENTIFICATION PARTICULARS, INCLUDING RECORD LINKAGES TO RESPONDENT'S LFS QUESTIONNAIRE, QUALITY INDICATORS, AND OTHER STANDARD CONTROL INFORMATION SHOULD BE INCLUDED IN THIS QUESTIONNAIRE.

ILLUSTRATIVE EXAMPLE:

0. GENERAL INFORMATION											
Name of Business:				Identification Code (To be copied from the LFS Form of Operator)							
Name of Operator:				Aimag Code		SAMPLE PSU No.		Sample Household No.		Person ID No.	Job 1- Main 2-2 nd
DATE OF THE INTERVIEW											
Day: <input type="text"/>		Month: <input type="text"/>		Year 0 <input type="text"/>							
Interviewer's name			Characteristics of the operator (To be copied from the LFS Form of Operator)								
Supervisor's name			Relationship to head (col 2) <input type="text"/>								
Data encoder's name			Sex (col 3) <input type="text"/>								
			Age (col 5) <input type="text"/>								
Date of data entry				Characteristics of the HUEM as Identified in LFS (To be copied from the LFS Form of Operator)							
Day: <input type="text"/> Month: <input type="text"/> Year: 0 <input type="text"/>				Place of work <input type="text"/>		Accounts <input type="text"/>					
QUALITY OF THE INTERVIEW 1- Very Good 4- Bad 2- Good 5- Very Bad 3- Average				Activity <input type="text"/>		Registration <input type="text"/>					
				Legal Status <input type="text"/>		Size <input type="text"/>					
DURATION OF THE INTERVIEW											
Starting time: <input type="text"/> H <input type="text"/> MN								Total Duration (MN)			
End time: <input type="text"/> H <input type="text"/> MN								<input type="text"/>			

Section 1. FILTERS

The questions in this section are to be asked in a 1-2 survey approach when there is a time lag (e.g., one month) between the LFS survey and HUEM survey to ascertain whether or not the sampled business is a HUEM, and therefore, an eligible unit for the survey.

1.1 In your main or secondary job during the {last month}, you were:	CODING ONLY
1- Employer 2- Own account worker 3- Employee 4- Unpaid family worker 5- I did not operate any business/have a job last month 6- Others, specify: _____	|_|
1.1.1 Ask if response in 1.1 is code 3-6. Why is this different from the employment status recorded during the labour force survey interview?	|_|
1- Unemployed or not active now because business has closed since LFS interview 2- Changed job since the LFS interview 3- Information given in LFS is not correct 4- Others, specify: _____	
IF CODE 3 OR 4 in 1.1.1, TERMINATE INTERVIEW. OTHERWISE, GO TO 1.2.	
1.2 What is the legal status of your business?	
{NOTE: Options depend on the business laws of the country.}	
1- Individual business or business in partnership with members of household 2- Ordinary partnership with members of other households 2a- Number of partners living in the same enumeration area: _____ 2b- Number of partners living outside the enumeration area: _____ 3- Corporation 4- Limited liability company/partnership 5- Others, specify: _____	|_|
	2a |_| 2b |_|
1.2.1 Ask if response in 1.2 is code 3-6. Why is this different from the information on legal status recorded during the labour force survey interview?	|_|
1- Information given in LFS is not correct 2- Others, specify _____	
IF CODE 1 in 1.2.1, TERMINATE INTERVIEW. OTHERWISE, GO TO 1.3.	
1.3 What type of business-related records or accounts do you keep?	
{NOTE: Options depend on the business laws, including tax laws, of the country.}	
1- Complete bookkeeping (balance sheet and operating statements) 2- Simplified legal accounts 3- Informal records of orders, sales, purchases 4- No written records are kept	|_|
1.3.1 Ask if response is code 1 in 1/3. Why is this different from the information provided during the labour force survey interview?	|_|
1- Information given in LFS is not correct 2- Others, specify _____	
IF CODE 1 in 1.3.1, TERMINATE INTERVIEW. OTHERWISE, GO TO NEXT QUESTION.	

SECTION 2 ORGANIZATION OF BUSINESS

NOTE: Questions 2.1- 2.9 are the minimum recommended data items for this section.

2.1 What is the main activity (product made and/or sold/ service provided for pay) of your business?		<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> ISIC Code
2.2 In which year was this business established?		<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.3 In which type of premises do you conduct this business activity? <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>Without professional premises</u> 01 Hawking/mobile 02 Improvised post on the road 03 Permanent post on the road 04 Vehicle (car, truck, motor bike, bike) 05 Customer's home 06 In my home without special installation 07 In my home with special installation 08 Improvised post in a market 09 Garbage area 10 Other (specify) _____ </div> <div style="width: 45%;"> <u>With professional premises</u> 11 Permanent premises in a market (shop, kiosk, shed) 12 Workshop, shop, restaurant, hotel 13 Taxi station in permanent structure/ Public transport with fixed route 14 Mining site 15 Other (specify) _____ </div> </div>		<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.4 In addition to the main activity you described above, do you carry out other activities in this place of business?	1 Yes 2 No	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.5 Do you have other places of business where you also conduct your main activity?	1 Yes 2 No → <div style="border: 1px solid black; padding: 2px; display: inline-block;">Skip to 2.6</div>	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.5.1 If YES to 2.5, how many other places?		<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.6 Is your business registered in any of the following? <i>NOTE: Options depend on business registration procedures for country.</i>		
2.6.1 Tax administration	1 Yes 2 No	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.6.2 Social security agency	1 Yes 2 No	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.6.3 Regulatory agency	1 Yes 2 No	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.6.4 Others, specify:	1 Yes 2 No	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.6.1. If NO to 2.6.1-2.6.4: What is the main reason for not registering your business? 1 In the process of being registered 5 Have to pay too much to register 2 Do not need to register my business 6 Could be bad for my business 3 Do not know if I have to register 7 Other (specify) _____ 4 Too many requirements to complete registration		<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.7 Do you have a bank account in the name of this business?	1 Yes 2 No	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.8 What type of accounts do you keep for this business? 1 No accounts 2 Informal records for personal use 3 Simplified accounting format required for tax payment 4 Detailed formal accounts (balance sheets) 5 Other (specify) _____		<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
2.9 Do you run a business in other locations which is different from this main activity?	1 Yes 2 No	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>

2.9.1 If YES to 2.9, how many other places? NOTE: Administer a separate HUEM questionnaire for each such business.	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
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NOTE: Questions covering characteristics related to policy concerns can follow this section; e.g., non-registration, business formation, initial capitalization. Some examples are included below.

ON PLACE OF BUSINESS:

<u>Without professional premises.</u> Why do you conduct your business activity in this place? 1 Could not find professional premises 2 Cannot afford to rent or to buy professional premises 3 I do not need it 4 It is the most convenient and profitable location 5 Other (specify) _____	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
<u>With professional premises:</u> What is the occupancy/tenure status of this place? 1 I own it/ Am part owner 2 Rented with contract (long-term; daily) 3 Rent-free, with permission (borrowed) 4 Rent-free, without permission (squatting) 5 Other (specify) _____	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>

ON BUSINESS FORMATION:

Who started this business? 1 I started it alone 2 I started it with business partners 3 Business partners 4 My family 5 Others, specify: _____	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
What was your main reason for engaging in this business? 1 Could not get salaried work 2 To get higher income 3 Prefer to be my own boss 4 It is a family tradition 5 Need additional income 6 Other (specify) _____	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>

ON NON-REGISTRATION:

What is the main reason for not registering your business? 1 In the process of being registered 2 Do not need to register my business 3 Do not know if I have to register 4 Too many requirements to complete registration 5 Have to pay too much to register 6 Could be bad for my business 7 Other (specify) _____	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
In your opinion, what is the main advantage of registration? 1 No advantage 2 Do not know 3 Access to loans or financial assistance 4 Eligibility for support programs (non-financial) 5 Better chance of selling to state enterprise /private companies 6 Access to best business location 7 Publicity 8 Other (specify) _____	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>

NOTE: Questions 3.1-3.2 are the minimum recommended data items for this section.

3. EMPLOYMENT AND COMPENSATION										
3.1 How many persons, including yourself, worked in your business even for just an hour during the <u>last month of operation</u> ?								TOTAL:		□□□□
								How many, wage earners?		□□□□
3.2 Characteristics of those who worked during the <u>last month</u> your business operated										
Name		Sex	Age (yrs)	Status	Out-worker	Contract	Payment	Total working hours	Wages & Salaries	<u>Sex codes</u> 1- Male 2- Female <u>Status codes</u> 1- Boss/employer 2- Own-account worker 3- Wage earner 4- Paid apprentice 5- Non-paid apprentice 6- Unpaid family worker 7- Partner <u>Outworker codes</u> 1- Employee who works outside business premises (e.g., homemaker) 2- Not outworker <u>Contract codes</u> 1- Operator 2- Written contract without fixed duration 3- Written contract with fixed duration 4- Verbal agreement 5- On trial/probation 6- No contract <u>Payment codes</u> 1- Fixed monthly/weekly salary 2- Daily or per hour of work 3- Per job/task basis 4- Commission 5- Profit share 6- In kind payment 7- No payment
(1)		(2)	(3)	(4)	(5)	(6)	(8)	(9)	(10)	
1		□	□□	□	□	□	□	□□□	□□□□□	
2		□	□□	□	□	□	□	□□□	□□□□□	
3		□	□□	□	□	□	□	□□□	□□□□□	
4		□	□□	□	□	□	□	□□□	□□□□□	
5		□	□□	□	□	□	□	□□□	□□□□□	
6		□	□□	□	□	□	□	□□□	□□□□□	
7		□	□□	□	□	□	□	□□□	□□□□□	
8		□	□□	□	□	□	□	□□□	□□□□□	
9		□	□□	□	□	□	□	□□□	□□□□□	
10		□	□□	□	□	□	□	□□□	□□□□□	
11		□	□□	□	□	□	□	□□□	□□□□□	
12		□	□□	□	□	□	□	□□□	□□□□□	
3.2.1 MONTHLY TOTAL									□□□□□	
									x 1,000	

NOTE: Include other characteristics, depending on policy concerns, such as relationship to owner/operator, educational attainment, training, how they were recruited, occupation, etc.

NOTE: This information can also be collected for each worker.

3.3. Allowances and bonuses paid to workers (last month of operation). These include:		CODING ONLY
<ul style="list-style-type: none"> ▪ Social insurance paid by employer ▪ Other allowances and bonuses such as: end of year bonuses, paid leaves. 		
3.3.1.	Total social insurance paid by employer: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (unit of currency)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> x 1,000
3.3.2.	Total of all other allowances/bonuses: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> unit of currency	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> x 1,000
3.3.3. MONTHLY TOTAL		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> x 1000

NOTE: Depending on policy-related concerns, additional questions may be asked regarding types of benefits received by workers, registration with social security agency, coverage of private social insurance (if applicable), etc. Other issues for which questions may be formulated: problems with workers, how wages of workers are determined, etc. Some examples:

If you employ workers, have you had the following problems with your workers?		
a)	Lack of workers, in general	1 Yes 2 No <input type="text"/>
b)	Lack of skilled workers	1 Yes 2 No <input type="text"/>
c)	High turnover of workers	1 Yes 2 No <input type="text"/>
d)	Discipline problems/ workers are not serious about their jobs	1 Yes 2 No <input type="text"/>
e)	Wages/salaries are too high	1 Yes 2 No <input type="text"/>
f)	Problems with labour unions	1 Yes 2 No <input type="text"/>
g)	Other (specify) _____	1 Yes 2 No <input type="text"/>
How do you usually set your workers' salaries/wages?		
1 Following the official salary scale		<input type="text"/>
2 Comparable to what competitor's pay		
3 According to what I think will be beneficial to the business		
4 Negotiating on case-to-case basis		
5 Other (specify) _____		
6 There are no wage workers in this enterprise		
Are you planning to increase your manpower within the next 12 months?		1 Yes 2 No <input type="text"/>
If YES, how many additional persons are you planning to hire?		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
If you were to engage wage-earners, whom will you prefer to hire?		
1 Relatives, recommended people, regardless of experience or qualifications		<input type="text"/>
2 Former wage-earner of a state enterprise or private corporation		
3 Former wage-earner of a small business		
4 Former apprentice		
5 Anyone (no particular preference)		
6 Other (specify) _____		

NOTES on Section 4- Production and Sales (Last Month of Operation)

The questions in this section are designed to collect data on revenue/turnover (value of shipments, receipts for services and other revenue).

Questions 4.1-4.4

Question 4.1 asks for a rough estimate of total monthly turnover. Questions 4.2-4.4 obtains more detailed information using a worksheet which is described below

For purposes of reporting, production and sales of main activities are categorized as:

- (1) Products transformed and sold
- (2) Products sold without transformation
- (3) Services provided

The format for recording is a worksheet constructed to aid recall as well as to obtain information on specific goods and services produced. For the last month in which the business operated, the worksheet is completed as follows:

- individual products and services are listed in the appropriate category, and coded using the product classification
- to aid recall, value of sales or receipts for services for the month for each product/service is computed for a period that is most suitable (e.g., daily, weekly)
- for the selected period of recall, a convenient unit of measurement (e.g., piece, kilograms, pack, bottle, trip (for transport)) is selected and information on the unit sales price and quantity sold is recorded
- monthly turnover of each product/service is computed from the above information.
- total monthly turnover for the business in each category is obtained by aggregating all products/services

Given the worksheet, total monthly turnover of the business can be computed by aggregating all three category monthly totals. In addition, data on the destination (or user, e.g., enterprise, household/individual, exports, own final use) of each product/service is also obtained.

More detailed instructions on completing the worksheet during the survey interview will have to be prepared. For example, even a small retail kiosk sells more than 6 products and a suitable prioritization and grouping of goods will have to be identified.

Questions 4.5 and 4.6

To obtain annual estimates from the monthly estimate of turnover, data on monthly fluctuations in the business are needed. For this purpose, activity in each month of the past twelve months is categorized as *no activity, average, maximum and minimum*. Data on estimated maximum and minimum monthly turnover is recorded.

4. PRODUCTION AND SALE (Last month of operation)								CODING ONLY		
Period codes: 1- Day 2- Week 3- Fortnight 4- Month 5- Quarter 6- Year Destination codes: 1- Public or para-public sector 2- Big private enterprise 3- Small private enterprise 4- Household/individual 5- Direct exportation 6- Own final use										
4.1 What was the total amount of your turnover for the last month of operation?								<div> <div></div> <div>(unit of currency)</div> </div> <div> <div></div> <div>(x 1,000)</div> </div>		
4.2 PRODUCTS SOLD AFTER TRANSFORMATION										
N°	Name of the product	Period	Unit	Quantity	Unit price (unit of currency)	Total value for period (unit of currency)	Destination	Product code	Monthly value (x1,000)	Destination
1										
2										
3										
4										
5										
6										
O										
4.2.1 MONTHLY TOTAL:										
4.3.PRODUCT SOLD WITHOUT TRANSFORMATION										
N°	Name of the product	Period	Unit	Quantity	Unit price (unit of currency)	Total value for period (unit of currency)	Destination	Product code	Monthly value (x 1,000)	Destination
1										
2										
3										
4										
5										
6										
O										
4.3.1 MONTHLY TOTAL:										

NOTE: Additional questions on business received from other enterprises are illustrated below:

In the last month of operation, did some of your customer-enterprises give you raw materials to transform for them?	1 Yes 2 No	|_|
If YES, What was the share (%) of your total turnover from these customer-enterprises?		|_|_|_|
If YES, Which type of customer is your most important customer of this type? 1 Public or para-public sector 4 Household/Individual 2 Big private enterprise 5 Direct foreign exporter 3 Small private enterprise		|_|

(Subcontracting) In the last month of operation did some of your customer enterprises impose on you, in advance, norms or timetables for your production?	1 Yes 2 No	|_|
If YES, What was the share (%) of your total turnover from these customers?		|_|_|_|
If YES, Which type of customer is your most important customer of this type? 1 Public or para-public sector 4 Household/Individual 2 Big private enterprise 5 Direct foreign exporter 3 Small private enterprise		|_|

=====

NOTES on SECTION 5- Purchases of Raw Materials and Stocks

Questions 5.1 and 5.2 are designed to obtain information on

- (1) Cost of raw materials used in production of transformed products self
- (2) Cost of good bought to be sold without transformation

The format for recording information needed to estimate monthly purchases is similar to the worksheet used in Section 4. Data on the origin or source of these goods is also obtained.

Question 5.3 is designed to obtain information on all intermediate costs.

The first five items in the worksheet are obtained from preceding items in the questionnaire on

- (1) Wages and salaries
- (2) Social insurance contributions of employers
- (3) Bonuses and other allowances
- (4) Cost of raw materials
- (5) Cost of goods bought to be sold without transformation

The other items listed in the worksheet are main intermediate cost items. The detailed breakdowns are to be adapted to the national accounting practices of countries.

5. Expenditures on Raw Materials and Stocks (last month of operation)								CODING ONLY		
Period codes: 1- Day 2- Week 3- Fortnight 4- Month 5- Quarter 6- Year Origin codes: 1- Public or para-public sector 2- Big private enterprise 3- Small private enterprise 4- Household/individual 5- Direct importation 6- Own production										
5.1. How much did you spend on raw materials used for your business?										
N°	Name of the product	Period	Unit	Quantity	Unit price (in unit of currency)	Total value for perio (unit of currency)	Origin	Product code	Monthly value (x 1,000)	Origin
1		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
O		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.1.1. MONTHLY TOTAL:								<input type="text"/>		

5.2. For products sold without transformation, how much did you spend to buy your stocks?								CODING ONLY		
N°	Name of the product	Period	Unit	Quantity	Unit price (in unit of currency)	Total value for period (unit of currency)	Origin			
1		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
O		<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.2.1. MONTHLY TOTAL:								<input type="text"/>		

5.3 Other Business Expenses					CODING ONLY	
What were your other business expenses during the last month of operation?						
N°	Charges	Period	Value in Period In unit of currency	Origin	Monthly value (x 1,000)	Origin
01	Wages and salaries (from 3.2.1)	4			|_|_|_|_|_|	
02	Social insurance (from 3.3.1)	4			|_|_|_|_|_|	
03	Bonuses & allowances (from 3.3.2)	4			|_|_|_|_|_|	
04	Raw materials (from 5.1.1)	4			|_|_|_|_|_|	
05	Purchase cost of products sold (from 5.2.1)	4			|_|_|_|_|_|	
06	Fuel, gasoline & lubricants	|_|		|_|	|_|_|_|_|_|	|_|
07	Water	|_|		|_|	|_|_|_|_|_|	|_|
08	Electricity	|_|		|_|	|_|_|_|_|_|	|_|
09	Rental payments (machinery, structures)	|_|		|_|	|_|_|_|_|_|	|_|
10	Transport services	|_|		|_|	|_|_|_|_|_|	|_|
11	Post, communication, internet	|_|		|_|	|_|_|_|_|_|	|_|
12	Other non-industrial services	|_|		|_|	|_|_|_|_|_|	|_|
13	Repair & maintenance of facilities & equipment	|_|		|_|	|_|_|_|_|_|	|_|
14	Other industrial services	|_|		|_|	|_|_|_|_|_|	|_|
15	Paid interests	|_|		|_|	|_|_|_|_|_|	|_|
16	Taxes	|_|		|_|	|_|_|_|_|_|	|_|
17	Insurance	|_|		|_|	|_|_|_|_|_|	|_|
18	Licenses, other fees	|_|		|_|	|_|_|_|_|_|	|_|
19	Other charges _____ (specify)	|_|		|_|	|_|_|_|_|_|	|_|
MONTHLY TOTAL:					|_|_|_|_|_|_|_|	
Period code: 1- Day 2- Week 3- Fortnight 4- Month 5- Quarter 6- Year Origin codes: 1- Public or para-public sector 2- Big private enterprise 3- Small private enterprise 4- Household/individual 5- Direct importation 6- Own production						

NOTES on Section 6- Capital Formation

Using a worksheet format, this section is designed to obtain information on value of fixed assets and capital expenditures:

- (1) Value of fixed assets at the beginning of the year
- (2) Capital expenditures on new and used fixed assets during the year
- (3) Value of fixed assets sold or disposed or lost during the year

Each fixed asset existing at the beginning of the year is to be listed and date of acquisition and present value is to be recorded. Depreciation will be indirectly estimated, using the information on data of acquisition and present value. A code for mode of transaction of (codes 1-4) is also to be recorded.

Fixed assets that are purchased during the year are listed separately. Date of acquisition, value and mode of transaction (codes 1-4) are to be recorded.

Any existing asset at the beginning of the year that is sold or lost during the year is to be listed again and the date and sale/disposal value recorded. A code for mode of transaction of '5-sold' or '6- loss' is to be recorded.

6. CAPITAL FORMATION						
6.1. What are the capital equipments you used for your business activity during the past 12 months?						
Mode of transaction: 1- Bought new 2- Bought used 3- Made major improvements 4- Own-produced 5- Sold 6- Loss						
Ownership codes: 1- Personal property 2- Rent 3- Lease 4- Share property						
Type	Characteristics (Short Description)	Mode of transaction	Owner-ship	Date of acquisition/sale/loss (month / year)	Value (replacement cost) x 1,000	
1	Land	a)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		b)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		O)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2	Dwellings	a)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		b)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		O)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3	Other structures	a)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		b)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4	Transport equipment	a)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		b)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		O)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
5	Other machinery and equipment	a)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		b)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		O)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6	Furniture and office equipment	a)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		b)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		O)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
7	Others	a)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		b)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		O)	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

NOTE. Information on business loans may be obtained, as illustrated below:

Within the past 12 months, did you borrow money for use in your business operations?			1 Yes		2 No → <u>Skip to 7</u>		| |	
If YES, how many loans did you take out?							| | |	
Provide information on loans:								
	Amount of loan x 1,000	Amount payable x 1,000	Origin	Use	Contract	Repay- ment	Maturity	Difficulty
Main loan	| | | | | | | |	| | | | | | | |	| |	| |	| |	| |	| | |	| |
ALL loans	| | | | | | | |	| | | | | | | |						
<u>Origin Code:</u> 1- Family or friends 2- Customers 3- Suppliers 4- Usurers (money lender) 5- Producers' associations 6- Bank 7- Micro-financing institution 8- Other _____								
<u>Use of loan code:</u> 1- Purchase of raw materials 2- Improvement of premises 3- Acquisition or maintenance of equipments 4- Payment of salary 5- Training of manpower 6- Repayment of previous debts 7- Expansion of the activity 8- Other (specify) _____								
<u>Type of contract code:</u> 1- Legally recognised agreement 2- Simple written agreement 3- Verbal agreement 4- No contract								
<u>Mode of repayment code:</u> 1- In cash 2- Goods or services (in kind) 3- Other (specify) _____								
<u>Maturity code:</u> Total duration of the credit in months (code as 99 if 99 months and above)								
<u>(Repayment) Difficulty code</u> 1- Bad business period 2- Interest rate too high 3- Maturity period too short 4- Without difficulty 5- Other (specify) _____								

=====

NOTES on questions related to policy concerns.

Questions on the registration, business environment, occupational safety, problems and prospects, support structures, social protection, are illustrated in the next sections. These questions can focus on providing data for situation analysis as well as monitoring effects of specific programs and policies that have been initiated.

BUSINESS ENVIRONMENT	
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BE1. Did you have problems with state agents from the following institutions in the exercise of your business in the past 12 months?					If yes, which type?	How was the problem settled?	In total, what is the amount of gifts and fines that you paid to these state agents in connection with your business during the past 12 months?	
							<div> <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> <div>(unit of currency)</div> </div> <div> <div>"Gifts"</div> <div>Fines</div> </div>	
1	Local administration office	1 Yes	2 No	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
2	CUSTOMS	1 Yes	2 No	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
3	Professional inspection	1 Yes	2 No	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
4	Tax administrations	1 Yes	2 No	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
5	Police and justice	1 Yes	2 No	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
6	Other_____	1 Yes	2 No	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<u>Type of problem codes</u> 1- Related to the premises 2- Related to taxes and licence 3- Related to products used/sold					4- Related to the prices 5.-Related to other rules & regulations 6.-Other (specify) _____	<u>Settlement of the problem codes</u> 1- In compliance with the law 2- Amicable settlement 3- Payment of a fine 4- Payment of a gift 5- No settlement 6- Other (specify): _____		

BE2. Customers, Suppliers and Competitors			CODING ONLY
Who is your main customer? (To whom do you mainly sell?)	1 Public or para-public sector 2 Big enterprise 3 Small enterprise	4 Household/individual 5 Direct exportation	<input type="checkbox"/>
Who is your principal supplier? (From whom do you mainly buy?)	1 Public or para-public sector 2 Big enterprise 3 Small enterprise	4 Household/individual 5 Direct importation 6 Not applicable	<input type="checkbox"/>
Do you export part of your production?		1 Yes 2 No	<input type="checkbox"/>
If YES, what percentage?			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
To which country, mainly? <u>Country codes:</u> (select main export markets)			<input type="checkbox"/>
In the <u>local/domestic market</u> , do you have competitors (i.e., enterprises selling same products/offering same services).		1 Yes 2 No	<input type="checkbox"/>
If YES, Who is your main competitor?	1 Public or para-public sector 2 Big enterprise 3 Small enterprise 4 Household/individual		<input type="checkbox"/>
Do you sell imported/foreign-made products?		1 Yes 2 No	<input type="checkbox"/>
If YES, To which country, mainly? <u>Country codes:</u> (select main countries)			<input type="checkbox"/>

IF WITH DOMESTIC COMPETITORS. With regard to your main competitors in the domestic market indicate how you are situated:			CODING ONLY
With regard to competitors	1- Local/domestic products	2- Imported/foreign products	
Your <u>sale prices</u> are :	1- Higher 2- Average/ about the same 3- Lower 4- Not applicable	1- Higher 2- Average/ about the same 3- Lower 4- Not applicable	<input type="checkbox"/> <input type="checkbox"/>
Your <u>cost prices</u> are :	1- Higher 2- Average/ about the same 3- Lower 4- Not applicable	1- Higher 2- Average/ about the same 3- Lower 4- Not applicable	<input type="checkbox"/> <input type="checkbox"/>
Your <u>quality</u> is :	1- Higher 2- Average/ about the same 3- Lower 4- Not applicable	1- Higher 2- Average/ about the same 3- Lower 4- Not applicable	<input type="checkbox"/> <input type="checkbox"/>
The sale of your products is:	1- Rapid 2- Average/ about the same 3- Slow 4- Not applicable	1- Rapid 2- Average/ about the same 3- Slow 4- Not applicable	<input type="checkbox"/> <input type="checkbox"/>
How are your prices compared with those of your main competitors that are big enterprises selling the same products or services like you? <div style="display: flex; justify-content: space-around;"> 1 Higher <u>Skip to a</u> 2 Average <u>Skip to c</u> 3 Lower <u>Skip to b</u> 4 Don't know <u>Skip to c</u> </div>			<input type="checkbox"/>
(a) By how much higher? (% higher)			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Why are your prices higher than those of these competitors? <div style="display: flex;"> <div style="flex: 1;"> 1 My equipment are less productive 2 I do not have enough customers 3 I do not have access to credit 4 Quality of my products/services is better 5 Cost of my supply is higher 6 Other (specify) _____ </div> <div style="flex: 0.5; text-align: center; vertical-align: middle;"> } → <u>Skip to c</u> </div> </div>			<input type="checkbox"/>
(b) By how much lower? (% lower)			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Why are your prices lower than those of these big competitors? 1 I do not pay taxes or pay less taxes 2 My labour costs are lower 3 My customers are less rich 4 Quality of my products/services is lower 5 Other (specify) _____			<input type="checkbox"/>
(c) How do you determine the prices of your main products or main services? 1 By fixing a constant percentage on the cost price 2 After bargaining with customers 3 According to the competitor's prices 4 Following the price fixed by the producers' association 5 Other (specify) _____			<input type="checkbox"/>

PROBLEMS & PROSPECTS			CODING ONLY
What is the main reason you chose this business activity? 1 Family tradition 2 It is the profession that I know 3 It gives better income/higher profits than other products or services 4 More stable returns than other products/services 5 Other (specify) _____			<input type="checkbox"/>
Do you have problems/difficulties related to the following aspects of your business? a) Supply of raw materials (quantity or quality) 1 Yes 2 No b) Sale of products- lack of customers 1 Yes 2 No c) Sale of products- too much competition 1 Yes 2 No d) Financial difficulties (e.g., difficult to get loan) 1 Yes 2 No e) Lack of space, adapted premises 1 Yes 2 No f) Lack of machines or equipment 1 Yes 2 No g) Organization, management difficulty 1 Yes 2 No h) Too much control, taxes 1 Yes 2 No i) Other (specify) _____ 1 Yes 2 No			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
To solve your present problems, do you wish to have help in the following areas? a) Technical training 1 Yes 2 No b) Training in organizational and financial management 1 Yes 2 No c) Assistance in obtaining supplies 1 Yes 2 No d) Access to modern machines 1 Yes 2 No e) Access to loans 1 Yes 2 No f) Access to information on the market 1 Yes 2 No g) Access to large business orders 1 Yes 2 No h) Registration of business 1 Yes 2 No i) Advertising of new products/services 1 Yes 2 No j) Other (specify) _____ 1 Yes 2 No			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Do you belong to a professional organization in your domain of business activity? 1 Yes 2 No			<input type="checkbox"/>
IF YES, For which type of difficulties does this organization help you? a) Technical training 1 Yes 2 No b) Training in organizational and financial management 1 Yes 2 No c) Assistance in obtaining supplies 1 Yes 2 No d) Access to modern machines 1 Yes 2 No e) Access to loans 1 Yes 2 No f) Access to information on the market 1 Yes 2 No g) Access to large business orders 1 Yes 2 No h) Problems/linkages with government 1 Yes 2 No i) Litigation with the competitors 1 Yes 2 No j) Security problems 1 Yes 2 No k) Other (specify) _____ 1 Yes 2 No			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>


BANKS, MICRO-FINANCE SERVICES & OTHER SUPPORT STRUCTURES		CODING ONLY
(a) Have you ever applied for a bank loan for your business? 1 Yes 2 No → Skip to b		|_|
IF YES , Did you succeed in obtaining a loan? 1 Yes 2 No → Skip to d		|_|
(b) If you never applied for a bank loan, what is the main reason? 1 Procedures are too complicated 2 Interest rates are too high 3 Guarantee/collateral asked for is too much 4 Available loans do not correspond to my needs 5 I am not interested in getting a loan 6 Other (specify) _____		|_|
(c) Other than bank services, do you know of any micro-finance services? 1 Yes 2 No → Skip to d		|_|
If yes, how did you come to know them? 1 Through 'word-of-mouth' (family, friends, neighbours, etc.) 2 Through professional milieu/environment 3 Through an association of my village 4 Through a visit to one of the institutions 5 Through an advertisement (mass media, internet, poster) 6 Other (specify) _____		|_|
Have you applied for a loan? 1 Yes 2 No → Skip to e		|_|
IF YES , did you get a loan? 1 Yes 2 No → Skip to e		|_|
If YES , what was the impact of the loan on your business activity? a) Increase in the volume of production 1 Yes 2 No b) Diversification of production 1 Yes 2 No c) Increase of the volume of sales 1 Yes 2 No d) Improvement of competitiveness/profitability 1 Yes 2 No e) Recruitment of additional manpower 1 Yes 2 No f) Working less time 1 Yes 2 No g) Utilisation of less manpower 1 Yes 2 No h) Financial difficulties 1 Yes 2 No i) Other (specify) _____ 1 Yes 2 No → Skip to e		|_| |_| |_| |_| |_| |_| |_| |_| |_|
(d) What was the main reason your application was rejected? 1 Incomplete documents 2 Complete but not convincing documents 3 Insufficient guarantees/collateral 4 Insufficient initial capital 5 Activity/enterprise was deemed not viable 6 Other (specify) _____		|_|
→ Skip to f		

(e) If you did not apply for a loan, what was the main reason?				<input type="checkbox"/>
1 Amount of loan offered is insufficient		5 Guarantees/collateral required is too much		
2 Procedures are too complicated		6 Do not need a loan		
3 Interest rate is too high		7 Other (specify) _____		
4 Maturity period is too short				
(f) Apart from the institutions previously mentioned (banks, micro credit institutions), do you know of other support structures to small businesses like yours?			1 Yes 2 No → <u>Next section</u>	<input type="checkbox"/>
Did you have contact with any one of these support institutions?			1 Yes 2 No → <u>Next section</u>	<input type="checkbox"/>
IF YES, Results of contact with support institutions:				
Institution	Contacted?	If contacted:		
		Type of Assistance Requested	Outcome	
1 International program/project	1- Yes 2- No	<input type="checkbox"/>	1- Granted 2- Not granted	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2 Government program/project	1- Yes 2- No	<input type="checkbox"/>	1- Granted 2- Not granted	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3 Local government	1- Yes 2- No	<input type="checkbox"/>	1- Granted 2- Not granted	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4 Professional association/NGO	1- Yes 2- No	<input type="checkbox"/>	1- Granted 2- Not granted	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Codes for Type of Assistance Requested: 1- Technical training 2- Training in organizational and financial management 3- Assistance in obtaining supplies 4- Access to modern machines 5- Access to information on the markets 6- Access to large business orders 7- Registration of business 8- Advertising of new products/services 9- Other (specify)				

ON SOCIAL PROTECTION— Questions could include:

1. Knowledge of what social security/ social protection means and benefits available
2. Whether workers and operator are covered, through the business, in available social insurance/ protection schemes
- 2a. If not, reasons
3. Benefits received/wish to receive under social security/ social protection
4. Amount of monthly premiums that operator will be willing to pay

B. CUESTIONARIO

 INSTITUTO NACIONAL DE ESTADÍSTICA Y GEOGRAFÍA	Encuesta Nacional de Micronegocios ENAMIN 2008	Cuestionario ____ de ____ cuestionarios
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INFORMACIÓN CONFIDENCIAL Esta encuesta se rige por las disposiciones del artículo 37 de la Ley del Sistema Nacional de Información Estadística y Geográfica. <i>Toda información se mantendrá con carácter estrictamente CONFIDENCIAL.</i>	OBLIGATORIEDAD "Los informantes están obligados a proporcionar, con veracidad y oportunidad, los datos e informes que les soliciten las autoridades competentes para fines estadísticos, censales y geográficos, y prestarán apoyo a las mismas". <i>Artículo 45, párrafo I de la Ley del Sistema Nacional de Información Estadística y Geográfica vigente.</i>
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RUBROS DE IDENTIFICACIÓN					
Transcriba de la hoja muestra					
Periodo	Distribución semanal	Número de control	Número de vivienda	Hogar	Hogar mudado
[][]	[][][][]	[][][][][][]	[][]	[]	[]

DATOS DEL SELECCIONADO (CS)				
Número de renglón	Nombre	Parentesco	Sexo	Edad
[][]		[][]	[]	[][]
Actividad principal o secundaria (COE): []				
Dirección: _____ <div style="display: flex; justify-content: space-between;"> Calle y número Colonia o fraccionamiento Municipio o delegación </div>				
Tel. particular: _____ Tel. del negocio: _____ Tel. celular: _____				

DATOS DEL OPERATIVO DE CAMPO					
Entrevistador(a)	Nombre	RFC	Resultado de la entrevista	Fecha	Visitas realizadas
		[][][][][][]	[][]	[][][][][]	[]
Supervisor(a)		[][][][][][]	[][]	[][][][][]	[]
Crítico(a)		[][][][][][]	/	/	/
Lugar de la entrevista (Cuando el resultado sea de entrevista completa, circule la respuesta correspondiente en esta pregunta)					
1 En la vivienda 2 En el negocio 3 En otro lugar					
¿Se reentrevistó? (Circule la respuesta correspondiente)					
1 Sí 2 No					

ENAMIN-2008

I. CARACTERÍSTICAS DE LA CONDICIÓN DE ACTIVIDAD DEL DUEÑO DEL NEGOCIO	II. MIGRACIÓN
1. Durante la semana pasada ¿trabajó por lo menos una hora en un negocio propio o realizando una actividad por su cuenta? 1 Sí → Pase a 6 2 No	7. ¿Nació usted en esta ciudad? 1 Sí → Pase a 9 2 No
2. Aunque ya me dijo que no trabajó la semana pasada en un negocio o actividad propia, ¿tiene algún negocio o realiza alguna actividad por su cuenta? 1 Sí 2 No	8. ¿En qué lugar nació? Entidad _____ País _____
3. ¿Cuál es el motivo por el que no trabajó la semana pasada en su negocio o actividad? (Escuche, anote y circule la opción indicada por el informante) 01 Vacaciones o descanso 02 Enfermedad 03 Término de temporada o ventas 04 Atención de asuntos relacionados con el negocio o actividad 05 Atención de asuntos personales o familiares 06 Falta de liquidez 07 Cierre temporal por problemas con autoridades 08 Cierre temporal por otras razones 09 Cerró definitivamente el negocio 10 Falta de clientes 11 Mantenimiento de vehículos o maquinaria 12 Otro 13 No tiene ni ha tenido ningún negocio o actividad } TERMINE	9. ¿Por motivos de trabajo ha vivido en otras ciudades o municipios? 1 Sí ¿En cuántos? [] [] 2 No → Pase a 14
4. ¿Cuánto tiempo hace que suspendió su actividad? Semanas [] []	10. ¿Cuál fue el último lugar donde vivió antes de llegar aquí? Entidad _____ País _____
5. ¿En cuánto tiempo volverá a trabajar? (Lea y circule la opción indicada por el informante) 1 Ya se incorporó o regresará a trabajar esta semana 2 Más de una semana hasta un mes 3 No hay seguridad de continuar o no sabe cuándo regresará a trabajar 4 Ya no regresará } TERMINE	11. ¿A qué se dedicaba en ese lugar? (Lea las opciones y circule la indicada por el informante) 1 ¿Tenía un negocio propio o realizaba una actividad por su cuenta? 2 ¿Tenía un empleo fijo? 3 ¿Tenía empleos temporales? 4 ¿Estudiaba o se dedicaba al hogar? 5 Otro _____ Especifique _____
6. ¿En su negocio o actividad, usted es... (Lea las opciones y circule la indicada por el informante) 1 patrón? 2 trabajador por su cuenta? 3 Otro _____ Especifique _____ } TERMINE	12. ¿Cuál fue el motivo principal por el que cambió su residencia? (Escuche y circule la opción indicada por el informante) 1 No encontró empleo 2 Por buscar mejores oportunidades de trabajo 3 Quería estudiar o capacitarse 4 Por matrimonio o unión 5 Reunirse con un familiar 6 Por problemas de inseguridad pública o ambiente inadecuado para la familia 7 Otro _____ Especifique _____
ATENCIÓN: Si la opción señalada es igual a 3, verifique por qué no coincide esta respuesta con la hoja muestra y anote en observaciones.	13. ¿Hace cuánto tiempo llegó a esta ciudad? Años [] [] Meses [] []

III. ANTECEDENTES LABORALES	
<p>14. ¿A qué edad empezó a trabajar? (Aunque haya sido sin pago)</p> <p>Años <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>19. ¿Cuántas personas trabajaban en ese negocio o actividad? (Escuche y circule la opción indicada por el informante)</p> <p>1 1 persona 2 De 2 a 5 personas 3 De 6 a 15 personas 4 De 16 a 50 personas 5 Más de 50 personas 6 No sabe</p>
<p>15. Desde que empezó a trabajar, ¿cuánto tiempo ha trabajado a sueldo o jornal?</p> <p>1 Años <input type="text"/> <input type="text"/> <input type="text"/> Meses <input type="text"/> <input type="text"/> <input type="text"/></p> <p>2 Nunca</p>	<p>20. En ese negocio o actividad ¿qué tareas desarrollaba? (Detalle el tipo de tareas o funciones)</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>16. ¿Antes de iniciar su negocio o actividad actual contaba con... (Lea las opciones y circule la indicada por el informante)</p> <p>1 un empleo asalariado? 2 tenía otro negocio propio? 3 era aprendiz sin pago? 4 Ninguna de las anteriores</p> <p style="text-align: right;">Pase a 18</p>	<p>20.1 ¿Cuál era su oficio, puesto o cargo que desempeñaba?</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>17. ¿A qué se dedicaba usted? (Lea las opciones y circule la indicada por el informante)</p> <p>1 ¿Estaba desempleado y buscaba trabajo? 2 ¿Estudiaba? 3 ¿Al hogar? 4 ¿No trabajaba?</p> <p style="text-align: right;">Pase a 24</p>	<p>21. ¿Cuál era el giro de ese negocio o actividad? (Detalle el tipo y material de los productos que se elaboraban o de los servicios que se prestaban)</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>18. ¿Cuál fue el motivo principal por el que dejó esa actividad? (Escuche, anote y circule la opción indicada por el informante)</p> <p>01 Despido o recorte de personal 02 Cerró o quebró el negocio o actividad 03 Se terminó el contrato o el trabajo para el que lo llamaron 04 Por cambio de actividad o giro 05 La empresa se cambió de ciudad o de país 06 Conflicto laboral o sindical 07 Conflicto con su jefe o superior 08 Falta de calificación o capacitación 09 Incumplimiento con la empresa 10 Discriminación por su aspecto físico 11 Por la edad 12 Se jubiló o se pensionó 13 Por enfermedad o discapacidad 14 Por embarazo o responsabilidades familiares 15 Un familiar le impidió seguir trabajando 16 Motivos personales 17 Todavía conserva el empleo u otro negocio 18 Otro</p>	<p>22. ¿Cuánto tiempo trabajó en ese lugar?</p> <p>Años <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Meses <input type="text"/> <input type="text"/> <input type="text"/></p>
	<p>23. ¿En ese negocio o actividad adquirió la experiencia necesaria para su propio negocio o actividad actual?</p> <p>1 Sí 2 No</p>
IV. FUNDACIÓN DEL NEGOCIO ACTUAL	
<p>24. Ahora hablemos de su negocio o actividad actual. ¿Cuáles son las tareas o funciones que desempeña en este negocio o actividad? (Detalle el tipo de tareas o funciones)</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>24.1 ¿Cuál es el nombre del oficio, puesto o cargo?</p> <p>_____</p> <p>_____</p> <p>_____</p>	

<p>25. ¿Cuál es el giro de su negocio o en qué consiste la actividad que desarrolla actualmente? (Detalle el tipo y material de los productos que se elaboran o de los servicios que se prestan)</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>31. ¿Su negocio o actividad tiene registro ante notario?</p> <p>1 Sí</p> <p>2 No</p>
<p>26. ¿Quién empezó este negocio o actividad y en qué fecha? (Lea las opciones, circule la indicada y anote el año y mes)</p> <p>1 Usted solo(a) Año <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>2 Su pareja o cónyuge</p> <p>3 Usted y su pareja o cónyuge Mes <input type="text"/> <input type="text"/></p> <p>4 Otros familiares</p> <p>5 Otra(s) persona(s)</p>	<p>32. En esta actividad o negocio... (Lea y circule la opción indicada por el informante)</p> <p>1 ¿Acude a los servicios de un contador o profesional para llevar las cuentas?</p> <p>2 ¿Sólo utiliza un cuaderno o una libreta de apuntes personales para llevar las cuentas?</p> <p>3 Utiliza la caja registradora de la Secretaría de Hacienda</p> <p>4 No lleva ningún registro contable</p> <p>5 Se negó a contestar</p>
<p>27. ¿Cuánto tiempo tiene usted a cargo del negocio o actividad? (Escuche y anote el dato indicado por el informante)</p> <p>Años <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Meses <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>33. ¿Qué tipo de comprobantes de venta expide a sus clientes? (Lea las opciones y circule la indicada por el informante)</p> <p>1 Facturas</p> <p>2 Sólo notas o comprobantes de venta</p> <p>3 Ninguno</p> <p>4 Se negó a contestar</p>
<p>28. ¿Cuál es el motivo principal por el que se inició en esta actividad o negocio? (Escuche, anote y circule la opción indicada; si dice que quería ser independiente, pregunte por qué)</p> <p>_____</p> <p>1 Por tradición familiar</p> <p>2 Para complementar el ingreso familiar</p> <p>3 Para obtener un mayor ingreso que como asalariado</p> <p>4 No encontró trabajo como asalariado</p> <p>5 Horario flexible</p> <p>6 Pérdida o recorte en anterior empleo</p> <p>7 Encontró una buena oportunidad de negocio</p> <p>8 Quería ser independiente</p> <p>9 Otro</p>	<p>34. ¿Usted forma parte de una asociación gremial? (Lea y circule la opción indicada por el informante)</p> <p>1 Locatarios, tianguistas o similares</p> <p>2 Transportistas, taxistas</p> <p>3 Cámara de comercio o industrial</p> <p>4 Asociación profesional</p> <p>5 Otro</p> <p>_____ Especifique</p> <p>6 Ninguna</p>
<p>V. REGISTROS Y CONTABILIDAD DEL NEGOCIO O ACTIVIDAD</p>	
<p>29. ¿El negocio o actividad es de... (Lea las opciones y circule la indicada por el informante)</p> <p>1 un solo dueño? → Pase a 31</p> <p>2 varios dueños?</p>	<p>35. ¿Su negocio o actividad está registrado en... (Lea y circule las opciones indicadas por el informante)</p> <p>1 el municipio o delegación?</p> <p>2 la Secretaría de Economía?</p> <p>3 la Secretaría de Salud?</p> <p>4 Ninguna de las anteriores</p> <p>0 exclusivo capturista</p>
<p>30. ¿La forma de asociación es... (Lea las opciones y circule la indicada por el informante)</p> <p>1 familiar?</p> <p>2 no familiar?</p> <p>3 familiar y no familiar?</p>	<p>36. ¿Su negocio o actividad fue captado por el censo económico 2004? (Escuche y circule la opción indicada por el informante)</p> <p>1 Sí</p> <p>2 No</p> <p>3 Aún no existía</p> <p>4 No sabe</p>

VI. LOCAL																										
<p>37. En su negocio o actividad, ¿cuenta con un local para trabajar? (Escuche y circule la opción principal, después pregunte, lea y circule la subopción indicada)</p> <p>1 Sí, entonces este local es:</p> <p style="margin-left: 40px;"> 10 Tienda, accesoria, o tendajón 11 Puesto en un mercado bajo un techo común 12 Locales bajo un techo común 13 Instalación en pasillos de un centro comercial (carretón, kiosco, estructura armable) 14 Taller (de servicios o de reparación) 15 Fábrica, tortillería, panadería 16 Oficina, despacho, consultorio 17 Otro _____ </p> <p style="text-align: right; margin-right: 50px;">Especifique</p> <p>2 No, entonces ¿en dónde realiza las actividades de este negocio?</p> <p style="margin-left: 40px;"> 20 En un vehículo con o sin motor 21 Puesto improvisado en la vía pública 22 Puesto fijo en la vía pública 23 Puesto improvisado en un mercado o tianguis al aire libre 24 Puesto semifijo en un tianguis 25 Ambulante de casa en casa o en la calle 26 En el domicilio de los clientes 27 En su domicilio con una instalación especial 28 En su domicilio sin una instalación especial 29 Otro lugar _____ </p> <p style="text-align: right; margin-right: 50px;">Especifique</p>	<p>40. Normalmente ¿cómo fija el precio de sus mercancías o servicios? (Lea las opciones y circule la indicada por el informante)</p> <p>1 Establece los precios en relación con la competencia 2 Toma los precios oficiales o del proveedor 3 Por regateo 4 Dependiendo del cliente 5 Agrega una cuota o porcentaje al costo 6 Otra forma _____</p> <p style="text-align: right; margin-right: 50px;">Especifique</p> <p>7 Se negó a contestar</p>																									
VII. TIEMPO DEDICADO AL NEGOCIO																										
<p>41. ¿Cuántas horas dedicó la semana pasada y cuántas en una semana normal para... (Lea los conceptos y registre las horas indicadas)</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Semana Pasada Horas</th> <th style="text-align: center;">Normal Horas</th> </tr> </thead> <tbody> <tr><td>1 administrar su negocio?</td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> <tr><td>2 comprar materias primas o productos?</td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> <tr><td>3 preparar o elaborar productos?</td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> <tr><td>4 atender o visitar clientes?</td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> <tr><td>5 reparar, dar mantenimiento o comprar maquinaria, equipo o vehículos?</td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> <tr><td>6 realizar trámites del negocio?</td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> <tr><td>7 otras actividades?</td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> </tbody> </table> <p style="text-align: right; margin-right: 50px;">Especifique</p>		Semana Pasada Horas	Normal Horas	1 administrar su negocio?			2 comprar materias primas o productos?			3 preparar o elaborar productos?			4 atender o visitar clientes?			5 reparar, dar mantenimiento o comprar maquinaria, equipo o vehículos?			6 realizar trámites del negocio?			7 otras actividades?			<p>42. ¿Actualmente usted está inscrito o se encuentra cotizando... (Lea las opciones y circule la indicada por el informante)</p> <p>1 al IMSS? 2 al Seguro Popular? 3 a un seguro médico particular? 4 No cotiza</p>	
	Semana Pasada Horas	Normal Horas																								
1 administrar su negocio?																										
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7 otras actividades?																										
VIII. PERSONAL OCUPADO																										
<p>38. ¿El local o vehículo en el que trabaja es... (Lea las opciones y circule la indicada por el informante)</p> <p>1 propio? 2 rentado? 3 prestado? 4 Otro _____</p> <p style="text-align: right; margin-right: 50px;">Especifique</p>	<p>43. ¿Cuántas personas trabajaron en su negocio o actividad actual en los diferentes periodos que le voy a mencionar del año 2008? (Verifique en pregunta 27 si el negocio inició antes o en el transcurso de 2008, para que sea coherente lo que aquí se responda)</p> <p>1 Número de trabajadores</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Trabajadores</th> <th>Ene-Mar</th> <th>Abr-Jun</th> <th>Jul-Sept</th> <th>Oct-Dic</th> </tr> </thead> <tbody> <tr><td>Socios</td><td></td><td></td><td></td><td></td></tr> <tr><td>A sueldo</td><td></td><td></td><td></td><td></td></tr> <tr><td>Sin pago</td><td></td><td></td><td></td><td></td></tr> <tr><td>Total</td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p>2 No tuvo trabajadores en el 2008 3 Siempre ha trabajado solo</p>	Trabajadores	Ene-Mar	Abr-Jun	Jul-Sept	Oct-Dic	Socios					A sueldo					Sin pago					Total				
Trabajadores	Ene-Mar	Abr-Jun	Jul-Sept	Oct-Dic																						
Socios																										
A sueldo																										
Sin pago																										
Total																										
<p>39. ¿Cuál es el motivo principal por el que realiza su actividad sin un local? (Escuche y circule la opción indicada por el informante)</p> <p>1 No puede comprar o rentar un local 2 No lo necesita 3 Otro _____</p> <p style="text-align: right; margin-right: 50px;">Especifique</p>	<p style="text-align: right; margin-right: 50px;">Pase a 39</p> <p style="text-align: right; margin-right: 50px;">Pase a 40</p> <p style="text-align: right; margin-right: 50px;">Pase a 45</p>																									

44. Características de los trabajadores que laboran en el negocio o actividad (socios, asalariados y sin pago). Ahora le voy a preguntar sobre las personas que le ayudan o ayudan en su negocio, empezando por el nombre de cada una de ellas.														
Núm. de renglón	Nombre	Parentesco	Sexo	Edad	Estado conyugal	¿Cuál es el último grado de estudio aprobado de esta persona?	¿Cómo reclutó a esta persona?	¿Esta persona es ...	Tipo de contrato	¿Cuánto le pagó el mes pasado o el último mes que trabajó para usted?	Horas trabajadas	¿Qué tipo de servicio médico le proporciona?		
		1 Cónyuge 2 Hijo(a) 3 Padres 4 Abuelos 5 Hermano(a) 6 Primo(a) 7 Otro pariente 8 No pariente	1 Hombre 2 Mujer		1 Soltero(a) 2 Casado(a) 3 Unión libre 4 Divorciado(a) 5 Separado(a) 6 Viudo(a) 9 NS	00 Ninguno 01 Preescolar 02 Primaria 03 Secundaria 04 Preparatoria o bachillerato 05 Normal 06 Carrera técnica 07 Profesional 08 Maestría 09 Doctorado 99 NS	01 Es un familiar 02 Por recomendación 03 Acudió al negocio o al dueño 04 Anuncio en el periódico 05 Anuncio en lugar público 06 Servicio estatal de empleo, SNEPT (Cham-batel) o feria del empleo 07 Internet 08 Empresa suministradora de personal (subcontratación) 09 Agencia de colocación 10 Otro medio	1 Socio 2 Trabajador asalariado (incluye a destajo, comisión y porcentaje) 3 Familiar sin pago 4 No familiar sin pago	1 Verbal por tiempo indeterminado 2 Escrito por tiempo indeterminado 3 Verbal por tiempo u obra determinada 4 Escrito por tiempo u obra determinada 5 Suministrado por otra empresa (subcontratación)		98 No trabajó la semana pasada 99 NS	1 IMSS 2 Servicio médico particular 3 Seguro popular 4 Otro 5 Ninguno		
01										\$				
02										\$				
03										\$				
04										\$				
05										\$				
06										\$				
07										\$				
08										\$				
09										\$				
10										\$				
11										\$				
12										\$				
13										\$				
14										\$				
15										\$				

44.1 Tareas o funciones que desempeñan o desempeñaban los trabajadores en su negocio o actividad (socios, asalariados y sin pago).			
Núm. de región	Nombre	Puesto de trabajo	Tareas o funciones desempeñadas (Detalle el tipo de tareas o funciones desempeñadas)
01			
02			
03			
04			
05			
06			
07			
08			
09			
10			
11			
12			
13			
14			
15			

IX. EQUIPAMIENTO DEL NEGOCIO

45. Si usted tuviera que vender las herramientas, utensilios, maquinaria, equipo y vehículos de su propiedad que utiliza en su negocio o actividad, ¿en cuánto lo vendería?

(Escuche y circule la opción indicada por el informante)

- 1 \$ _____
 2 Se negó a contestar
 3 NS

46. ¿En el 2008 cuánto invirtió en adquirir herramientas, utensilios, maquinaria, equipo y vehículos para su negocio o actividad?

(Escuche y circule la opción indicada por el informante)

- 1 \$ _____
 2 Se negó a contestar
 3 NS

47. Durante el 2008, para poder realizar su actividad o negocio ¿qué gasto realizó de los siguientes conceptos?

Concepto	Gastó 1 Sí 2 No	¿Cuánto gastó la última vez?	¿Cada cuándo realiza el gasto? (Especifique periodo)	Valor anualizado
01 Materias primas, empaques, envases y materiales de trabajo	<input type="checkbox"/>	\$ _____	_____	\$ _____
02 Mercancías o productos comprados para su venta	<input type="checkbox"/>	\$ _____	_____	\$ _____
03 Consumo de agua	<input type="checkbox"/>	\$ _____	_____	\$ _____
04 Consumo de energía eléctrica	<input type="checkbox"/>	\$ _____	_____	\$ _____
05 Consumo de combustibles (gas, gasolina, petróleo, carbón, etc.)	<input type="checkbox"/>	\$ _____	_____	\$ _____
06 Internet, telefonía, mensajería y fletes	<input type="checkbox"/>	\$ _____	_____	\$ _____
07 Renta del local, uso de suelo, placas o vehículo	<input type="checkbox"/>	\$ _____	_____	\$ _____
08 Pagos a terceros por maquila	<input type="checkbox"/>	\$ _____	_____	\$ _____
09 Reparación y mantenimiento de local, vehículos o equipo	<input type="checkbox"/>	\$ _____	_____	\$ _____
10 Cuotas al IMSS o servicio médico	<input type="checkbox"/>	\$ _____	_____	\$ _____
11 Servicios profesionales (contador, abogado, etc.)	<input type="checkbox"/>	\$ _____	_____	\$ _____
12 Cuotas al gremio, a la asociación (o algún líder)	<input type="checkbox"/>	\$ _____	_____	\$ _____

48. ¿Cuál es el problema más importante que enfrenta su negocio o actividad?

(Escuche, anote y circule la opción indicada)

- | | |
|---|--|
| 01 Exceso de deudas | 12 Falta de capacitación |
| 02 Aumento en precios de los insumos | 13 Conflicto con los trabajadores |
| 03 Aumento en precios de las mercancías | 14 Exceso de trámites o de burocracia |
| 04 Aumento en la renta del local | 15 Problemas con los clientes (morosidad) |
| 05 Bajaron las ventas | 16 Problemas de inseguridad pública |
| 06 Exceso de competencia | 17 Problemas con las autoridades (extorsión, multas, etc.) |
| 07 El negocio es menos rentable de lo esperado | 18 No le puede dedicar el tiempo suficiente |
| 08 Falta de crédito o recursos económicos | 19 Los impuestos son altos |
| 09 Incumplimiento de los proveedores | 20 No puede con los intereses |
| 10 Baja calidad en materias primas o mercancías | 21 Ninguna de las anteriores |
| 11 Ausentismo del personal o exceso de rotación | 22 No tiene problemas |

49. Durante el 2008, ¿en su negocio o actividad ha tenido pérdidas por alguno(s) de los siguientes conceptos?

Concepto	1 Sí 2 No	¿Cómo ha enfrentado esta situación?*	¿Cuántas veces le pasó?	¿En cuánto calcula el gasto o pérdida por este problema?
01 Multas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
02 Extorsión de autoridades (mordidas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
03 Extorsión y hostigamiento de delincuentes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
04 Asalto o robo con violencia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
05 Robo hormiga	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
06 Desfalcos, pago con dinero falso, abuso de confianza, fraude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
07 Por percances e imprevistos naturales (incendio, inundación, plagas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
08 Por destrucción o accidentes provocados por personas ajenas a su negocio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
09 Por concepto de amparos y demandas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
10 Secuestro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
11 Hostigamiento o problemas con sus vecinos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>
12 Grafiteros	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	\$ <input type="text"/>

*

- | | | | | |
|--------------------------------------|---|------------------------|--|-----------------|
| 01 Puso rejillas en su negocio | 04 Realizó el pago | 07 Cambió de giro | 10 Reparó el daño | 12 Otro |
| 02 Contrató seguridad privada | 05 Compró un seguro contra riesgos | 08 Cambió de domicilio | 11 Se organizó con otros comerciantes, empresarios, locatarios | 13 No hizo nada |
| 03 Instaló alarmas o cámaras ocultas | 06 Denunció el hecho ante las autoridades | 09 Repuso lo perdido | | |

50. ¿Cuál es el salario mensual por el que usted aceptaría dejar su negocio o actividad?

(Escuche y circule la opción indicada por el informante)

- 1 \$
- 2 No lo dejaría
- 3 Se negó a contestar

X. RAMA DE ACTIVIDAD

51. SÓLO PARA EL ENTREVISTADOR

De acuerdo con la respuesta de la pregunta 25. ¿Cuál es el giro de su negocio o en qué consiste la actividad que desarrolla actualmente? Clasifique en la opción que corresponda y siga la secuencia que se indica.

- 1 Manufactura
- 2 Comercio → Pase a 57
- 3 Construcción } Pase a 62
- 4 Servicios

XI. INGRESOS DERIVADOS DE LA ACTIVIDAD MANUFACTURERA

52. De los productos que usted fabrica, ¿Cuáles fueron los 3 más vendidos el mes pasado? (Circule la respuesta correspondiente)

1 Proporcionó información 2 Se negó a contestar

Producto	Unidad de medida	Cantidad	Precio unitario	Destino*	Forma de venta**	Valor de venta mensual
1 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
2 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
3 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

53. ¿Cuál es el monto de los ingresos que generó el negocio en el mes pasado por los siguientes conceptos?

(Lea las opciones, circule y anote la cantidad indicada por el informante)

- 1 Venta de los productos elaborados por este negocio \$ _____
- 2 Servicios de maquila \$ _____
- 3 Prestación de servicios \$ _____
- (Incluye materiales y servicios de reparación y mantenimiento)
- 4 Venta de mercancía adquirida para su reventa \$ _____
- 5 Otros ingresos \$ _____
- 6 Se negó a contestar
- 0 Exclusivo capturista

XII. GASTOS DERIVADOS DE LA ACTIVIDAD MANUFACTURERA

54. ¿Cuáles fueron las 3 principales materias primas que adquirió el mes pasado? (Circule la respuesta correspondiente)

1 Proporcionó información 2 Se negó a contestar

Producto	Unidad de medida	Cantidad	Precio unitario	Proveedor*	Forma de compra**	Valor de compra mensual
1 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
2 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
3 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

CÓDIGOS PARA LAS SECCIONES XI Y XII

* DESTINO O PROVEEDOR

- | | |
|--------------------|-----------------------------|
| 1 Sector público | 5 Fábrica pequeña |
| 2 Comercio grande | 6 Directamente al público |
| 3 Comercio pequeño | 7 Importación o Exportación |
| 4 Fábrica grande | 8 Maquila |

** FORMA DE VENTA O COMPRA

- | | |
|---------------------|------------------|
| 1 De contado | 4 A consignación |
| 2 A crédito o fiado | 5 Otra |
| 3 Con anticipos | |

55. Al último día del mes pasado, ¿en cuánto calcula el valor de los siguientes conceptos?

(Lea las opciones, circule y anote la cantidad indicada por el informante)

- 1 El total de mercancías no vendidas \$ _____
- 2 Los productos en elaboración o aún no terminados \$ _____
- 3 Las materias primas guardadas o almacenadas \$ _____
- 4 Las refacciones y materiales almacenados \$ _____
- 5 No tiene inventarios
- 6 Se negó a contestar
- 0 Exclusivo capturista

56. En promedio, ¿Cuánto le deja su negocio o actividad al mes?

(Escuche y circule la opción indicada por el informante)

- 1 \$ _____
- 2 El negocio está comenzando y aún no genera ganancias
- 3 Se negó a contestar

Al terminar esta sección, pase a la pregunta 67.

XIII. INGRESOS DERIVADOS DE NEGOCIOS COMERCIALES

57. ¿Cuáles fueron los 3 productos que más vendió el mes pasado? (Circule la respuesta correspondiente)

1 Proporcionó información 2 Se negó a contestar

Producto	Unidad de medida	Cantidad	Precio unitario	Destino*	Forma de venta**	Valor de venta mensual
1			\$	<input type="checkbox"/>	<input type="checkbox"/>	\$
2			\$	<input type="checkbox"/>	<input type="checkbox"/>	\$
3			\$	<input type="checkbox"/>	<input type="checkbox"/>	\$

58. ¿Cuál es el monto de los ingresos que generó el negocio en el mes pasado por los siguientes conceptos?

(Lea las opciones, circule y anote la cantidad indicada por el informante)

- 1 Venta de mercancías \$ _____
- 2 Por suministro de bienes y servicios \$ _____
- 3 Por consignación o comisión \$ _____
- 4 Otros ingresos \$ _____
- 5 Se negó a contestar
- 0 Exclusivo capturista

XIV. GASTOS DERIVADOS DE LA COMPRA DE MERCANCÍA

59. De los 3 productos que mencionó ¿Qué cantidad adquirió el mes pasado? (Circule la respuesta correspondiente)

1 Proporcionó información 2 Se negó a contestar

Producto	Unidad de medida	Cantidad	Precio unitario	Proveedor*	Forma de compra**	Valor de compra mensual
1			\$	<input type="checkbox"/>	<input type="checkbox"/>	\$
2			\$	<input type="checkbox"/>	<input type="checkbox"/>	\$
3			\$	<input type="checkbox"/>	<input type="checkbox"/>	\$

CÓDIGOS PARA LAS SECCIONES XIII Y XIV

*DESTINO O PROVEEDOR	**FORMA DE VENTA O COMPRA
1 Sector público	1 De contado
2 Comercio grande	2 A crédito o fiado
3 Comercio pequeño	3 Con anticipos
4 Fábrica grande	4 A consignación
5 Fábrica pequeña	5 Otra
6 Directamente al público	
7 Importación o Exportación	
8 Maquila	

60. Al último día del mes pasado, ¿en cuánto calcula el valor de los siguientes conceptos?

(Lea las opciones, circule y anote la cantidad indicada por el informante)

- 1 El total de mercancías no vendidas \$ _____
- 2 El total de mercancías vendidas de las que aún no le pagan ni un peso \$ _____
- 3 El monto que aún le queda por cobrar de mercancías que ya le comenzaron a pagar \$ _____
- 4 Las refacciones y materiales almacenados \$ _____
- 5 No tiene inventarios
- 6 Se negó a contestar
- 0 Exclusivo capturista

61. En promedio, ¿cuánto le deja su negocio o actividad al mes?

(Escuche y circule la opción indicada por el informante)

- 1 \$ _____
- 2 El negocio está comenzando y aún no genera ganancias
- 3 Se negó a contestar

Al terminar esta sección, pase a la pregunta 67.

XV. INGRESOS DERIVADOS DE LA PRESTACIÓN DE SERVICIOS Y/O CONSTRUCCIÓN

62. ¿Cuáles fueron los 3 principales servicios que prestó el mes pasado? (Circule la respuesta correspondiente)

1 Proporcionó información 2 Se negó a contestar

Producto	Unidad de medida	Cantidad	Precio unitario	Destino*	Forma de venta**	Valor de venta mensual
1 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
2 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
3 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

63. ¿Cuál es el monto de los ingresos que obtuvo el mes pasado por los siguientes conceptos?

(Lea las opciones, circule y anote la cantidad indicada por el informante)

- 1 Por total de servicios \$ _____
(Incluya materiales y servicios de reparación y mantenimiento)
- 2 Por venta de mercancías \$ _____
- 3 Otros ingresos \$ _____
- 4 Se negó a contestar
- 0 Exclusivo capturista

XVI. GASTOS DERIVADOS DE LA PRESTACIÓN DE SERVICIOS Y/O CONSTRUCCIÓN

64. ¿Cuáles fueron los 3 principales materiales que adquirió el mes pasado para poder prestar sus servicios?

(Circule la respuesta correspondiente)

1 Proporcionó información 2 Se negó a contestar

Producto	Unidad de medida	Cantidad	Precio unitario	Proveedor*	Forma de compra**	Valor de compra mensual
1 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
2 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
3 _____	_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

CÓDIGOS PARA LAS SECCIONES XV Y XVI

***DESTINO O PROVEEDOR**

- 1 Sector público 5 Fábrica pequeña
2 Comercio grande 6 Directamente al público
3 Comercio pequeño 7 Importación o Exportación
4 Fábrica grande 8 Maquila

****FORMA DE VENTA O COMPRA**

- 1 De contado 4 A consignación
2 A crédito o fiado 5 Otra
3 Con anticipos

65. Al último día del mes pasado, ¿en cuánto calcula el valor de los siguientes conceptos?

(Lea las opciones, circule y anote la cantidad indicada por el informante)

- 1 El costo total de los servicios de lo que no le han pagado ni un peso \$ _____
- 2 El monto que resta por cobrar de servicios que ya le están pagando \$ _____
- 3 Mercancías o materiales que tiene almacenados \$ _____
- 4 No tiene inventarios
- 5 Se negó a contestar
- 0 Exclusivo capturista

66. En promedio, ¿cuánto le deja su negocio o actividad al mes?

(Escuche y circule la opción indicada por el informante)

- 1 \$ _____
- 2 El negocio está comenzando y aún no genera ganancias
- 3 Se negó a contestar

XVII. FINANCIAMIENTO	
<p>67. El dinero para iniciar este negocio o actividad, ¿de dónde provino principalmente? (Escuche, anote y circule la opción indicada; si dice que es un programa de gobierno, pregunte cuál y anótelos)</p> <p>01 Banca comercial (BBVA-Bancomer, Banamex, etc.) 02 Banca de desarrollo (Nafin, Bancomext) 03 Programa de gobierno 04 Cajas populares 05 Crédito de clientes 06 Crédito de proveedores 07 Prestamistas particulares (con intereses) 08 Amigos, parientes, etc. (sin intereses) 09 Uniones de crédito, sociedades financieras 10 Venta, hipoteca o empeño de sus bienes 11 Liquidación del empleo anterior 12 Ahorros personales 13 Otra fuente 14 No lo necesitó</p> <p style="text-align: right;">Pase a 69</p>	<p>71. ¿Obtuvo este préstamo?</p> <p>1 Sí 2 No → Pase a 77</p> <p>72. ¿A quién solicitó el préstamo más reciente? (Escuche, y circule la opción indicada por el informante)</p> <p>01 Banca comercial (BBVA-Bancomer, Banamex, etcétera) 02 Banca de desarrollo (Nafin, Bancomext) 03 Programa de gobierno</p> <p>_____ Especifique</p> <p>04 Uniones de crédito, sociedades financieras 05 Cajas populares 06 Prestamistas particulares 07 Amigos, parientes, etcétera. 08 Otro _____</p> <p style="text-align: right;">Especifique</p> <p>72.1 ¿En qué fecha le fue otorgado este préstamo?</p> <p>Año _____ Mes _____</p> <p>73. ¿A cuánto asciende el monto del préstamo?</p> <p>\$ _____</p> <p>74. ¿Cuánto ha pagado del préstamo?</p> <p>\$ _____</p> <p>75. ¿Qué plazo le dieron para pagar?</p> <p>Años _____ Meses _____</p> <p>76. ¿Para qué destinó principalmente ese préstamo? (Escuche, anote y circule la opción principal)</p> <p>_____ 1 Comprar local o vehículo 2 Ampliar, adecuar o reparar el local o vehículo 3 Adquirir o comprar mercancía 4 Pagar deudas del negocio 5 Comprar maquinaria, equipo o herramientas 6 Otro fin relacionado con el negocio 7 Fines ajenos al negocio 8 Se negó a contestar</p>
<p>68. ¿Cuál es la razón por la cual no necesitó dinero para iniciar ese negocio o actividad? (Escuche y circule la opción indicada por el informante)</p> <p>1 Heredó el negocio 2 El negocio no requirió de inversión 3 Otro _____</p> <p style="text-align: right;">Especifique</p>	
<p>69. Después de iniciar el negocio o actividad, ¿ha solicitado préstamos para que éste pueda seguir operando?</p> <p>1 Sí → Pase a 71 2 No</p>	
<p>70. ¿Por qué no ha solicitado préstamos o créditos? (Escuche y circule la opción indicada por el informante)</p> <p>1 No tiene necesidad 2 No sabe cómo pedirlo 3 Piensa que no lo conseguiría 4 El monto y los plazos no le convienen 5 Los intereses o comisiones son muy altos 6 Demasiados trámites 7 Otro _____</p> <p style="text-align: right;">Pase a 77</p> <p style="text-align: right;">Especifique</p>	

XVIII. CAPACITACIÓN

77. ¿Qué cursos de capacitación recibió usted o sus trabajadores durante el 2008?

(Lea las opciones, circule las indicadas y anote según corresponda)

Temas	Usted	Trabajadores
	1 Sí	2 No
1 Manejo de materiales, herramientas, equipo o maquinaria	<input type="checkbox"/>	<input type="checkbox"/>
2 Reparación de herramientas, equipo o maquinaria	<input type="checkbox"/>	<input type="checkbox"/>
3 Aspectos administrativos, contables o fiscales	<input type="checkbox"/>	<input type="checkbox"/>
4 Control de calidad en producción o servicio	<input type="checkbox"/>	<input type="checkbox"/>
5 Computación	<input type="checkbox"/>	<input type="checkbox"/>
6 Seguridad e higiene	<input type="checkbox"/>	<input type="checkbox"/>
7 Otros _____	<input type="checkbox"/>	<input type="checkbox"/>

Especifique

8 No se recibieron cursos de capacitación → Pase a 83

0 Exclusivo capturista

78. ¿Cómo es que optó por estos cursos?

(Lea y circule la opción indicada por el informante)

- 01 Por experiencia e iniciativa propia
- 02 A petición de los trabajadores
- 03 Por reglamento o norma
- 04 Por exigencia del proveedor
- 05 Por exigencia del cliente
- 06 Por cambio de giro
- 07 Por uso de nuevas tecnologías
- 08 Para certificar sus procesos
- 09 Realizó un diagnóstico
- 10 Otro _____

Especifique

79. ¿Cuál fue el principal beneficio de dicha capacitación?

(Lea y circule la opción indicada por el informante)

- 01 Aumentaron las ventas
- 02 Mejoró la calidad de los productos o servicios
- 03 Mejoró la productividad
- 04 Facilitó el uso de nuevas tecnologías o equipos
- 05 Motivó al personal
- 06 Disminuyeron las quejas de los clientes
- 07 Disminuyeron los accidentes laborales
- 08 Disminuyó el desperdicio
- 09 Otros _____

Especifique

10 Ningún beneficio

80. ¿Quién fue el agente capacitador del último curso que recibieron usted o sus trabajadores durante el 2008?

(Lea las opciones y asigne el código correspondiente)

Capacitador	Usted	Trabajadores
	<input type="checkbox"/>	<input type="checkbox"/>

- 01 Centro público de capacitación para el trabajo
- 02 Universidad o tecnológico público
- 03 Universidad o tecnológico privado
- 04 Empresa privada
- 05 Organización a la que está afiliado el negocio
- 06 Instructor por su cuenta
- 07 Proveedor
- 08 El dueño del negocio
- 09 Otro(s) empleado(s) del negocio
- 10 Programa de gobierno de apoyo a pequeñas empresas
- 11 Otro

81. El último curso de capacitación que tomó usted o sus trabajadores, ¿incluyó...

(Lea las opciones, circule las indicadas y anote según corresponda)

Manuales y Materiales	Usted	Trabajadores
	1 Sí	2 No

- 1 manuales? ☐
- 2 guía de estudio? ☐
- 3 prácticas sobre el tema? ☐
- 4 material audiovisual? ☐
- 5 herramienta y equipo? ☐
- 6 constancia? ☐
- 7 Nada ☐
- 0 Exclusivo capturista

82. ¿Los recursos para la capacitación provinieron, principalmente, de...

(Lea y circule la opción indicada por el informante)

- 1 su propio dinero o recursos?
- 2 gobierno? _____
- 3 aportaciones de los trabajadores? _____
- 4 la cámara o gremio de su actividad? _____
- 5 una Organización No Gubernamental (ONG)? _____
- 6 Otros _____

Especifique

Especifique

Pase a 84

83. ¿Cuál fue la causa principal por la que usted o sus empleados no asistieron a cursos de capacitación durante el 2008?

(Escuche y circule la opción indicada por el informante)

- 1 No lo consideró necesario
- 2 No tiene los recursos
- 3 No sabe a dónde acudir
- 4 El personal que se capacita renuncia
- 5 Otro _____

Especifique

XIX. PROGRAMAS DE APOYO A MICROEMPRESAS

84. ¿Conoce usted alguno de los siguientes programas de apoyo a micronegocios? <small>(Lea las definiciones de los programas y marque las respuestas según corresponda)</small>		¿Cómo se enteró del programa? 1 Por amigo o conocido 2 Acudió personalmente 3 Por un anuncio promocional, póster, folleto, tríptico, etcétera. 4 Anuncio en radio o televisión 5 Por Internet 6 Por el periódico 7 Visita promocional 8 En un centro educativo 9 Otro medio	¿Utilizó o se inscribió en este programa? 1 Sí 2 No
1 Programa Nacional de Financiamiento al Micro-empresario (PRONAFIM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Programa de Apoyo a la Capacitación (PAC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Fondo de Apoyo para la Micro, Pequeña y Mediana Empresa (FONDO PYME)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Programa de Competitividad en Logística y Centrales de Abasto (PROLOGYCA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Fondo de Microfinanciamiento a Mujeres Rurales (FOMMUR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Programa Modernizando a la Industria de la Tortilla (MI TORTILLA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Programa de Apoyo al Auto Empleo, Generación Uno y Generación Dos (PIPS1 y PIPS2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Programa Nacional de Emprendedores Red Nacional de Incubadoras de Microempresas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

XX. EXPECTATIVAS

85. ¿Piensa continuar durante el 2009 con este negocio o actividad? 1 SÍ 2 NO → Pase a 87	87. ¿Qué piensa hacer o a qué piensa dedicarse? <small>(Lea y circule la opción indicada por el informante)</small> 01 Cambiar de giro de actividad 02 Buscar un empleo en esta ciudad o localidad 03 Regresar a su lugar de origen 04 Cambiarse a otra ciudad del país 05 Irse del país 06 Estudiar, capacitarse o actualizarse 07 Dedicarse al hogar 08 Atender o cuidar a un familiar 09 Dedicarse a un trabajo comunitario 10 Otro _____ Especifique
86. ¿Cómo piensa continuar? <small>(Lea y circule la opción indicada por el informante)</small> 01 Ampliando la línea de productos 02 Tramitando un crédito o préstamo 03 Aumentando el número de trabajadores 04 Asociándose con otros negocios o personas 05 Reduciendo personal 06 Reduciendo la línea de productos 07 Cambiando de domicilio 08 Regularizando su negocio 09 Mejorando la calidad de los productos o servicios 10 Sin cambios importantes 11 Con otro plan _____ Especifique	TERMINE
TERMINE	

CONTROL DE VISITAS

ENTREVISTADOR (Circule el número de visita realizada y registre los datos requeridos)

Núm. de visita	Fecha	Hora	Resultado	Comentarios
1	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>día mes año</div>	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>hora minutos</div>	<div> <div></div> <div></div> </div>	
2	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>día mes año</div>	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>hora minutos</div>	<div> <div></div> <div></div> </div>	
3	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>día mes año</div>	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>hora minutos</div>	<div> <div></div> <div></div> </div>	
4	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>día mes año</div>	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>hora minutos</div>	<div> <div></div> <div></div> </div>	
5	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>día mes año</div>	<div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> <div>hora minutos</div>	<div> <div></div> <div></div> </div>	
0	Exclusivo capturista			


SUPERVISOR (Circle el número de visita realizada y registre los datos requeridos)

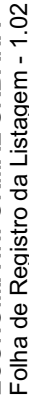
Núm. de visita	Fecha	Hora	Resultado	Comentarios
1	día mes año	hora : minutos		
2	día mes año	hora : minutos		
3	día mes año	hora : minutos		
4	día mes año	hora : minutos		
5	día mes año	hora : minutos		
0	Exclusivo capturista			


LISTADO DE CLAVES PARA REGISTRAR EL RESULTADO DE LA ENTREVISTA (LOGRADA 00)

TIPO A <i>(vivienda habitada)</i>	TIPO B <i>(vivienda deshabitada)</i>	TIPO C <i>(vivienda fuera de muestra)</i>	TIPO D
01 Nadie en el momento de las visitas	06 Adecuada para habitarse	10 Demolida	16 No se encontró al seleccionado
02 Ausente temporalmente	07 De uso temporal	11 Cambio de sitio (móvil)	17 El seleccionado se negó a dar información
03 Se negó a dar información	08 Inadecuada para habitarse	12 Uso permanente para fines diferentes a los de habitación	18 Seleccionado inadecuado para dar información
04 Informante inadecuado	09 De uso temporal para fines diferentes de habitación	13 Otro motivo (especifique en observaciones)	19 El seleccionado ya no es residente del hogar
05 Otro motivo (especifique en observaciones)			20 Entrevista incompleta
14 El hogar se mudó			
15 Entrevista suspendida			

OBSERVACIONES

<div><div>Instituto Brasileiro de Geografia e Estatística Diretoria de Pesquisas Coordenação de Trabalho e Rendimento</div><div>ECONOMIA INFORMAL URBANA Caderneta da Área de Listagem - 1.01</div></div>					Município	Distrito	Sub-Distrito	Setor	Controle
<div><div></div><div></div><div></div><div></div><div></div></div>		<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div></div>				
UNIDADE DA FEDERAÇÃO		NOME DO MUNICÍPIO		NOME DO DISTRITO					
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NOME		CÓDIGO							
do Listador	do Supervisor	do Listador		do Supervisor					
<div></div>	<div></div>	<div></div>		<div></div>					
TOTAL DE FORMULÁRIOS		DATA							
Folha de Registro da Listagem - 1.02	Folha de Registro das Unidades em Domicílio Coletivo - 1.03	de Início		de Término					
<div></div>	<div></div>	<div></div> / <div></div>		<div></div> / <div></div>					
Descrição da área de listagem:									
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Observações:									
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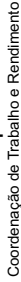
Diretoria de Pesquisas

Coordenação de Trabalho e Rendimento

ECONOMIA INFORMAL URBANA

Folha de Registro da Listagem - 1.02

Identificação das Unidades										Município	Distrito	Sub-Distrito	Sector	Controle	Página	Linhas na Página
Número da Linha	Nome do Logradouro		Número do Logradouro	Identificação ou Descrição da Unidade	Es- pé- cie	Nome da Pessoa de Referência	Número de Ordem	Nome dos moradores que tiveram trabalho no último mês		Em alguns destes trabalhos era	Atividades Desenvolvidas				Códigos de domicílios por espécie (Coluna 5)	
1	2		3	4	5	6	7	8		9	10	11	12			
0 | 1																
0 | 2																
0 | 3																
0 | 4																
0 | 5																
0 | 6																
Total de domicílios por espécie																
1-Ocupado					5-Coletivo		1-Trabalhador doméstico			3-Empregador com até 5 empregados						
2-Fechado					6-Não residencial		2-Conta própria			4-Outro						



Folha de Registro das Unidades em Domicílio Coletivo - 1.03

Códigos de Atividade (Colunas 10, 11 e 12)
0 - Atividade Agrícola 1 - Indústria de Transformação e Extrativa 2 - Construção Civil 3 - Comércio e Reparação 4 - Serviço de Alojamento e Alimentação 5 - Transporte, Armazenagem e Comunicações 6 - Atividades Imobiliárias, Aluguéis e Serviços Prestados às Empresas 7 - Educação, Saúde e Serviços Sociais 8 - Outros Serviços Coletivos, Sociais e Pessoais 9 - Outras Atividades

Total de Moradores por Posição na Ocupação					
1-Trabalhador doméstico	<input type="text"/>	2-Conta própria	<input type="text"/>	3-Empregador com até 5 empregados	<input type="text"/>
	<input type="text"/>			4-Outro	<input type="text"/>

1-Trabalhador doméstico	2-Conta própria	3-Empregador com até 5 empregados	4-Outro
-------------------------	-----------------	-----------------------------------	---------

4		CARACTERÍSTICAS DE TRABALHO E RENDIMENTO PARA PESSOAS COM 10 ANOS OU MAIS DE IDADE	
Número de Ordem <div><div></div><div></div></div>		Nome do morador (nascido até 31/10/93) <div></div>	
1	<p>No mês de outubro, trabalhou, durante pelo menos 1 hora, em alguma atividade remunerada em dinheiro, produtos, mercadorias ou benefícios?</p> <p>2 <input type="checkbox"/> Sim (passe ao 3)</p> <p>4 <input type="checkbox"/> Não (siga 2)</p>	7	<p>.... era trabalhador por conta própria ou empregador com até 5 empregados em pelo menos um dos trabalhos que tinha, no mês de outubro?</p> <p>1 <input type="checkbox"/> Sim (siga 8)</p> <p>3 <input type="checkbox"/> Não (passe ao 11)</p>
2	<p>No mês de outubro, tinha algum trabalho remunerado do qual estava temporariamente afastado(a) por motivo de férias, licença, falta voluntária, greve, suspensão temporária de contrato de trabalho, doença, más condições de tempo ou por outra razão?</p> <p>1 <input type="checkbox"/> Sim (siga 3)</p> <p>3 <input type="checkbox"/> Não (passe ao 11)</p>	8	<p>No mês de outubro, quantos trabalhos tinha como trabalhador por conta própria ou como empregador com até 5 empregados, exclusive trabalho doméstico?</p> <p><div><div></div><div></div></div> (siga 9)</p>
3	<p>.... tinha mais de um trabalho no mês de outubro?</p> <p>2 <input type="checkbox"/> Um único trabalho</p> <p>4 <input type="checkbox"/> Dois trabalhos</p> <p>6 <input type="checkbox"/> Três ou mais trabalhos</p> <p>(siga 4)</p>	9	<p>.... recebia rendimentos de aposentadoria, pensão, aluguel, doação ou outro qualquer, no mês de outubro?</p> <p>2 <input type="checkbox"/> Sim (siga 10)</p> <p>4 <input type="checkbox"/> Não (preencha o ECINF 2.02)</p>
4	<p>Quanto ganhou, no mês de outubro, no(s) trabalho(s) que tinha?</p> <p>R\$ <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>,00 <div></div></p> <p>(siga 5)</p>	10	<p>Quanto recebeu no mês de outubro, dessa(s) outra(s) fonte(s)?</p> <p>1. Aposentadoria</p> <p><input type="checkbox"/> R\$ <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>,00 <div></div></p> <p>3. Pensão</p> <p><input type="checkbox"/> R\$ <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>,00 <div></div></p> <p>5. Aluguel</p> <p><input type="checkbox"/> R\$ <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>,00 <div></div></p> <p>7. Outros</p> <p><input type="checkbox"/> R\$ <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>,00 <div></div></p> <p>(preencha o ECINF 2.02)</p>
5	<p>.... era trabalhador doméstico em pelo menos um dos trabalhos que tinha, no mês de outubro?</p> <p>1 <input type="checkbox"/> Sim (se tinha somente um trabalho, código 2 no quesito 3, passe ao 11. Caso contrário, siga 6)</p> <p>3 <input type="checkbox"/> Não (passe ao 7)</p>	11	<p>.... saiu ou mudou de trabalho(s) entre agosto de 2003 e outubro de 2003?</p> <p>2 <input type="checkbox"/> Sim (siga 12)</p> <p>4 <input type="checkbox"/> Não (encerre a entrevista)</p>
6	<p>Excluindo o trabalho em que era trabalhador doméstico, era trabalhador por conta própria ou empregador com até 5 empregados no(s) outro(s) trabalho(s) que tinha, no mês de outubro?</p> <p>2 <input type="checkbox"/> Sim (passe ao 8)</p> <p>4 <input type="checkbox"/> Não (passe ao 11)</p>	12	<p>Em algum desse(s) trabalho(s) anterior(es), era empregador com até 5 empregados ou trabalhador por conta própria, exclusive trabalho doméstico?</p> <p>1 <input type="checkbox"/> Sim } 3 <input type="checkbox"/> Não } (encerre a entrevista)</p>

<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 5 ...tem sócio que trabalha no negócio? </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> 1 <input type="checkbox"/> Sim (siga 6) 3 <input type="checkbox"/> Não (passe ao 8) </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 6 Qual o número de sócios que trabalha no negócio? (inclua o informante) </div> <div style="text-align: center; margin-bottom: 5px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div> <p>(siga 7)</p> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 7 Quantos desses sócios moram neste domicílio? (inclua o informante) </div> <div style="text-align: center; margin-bottom: 5px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div> <p>(siga 8)</p> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 8 Quantas horas por semana, habitualmente, funciona o negócio? </div> <div style="text-align: center; margin-bottom: 5px;"> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div> <p>(siga 9)</p> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 9 Quantos dias, habitualmente, funciona o negócio por semana? </div> <div style="text-align: center; margin-bottom: 5px;"> <div style="border: 1px solid black; width: 20px; height: 30px; margin: 0 auto;"></div> <p>(siga 10)</p> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 10 O negócio funciona todos os meses do ano? </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> 2 <input type="checkbox"/> Sim (siga 11) 4 <input type="checkbox"/> Não, só determinados meses do ano 6 <input type="checkbox"/> Não, só de vez em quando </div> <div style="text-align: right; margin-right: 20px;">} (passe ao 12)</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 11 No período de 01/11/2002 a 31/10/2003, o negócio funcionou todos os meses? </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> 1 <input type="checkbox"/> Sim (passe ao 13) 3 <input type="checkbox"/> Não (siga 12) </div> <div style="border: 1px solid black; padding: 5px;"> 12 No período de 01/11/2002 a 31/10/2003, marque os meses em que funcionou: </div> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Período</th> <th style="width: 20%;">Mês</th> <th style="width: 10%;">Ano</th> </tr> </thead> <tbody> <tr><td>01</td><td><input type="checkbox"/> Novembro</td><td>2002</td></tr> <tr><td>02</td><td><input type="checkbox"/> Dezembro</td><td>2002</td></tr> <tr><td>03</td><td><input type="checkbox"/> Janeiro</td><td>2003</td></tr> <tr><td>04</td><td><input type="checkbox"/> Fevereiro</td><td>2003</td></tr> <tr><td>05</td><td><input type="checkbox"/> Março</td><td>2003</td></tr> <tr><td>06</td><td><input type="checkbox"/> Abril</td><td>2003</td></tr> <tr><td>07</td><td><input type="checkbox"/> Maio</td><td>2003</td></tr> <tr><td>08</td><td><input type="checkbox"/> Junho</td><td>2003</td></tr> <tr><td>09</td><td><input type="checkbox"/> Julho</td><td>2003</td></tr> <tr><td>10</td><td><input type="checkbox"/> Agosto</td><td>2003</td></tr> <tr><td>11</td><td><input type="checkbox"/> Setembro</td><td>2003</td></tr> <tr><td>12</td><td><input type="checkbox"/> Outubro</td><td>2003</td></tr> </tbody> </table> <div style="text-align: right;">(siga 13)</div>	Período	Mês	Ano	01	<input type="checkbox"/> Novembro	2002	02	<input type="checkbox"/> Dezembro	2002	03	<input type="checkbox"/> Janeiro	2003	04	<input type="checkbox"/> Fevereiro	2003	05	<input type="checkbox"/> Março	2003	06	<input type="checkbox"/> Abril	2003	07	<input type="checkbox"/> Maio	2003	08	<input type="checkbox"/> Junho	2003	09	<input type="checkbox"/> Julho	2003	10	<input type="checkbox"/> Agosto	2003	11	<input type="checkbox"/> Setembro	2003	12	<input type="checkbox"/> Outubro	2003	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 13 Para desenvolver suas atividades ... utiliza equipamentos e/ou instalações exclusivos para o negócio? </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> 1 <input type="checkbox"/> Sim, próprio(s) (siga 14) 3 <input type="checkbox"/> Sim, alugado(s) ou cedido(s) 5 <input type="checkbox"/> Não </div> <div style="text-align: right; margin-right: 20px;">} (passe ao 19)</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 14 Informe o valor das instalações e equipamentos que ... utiliza em seu negócio ou atividade e que são de sua propriedade: </div> <div style="margin-bottom: 5px;"> 1. Imóveis, barracas ou trailer <input type="checkbox"/> R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>,00 <input type="checkbox"/> </div> <div style="margin-bottom: 5px;"> 2. Ferramentas ou utensílios de trabalho <input type="checkbox"/> R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>,00 <input type="checkbox"/> </div> <div style="margin-bottom: 5px;"> 3. Máquinas <input type="checkbox"/> R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>,00 <input type="checkbox"/> </div> <div style="margin-bottom: 5px;"> 4. Móveis e equipamentos <input type="checkbox"/> R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>,00 <input type="checkbox"/> </div> <div style="margin-bottom: 5px;"> 5. Veículos utilizados no negócio <input type="checkbox"/> R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>,00 <input type="checkbox"/> </div> <div style="margin-bottom: 5px;"> 6. Outros <input type="checkbox"/> R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>,00 <input type="checkbox"/> </div> <div style="margin-bottom: 5px;"> 7. Total <input type="checkbox"/> R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>,00 <input type="checkbox"/> </div> <div style="text-align: right;">(siga 15)</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 15 Como ... obteve ou comprou a maioria dos equipamentos e/ou instalações? </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> 1 <input type="checkbox"/> Comprou de pequena empresa 2 <input type="checkbox"/> Comprou de empresa grande 3 <input type="checkbox"/> Comprou de particular 4 <input type="checkbox"/> Importou 5 <input type="checkbox"/> Construiu/adaptou 6 <input type="checkbox"/> Doação 7 <input type="checkbox"/> Outra condição (especifique) </div> <div style="margin-left: 40px; margin-top: 10px;"> <div style="border: 1px solid black; width: 200px; height: 20px; display: inline-block;"></div> </div> <div style="text-align: right;">(siga 16)</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 16 ... fez algum investimento e/ou aquisição entre 01/11/2002 e 31/10/2003? </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> 2 <input type="checkbox"/> Sim (siga 17) 4 <input type="checkbox"/> Não (passe ao 19) </div>
Período	Mês	Ano																																						
01	<input type="checkbox"/> Novembro	2002																																						
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09	<input type="checkbox"/> Julho	2003																																						
10	<input type="checkbox"/> Agosto	2003																																						
11	<input type="checkbox"/> Setembro	2003																																						
12	<input type="checkbox"/> Outubro	2003																																						

<p>25 Qual o principal motivo para que ... compre matéria-prima desse cliente?</p> <p>1 <input type="checkbox"/> Não tem escolha</p> <p>3 <input type="checkbox"/> O preço é mais baixo</p> <p>5 <input type="checkbox"/> A qualidade é melhor</p> <p>7 <input type="checkbox"/> Outro motivo</p> <p>(siga 26)</p>	<p>28 Normalmente suas vendas são:</p> <p>1 <input type="checkbox"/> Só à vista</p> <p>3 <input type="checkbox"/> Só a prazo</p> <p>5 <input type="checkbox"/> À vista e a prazo</p> <p>7 <input type="checkbox"/> Outra forma</p> <p>(siga 29)</p>
<p>26 ... tem contrato ou acordo verbal com outras empresas ou pessoas para processar seus produtos e devolvê-los à sua empresa?</p> <p>1 <input type="checkbox"/> Sim 3 <input type="checkbox"/> Não</p> <p>(siga 27)</p>	<p>29 Qual foi a receita obtida no mês de outubro com:</p> <p>2. Venda de produção própria</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>4. Revenda de mercadorias</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>6. Prestação de serviços</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>8. Outras receitas</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>(siga 30)</p>
<p>27 No mês de outubro ... teve gastos com:</p> <p>1. Matéria-prima</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>2. Mercadorias para revenda</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>3. Mão-de-obra (salários, comissão, etc.)</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>4. Encargos Sociais (INSS, FGTS)</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>5. Luz, água e telefone</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>6. Aluguel de imóveis</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>7. Aluguel de máquinas e equipamentos</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>8. Aluguel de veículos</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>9. Combustível</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>10. Serviços de reparação e manutenção</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>11. Outros serviços de terceiros</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>12. Impostos e taxas</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>13. Despesas financeiras</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>14. Outros</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>15. Total de despesas</p> <p><input type="checkbox"/> R\$ <input type="text"/> ,00 <input type="text"/></p> <p>(siga 28)</p>	<p>30 ... utiliza parte de sua produção (ou das mercadorias que revende) para consumo próprio ou pagamento a empregados?</p> <p>1 <input type="checkbox"/> Sim</p> <p>3 <input type="checkbox"/> Não</p> <p>(siga 31)</p> <p>31 ... utilizou no período de 01/08/2003 a 31/10/2003 algum empréstimo, crédito, ou financiamento para exercer sua atividade?</p> <p>1 <input type="checkbox"/> Não (passe ao 34)</p> <p>3 <input type="checkbox"/> Sim, eventualmente</p> <p>5 <input type="checkbox"/> Sim, freqüentemente</p> <p>} (siga 32)</p> <p>32 No período de 01/08/2003 a 31/10/2003 qual foi a principal fonte de recursos para obter esse empréstimo, crédito ou financiamento?</p> <p>1 <input type="checkbox"/> Com amigos e parentes</p> <p>2 <input type="checkbox"/> Em bancos públicos ou privados</p> <p>3 <input type="checkbox"/> Com o próprio fornecedor</p> <p>4 <input type="checkbox"/> Com outras empresas ou pessoas</p> <p>5 <input type="checkbox"/> Outra (especifique)</p> <p>→ <input type="text"/></p> <p>(siga 33)</p>

<p>33 Qual a principal utilização desse crédito ou financiamento?</p> <p>1 <input type="checkbox"/> Compra de imóveis</p> <p>2 <input type="checkbox"/> Compra de máquinas e equipamentos</p> <p>3 <input type="checkbox"/> Compra de veículos</p> <p>4 <input type="checkbox"/> Compra de matérias-primas e/ou mercadorias</p> <p>5 <input type="checkbox"/> Saldar compromissos da atividade (salários, dívidas)</p> <p>6 <input type="checkbox"/> Outra finalidade (especifique)</p> <p>→ <input type="text"/></p> <p>(siga 34)</p>	<p>38 Sua empresa tem constituição jurídica?</p> <p>1 <input type="checkbox"/> Sim (siga 39)</p> <p>3 <input type="checkbox"/> Não (passe ao 44)</p>
<p>34 ... tem alguma dívida que ainda esteja pagando?</p> <p>2 <input type="checkbox"/> Sim (siga 35)</p> <p>4 <input type="checkbox"/> Não (passe ao 36)</p>	<p>39 Qual a natureza jurídica de sua empresa?</p> <p>1 <input type="checkbox"/> Firma Mercantil Individual</p> <p>2 <input type="checkbox"/> Sociedade Mercantil em Nome Coletivo</p> <p>3 <input type="checkbox"/> Sociedade Mercantil em Comandita Simples</p> <p>4 <input type="checkbox"/> Sociedade Mercantil em Comandita por Ações</p> <p>5 <input type="checkbox"/> Sociedade Mercantil de Capital e Indústria</p> <p>6 <input type="checkbox"/> Sociedade Civil</p> <p>7 <input type="checkbox"/> Sociedade Mercantil por Quotas de Responsabilidade Limitada</p> <p>8 <input type="checkbox"/> Sociedade Mercantil em Conta de Participação</p> <p>9 <input type="checkbox"/> Cooperativa</p> <p>10 <input type="checkbox"/> Sociedade Anônima</p> <p>11 <input type="checkbox"/> Outra</p> <p>(siga 40)</p>
<p>35 Qual o valor total de suas dívidas no mês de novembro?</p> <p>R\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ,00 <input type="text"/></p> <p>(siga 36)</p>	<p>40 Sua empresa tem registro no Cadastro Nacional da Pessoa Jurídica - CNPJ?</p> <p>1 <input type="checkbox"/> Sim</p> <p>3 <input type="checkbox"/> Não</p> <p>(siga 41)</p>
<p>36 Como ... controla as contas do seu negócio? (usa de contabilidade)</p> <p>2 <input type="checkbox"/> Não registra nada</p> <p>4 <input type="checkbox"/> Registra sozinho</p> <p>6 <input type="checkbox"/> Tem contador que faz o controle</p> <p>8 <input type="checkbox"/> Outra forma (especifique)</p> <p>→ <input type="text"/></p> <p>(siga 37)</p>	<p>41 Sua empresa tem registro de microempresa?</p> <p>2 <input type="checkbox"/> Sim</p> <p>4 <input type="checkbox"/> Não</p> <p>(siga 42)</p>
<p>37 Qual a principal forma que ... usa para fixar o preço de seus produtos ou serviços?</p> <p>1 <input type="checkbox"/> Preço das outras empresas concorrentes</p> <p>2 <input type="checkbox"/> Custos de produção mais uma parcela fixa</p> <p>3 <input type="checkbox"/> Negocia com o cliente</p> <p>4 <input type="checkbox"/> O cliente determina</p> <p>5 <input type="checkbox"/> O preço é tabelado pelo fabricante ou pelo governo</p> <p>6 <input type="checkbox"/> Outro fator (especifique)</p> <p>→ <input type="text"/></p> <p>(siga 38)</p>	

42	... preencheu, em 2003, a declaração anual do Imposto de Renda de Pessoa Jurídica?
1	<input type="checkbox"/> Sim (siga 43)
3	<input type="checkbox"/> Não (passe ao 44)
43	Qual foi o modelo de formulário que ... preencheu?
2	<input type="checkbox"/> Lucro real
4	<input type="checkbox"/> Lucro presumido ou arbitrado
6	<input type="checkbox"/> Isentos
	(passe ao 45)
44	... aderiu ao sistema de tributação "SIMPLES" - Sistema Integrado de Pagamento de Impostos e Contribuições das Microempresas e das Empresas de Pequeno Porte?
2	<input type="checkbox"/> Sim
4	<input type="checkbox"/> Não
	(passe ao 46)
45	... tem alguma licença municipal ou estadual para exercer a atividade?
1	<input type="checkbox"/> Sim
3	<input type="checkbox"/> Não
	(siga 46)
46	... é filiado a algum sindicato ou órgão de classe associado à sua atividade?
2	<input type="checkbox"/> Sim (passe ao 48)
4	<input type="checkbox"/> Não (siga 47)
47	... já pensou em fazer associação ou cooperativa com outros produtores ou prestadores de serviços?
1	<input type="checkbox"/> Sim (siga 48)
3	<input type="checkbox"/> Não (passe ao 49)
48	Qual o principal motivo que levou ... a filiar-se (ou pensar em) a sindicato, associação ou cooperativa?
1	<input type="checkbox"/> Comprar matérias-primas e/ou mercadorias
2	<input type="checkbox"/> Comercializar a produção
3	<input type="checkbox"/> Facilitar o acesso ao crédito
4	<input type="checkbox"/> Para melhor defender seus interesses
5	<input type="checkbox"/> Exigência legal para exercer a profissão
6	<input type="checkbox"/> Outro (especifique)
	<div style="border: 1px solid black; width: 200px; height: 15px; margin-left: 10px;"></div>
	(siga 49)

49

Quantas pessoas trabalharam no empreendimento, em outubro, incluindo o informante (proprietário) e excluindo os trabalhadores a domicílio?

Nº de Ordem	Nome das pessoas que trabalham no negócio	Relação de parentesco	Sexo	Idade	Nível de instrução	Posição na ocupação	Vínculo de trabalho	Forma de entrada no negócio	Tempo no negócio	Jornada de trabalho	Remuneração ou retirada	Frequência de pagamento	Base de pagamento
(A)		(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(M)	(N)	(O)
01		0				0	1	0	0|0|0		R\$		6
02											R\$		
03											R\$		
04											R\$		
05											R\$		
06											R\$		
07											R\$		
08											R\$		
09											R\$		
10											R\$		

(A) Nº de Ordem (relativo às pessoas)

(B) Relação de parentesco
1- Nenhum
2- Filho(a)
3- Cônjuge
4- Outros Parentes

(C) Sexo
1- Masculino
3- Feminino

(D) Idade (Nº de anos completos)

(E) Nível de instrução
1- Sem instrução
2- Sabe ler e escrever
3- Ensino Fundamental ou 1º Grau incompleto
4- Ensino Fundamental ou 1º Grau completo
5- Ensino Médio ou 2º Grau incompleto
6- Ensino Médio ou 2º Grau completo
7- Superior incompleto
8- Superior completo

(F) Posição na ocupação
1- Empregador
2- Empregado com carteira
3- Empregado sem carteira
4- Trabalhador por conta própria
5- Não remunerado
(G) Vínculo de trabalho
1- Proprietário ou sócio
2- Trabalha por tempo indeterminado
3- Trabalha por tempo determinado
4- Trabalha por tarefa
5- Outro

(H) Forma de entrada no negócio (L) Dias por mês (Nº de dias no mês)
1- Relações pessoais
2- Anúncio no jornal
3- Cartazes
4- Agência de recrutamento
5- Outra forma
(I) Tempo no negócio (Nº de meses completos)
(J) Horas por semana (Nº de horas por semana)

(O) Base de pagamento
1- Salário fixo por hora
2- Salário fixo por mês
3- Salário e gratificação e/ou adicional e/ou comissão
4- Por peça/tarefa
5- Participação nas vendas
6- Retirada do proprietário ou sócio
7- Outro
8- Não remunerado

(siga 50)

<p>50 ... teve despesa com auxílio refeição no mês de outubro?</p> <p>1 <input type="checkbox"/> Sim</p> <p>3 <input type="checkbox"/> Não</p> <p>(siga 51)</p>	<p>55 Quais as principais dificuldades que afetaram o desenvolvimento do seu negócio, no período de 01/11/2002 a 31/10/2003?</p> <p>1 <input type="checkbox"/> Não teve dificuldade (passe ao 57)</p> <p>2 <input type="checkbox"/> Falta de clientes</p> <p>3 <input type="checkbox"/> Falta de crédito</p> <p>4 <input type="checkbox"/> Baixo lucro</p> <p>5 <input type="checkbox"/> Abastecimento de água ou de energia elétrica</p> <p>6 <input type="checkbox"/> Problemas com a fiscalização e/ou regularização do negócio</p> <p>7 <input type="checkbox"/> Falta de mão-de-obra qualificada</p> <p>8 <input type="checkbox"/> Escassez ou má qualidade das matérias-primas</p> <p>9 <input type="checkbox"/> Rotatividade da mão-de-obra</p> <p>10 <input type="checkbox"/> Concorrência muito grande</p> <p>11 <input type="checkbox"/> Falta de instalações adequadas</p> <p>12 <input type="checkbox"/> Falta de capital próprio</p> <p>13 <input type="checkbox"/> Necessidade de treinamento gerencial</p> <p>14 <input type="checkbox"/> Outras</p> <p>(siga 56)</p>
<p>51 ... teve despesa com auxílio transporte no mês de outubro?</p> <p>2 <input type="checkbox"/> Sim</p> <p>4 <input type="checkbox"/> Não</p> <p>(siga 52)</p>	<p>56 Das dificuldades indicadas no quesito anterior, qual a que ... considera mais importante?</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p>(siga 57)</p>
<p>52 ... teve despesa com outro(s) auxílio(s) como educação, uniforme, moradia ou saúde no mês de outubro?</p> <p>1 <input type="checkbox"/> Sim</p> <p>3 <input type="checkbox"/> Não</p> <p>(siga 53)</p>	<p>57 Dentre as alternativas abaixo, qual a que melhor retrata seus planos para o futuro do negócio?</p> <p>1 <input type="checkbox"/> Aumentar o negócio</p> <p>2 <input type="checkbox"/> Continuar o negócio no mesmo nível</p> <p>3 <input type="checkbox"/> Mudar de atividade e continuar independente</p> <p>4 <input type="checkbox"/> Abandonar a atividade e procurar emprego</p> <p>5 <input type="checkbox"/> Não sabe</p> <p>6 <input type="checkbox"/> Outra</p> <p>(siga 58)</p>
<p>53 ... contrata trabalho a domicílio?</p> <p>2 <input type="checkbox"/> Não</p> <p>4 <input type="checkbox"/> Sim, ocasionalmente</p> <p>6 <input type="checkbox"/> Sim, regularmente</p> <p>(siga 54)</p>	<p>58 ... recebeu, no período de novembro de 1998 a outubro de 2003, alguma assistência técnica, jurídica ou financeira?</p> <p>1 <input type="checkbox"/> Sim (siga 59)</p> <p>3 <input type="checkbox"/> Não (passe a parte 4)</p>
<p>54 Qual a alternativa que melhor retrata o desempenho do seu negócio no período entre 01/11/2002 e 31/10/2003?</p> <p>1 <input type="checkbox"/> Houve aumento no número de pessoas ocupadas</p> <p>2 <input type="checkbox"/> Houve redução no número de pessoas ocupadas</p> <p>3 <input type="checkbox"/> Houve aumento da capacidade produtiva (equipamentos, instalações)</p> <p>4 <input type="checkbox"/> Houve redução da capacidade produtiva (equipamentos, instalações)</p> <p>5 <input type="checkbox"/> Houve diversificação das atividades</p> <p>6 <input type="checkbox"/> Houve redução da atividade</p> <p>7 <input type="checkbox"/> Houve ampliação da jornada de trabalho</p> <p>8 <input type="checkbox"/> Houve redução do número de horas trabalhadas</p> <p>9 <input type="checkbox"/> Permaneceu igual</p> <p>(siga 55)</p>	<p>59 Qual a fonte mais relevante da assistência recebida?</p> <p>2 <input type="checkbox"/> Órgãos ligados ao governo</p> <p>4 <input type="checkbox"/> Outras instituições</p> <p>(siga 60)</p>
	<p>60 Qual o tipo mais freqüente de assistência recebida?</p> <p>1 <input type="checkbox"/> Financeira</p> <p>2 <input type="checkbox"/> Técnica</p> <p>3 <input type="checkbox"/> Jurídica</p> <p>4 <input type="checkbox"/> Treinamento</p> <p>5 <input type="checkbox"/> Outro</p> <p>(siga parte 4)</p>

4		CARACTERÍSTICAS INDIVIDUAIS DO PROPRIETÁRIO	
1	Qual foi o principal motivo que levou ... a se dedicar a esse negócio?	5	No último trabalho que ... teve, qual era a atividade do negócio?
1	<input type="checkbox"/> Não encontrou emprego	1	<input type="checkbox"/> Indústria
2	<input type="checkbox"/> Teve oportunidade de fazer sociedade	2	<input type="checkbox"/> Comércio
3	<input type="checkbox"/> Horário flexível	3	<input type="checkbox"/> Serviços
4	<input type="checkbox"/> Queria ser independente	4	<input type="checkbox"/> Transporte
5	<input type="checkbox"/> Tradição familiar	5	<input type="checkbox"/> Construção civil
6	<input type="checkbox"/> Para complementar a renda familiar	6	<input type="checkbox"/> Outra
7	<input type="checkbox"/> Tinha experiência que adquiriu em outro trabalho	(siga 6)	
8	<input type="checkbox"/> Achava o negócio vantajoso	6	Nesse último trabalho ... era:
9	<input type="checkbox"/> Esse era um trabalho secundário, que se tornou principal	1	<input type="checkbox"/> Trabalhador doméstico (passe ao 8)
10	<input type="checkbox"/> Outro (especifique)	2	<input type="checkbox"/> Empregado (siga 7)
	<div style="border: 1px solid black; height: 20px; width: 250px; margin-top: 5px;"></div>	3	<input type="checkbox"/> Empregador com até 5 empregados
	(siga 2)	4	<input type="checkbox"/> Empregador com mais de 5 empregados
2	Qual a principal origem do capital necessário para ... iniciar o negócio?	5	<input type="checkbox"/> Conta própria
1	<input type="checkbox"/> Indenização recebida	6	<input type="checkbox"/> Trabalhador não remunerado de membro da unidade domiciliar que era conta própria ou empregador
2	<input type="checkbox"/> Herança	7	<input type="checkbox"/> Trabalhador não remunerado de membro da unidade domiciliar que era empregado
3	<input type="checkbox"/> Poupança anterior ou venda de bens ou imóveis	(passe ao 9)	
4	<input type="checkbox"/> Outros recursos próprios		
5	<input type="checkbox"/> Empréstimo de parentes e/ou amigos	7	Esse último trabalho era no setor público ou privado?
6	<input type="checkbox"/> Empréstimo bancário	2	<input type="checkbox"/> Público
7	<input type="checkbox"/> Com outras empresas ou pessoas	4	<input type="checkbox"/> Privado
8	<input type="checkbox"/> Não precisou de capital porque o sócio o tinha	(siga 8)	
9	<input type="checkbox"/> Não precisou de capital	8	... tinha carteira de trabalho assinada nesse último trabalho?
10	<input type="checkbox"/> Outra	1	<input type="checkbox"/> Sim
	(siga 3)	3	<input type="checkbox"/> Não
3	Em 31/10/2003, fez quanto tempo que ... se tornou proprietário nesse negócio?	(siga 9)	
	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; position: relative;"> Anos </div> <div style="border: 1px solid black; width: 30px; height: 30px; position: relative;"> Meses </div> </div> <p>(Se a menos de 5 anos, siga 4. Caso contrário, passe ao 12)</p>	9	Por quanto tempo ... permaneceu nesse último trabalho?
4	... saiu de algum trabalho antes de entrar nesse negócio?		
1	<input type="checkbox"/> Sim (siga 5)	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; position: relative;"> Anos </div> <div style="border: 1px solid black; width: 30px; height: 30px; position: relative;"> Meses </div> </div>	
3	<input type="checkbox"/> Não (passe ao 12)	(siga 10)	

<p>10 Qual o principal motivo para ... ter saído desse último trabalho?</p> <p>1 <input type="checkbox"/> Tinha contrato por tempo determinado</p> <p>2 <input type="checkbox"/> Foi dispensado</p> <p>3 <input type="checkbox"/> Aposentou-se</p> <p>4 <input type="checkbox"/> Motivos pessoais ou familiares</p> <p>5 <input type="checkbox"/> Não se adaptou ao trabalho</p> <p>6 <input type="checkbox"/> Ganhava pouco</p> <p>7 <input type="checkbox"/> Seu negócio anterior faliu ou não ia bem</p> <p>8 <input type="checkbox"/> Tinha um trabalho secundário que estava dando certo</p> <p>9 <input type="checkbox"/> Outro motivo (especifique)</p> <div style="border: 1px solid black; height: 20px; width: 250px; margin-top: 5px;"></div> <p style="text-align: right;">(siga 11)</p>	<p>15 Esse outro trabalho era no setor:</p> <p>1 <input type="checkbox"/> Privado</p> <p>3 <input type="checkbox"/> Público</p> <p style="text-align: right;">(siga 16)</p>								
<p>11 Esse último trabalho informado foi seu primeiro trabalho?</p> <p>1 <input type="checkbox"/> Sim 3 <input type="checkbox"/> Não</p> <p style="text-align: right;">(siga 12)</p>	<p>16 ... tinha carteira de trabalho assinada nesse outro trabalho?</p> <p>2 <input type="checkbox"/> Sim</p> <p>4 <input type="checkbox"/> Não</p> <p style="text-align: right;">(siga 17)</p>								
<p>12 Com que idade ... começou a trabalhar?</p> <div style="text-align: center; margin-top: 20px;"> <div style="border: 1px solid black; width: 30px; height: 30px; display: inline-block; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; display: inline-block;"></div> </div> <p style="text-align: center;">Anos (siga 13)</p>	<p>17 Qual a atividade do negócio onde ... exercia esse outro trabalho?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Código</th> <th style="width: 85%;">Descrição</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"> </td> <td style="height: 20px;"> </td> </tr> <tr> <td style="height: 20px;"> </td> <td style="height: 20px;"> </td> </tr> <tr> <td style="height: 20px;"> </td> <td style="height: 20px;"> </td> </tr> </tbody> </table> <p style="text-align: right;">(siga 18)</p>	Código	Descrição						
Código	Descrição								
<p>13 ... teve mais de um trabalho no mês de outubro? (Transcrição do quesito 3, parte 4 do ECINF 2.01)</p> <p>2 <input type="checkbox"/> Sim (siga 14)</p> <p>4 <input type="checkbox"/> Não (passe ao 24)</p>	<p>18 Com que frequência ... exerce esse outro trabalho?</p> <p>1 <input type="checkbox"/> Regularmente</p> <p>3 <input type="checkbox"/> Só determinados períodos do ano</p> <p>5 <input type="checkbox"/> De vez em quando</p> <p style="text-align: right;">(siga 19)</p>								
<p>QUESITOS 14 a 23 - PARA PESSOA COM DOIS OU MAIS TRABALHOS</p>									
<p>14 Nesse outro trabalho ... era:</p> <p>1 <input type="checkbox"/> Empregado (siga 15)</p> <p>2 <input type="checkbox"/> Trabalhador doméstico (passe ao 16)</p> <p>3 <input type="checkbox"/> Trabalhador não remunerado de membro da unidade domiciliar que era conta própria ou empregador</p> <p>4 <input type="checkbox"/> Trabalhador não remunerado de membro da unidade domiciliar que era empregado</p> <p>5 <input type="checkbox"/> Empregador com até 5 empregados no setor agrícola</p> <p>6 <input type="checkbox"/> Empregador com mais de 5 empregados</p> <p>7 <input type="checkbox"/> Proprietário do setor informal (passe ao 24)</p> <div style="position: relative; margin-top: 10px;"> } <div style="position: absolute; left: 10px; top: 0; bottom: 0; display: flex; align-items: center; justify-content: center;"> (Passe ao 17) </div> </div>	<p>19 Quantas horas ... trabalhava, normalmente, nesse outro trabalho, por semana?</p> <div style="text-align: center; margin-top: 20px;"> <div style="border: 1px solid black; width: 30px; height: 30px; display: inline-block; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; display: inline-block; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; display: inline-block;"></div> </div> <p style="text-align: center;">Horas (siga 20)</p>								
	<p>20 Em 31/10/2003 fazia quanto tempo que ... estava nesse outro trabalho?</p> <div style="text-align: center; margin-top: 20px;"> <div style="border: 1px solid black; width: 30px; height: 30px; display: inline-block; margin-right: 10px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; display: inline-block;"></div> </div> <p style="text-align: center;">Anos Meses (siga 21)</p>								
	<p>21 Quanto ... ganhou no mês de outubro nesse outro trabalho?</p> <p style="text-align: center; margin-top: 20px;">R\$ <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div> ,00 <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div></p> <p style="text-align: right;">(siga 22)</p>								
	<p>22 Qual dos seus trabalhos considera o principal?</p> <p>2 <input type="checkbox"/> O informado anteriormente em que é conta própria ou empregador</p> <p>4 <input type="checkbox"/> Este, informado nesta parte</p> <p style="text-align: right;">(siga 23)</p>								

<p>23 Qual o principal motivo para essa escolha?</p> <p>1 <input type="checkbox"/> É mais estável</p> <p>2 <input type="checkbox"/> Trabalha maior número de horas</p> <p>3 <input type="checkbox"/> Obtém maior rendimento</p> <p>4 <input type="checkbox"/> Gosta mais</p> <p>5 <input type="checkbox"/> Tem carteira de trabalho assinada</p> <p>6 <input type="checkbox"/> Outro</p> <p>(siga 24)</p>	<p>29 Qual foi o nível de escolaridade exigido para ... poder frequentar esse curso de especialização ou de formação profissional?</p> <p>1 <input type="checkbox"/> Nenhum</p> <p>2 <input type="checkbox"/> Alfabetização ou conclusão da 1ª série do ensino fundamental ou 1º grau ou elementar</p> <p>3 <input type="checkbox"/> Conclusão da 4ª série do ensino fundamental, 1º grau ou elementar</p> <p>4 <input type="checkbox"/> Conclusão da 4ª série do ensino fundamental, 1º grau ou médio 1º ciclo</p> <p>5 <input type="checkbox"/> Conclusão do ensino médio, 2º grau ou médio 2º ciclo</p> <p>6 <input type="checkbox"/> Conclusão do ensino superior</p> <p>(siga 30)</p>
<p>24 Em outubro de 2003, ... era contribuinte de instituto de previdência oficial (Federal, Estadual ou Municipal)?</p> <p>1 <input type="checkbox"/> Sim (passe ao 26) 3 <input type="checkbox"/> Não (siga 25)</p>	<p>30 ... nasceu neste município?</p> <p>1 <input type="checkbox"/> Sim (passe ao 32)</p> <p>3 <input type="checkbox"/> Não (siga 31)</p>
<p>25 Qual o principal motivo de ... não contribuir para instituto de previdência oficial (Federal, Estadual ou Municipal)?</p> <p>1 <input type="checkbox"/> Acha o custo elevado</p> <p>2 <input type="checkbox"/> Falta conhecimento sobre as regras de aposentadoria</p> <p>3 <input type="checkbox"/> Acha que não vale a pena a remuneração final</p> <p>4 <input type="checkbox"/> Não considera importante</p> <p>5 <input type="checkbox"/> Já é aposentado</p> <p>6 <input type="checkbox"/> Acha o tempo de contribuição muito longo</p> <p>7 <input type="checkbox"/> Outro motivo</p> <p>(siga 26)</p>	<p>31 ... nasceu neste estado (unidade da federação)?</p> <p>2 <input type="checkbox"/> Sim (siga 32)</p> <p>4 <input type="checkbox"/> Não (passe ao 33)</p>
<p>26 Em outubro de 2003, ... era contribuinte de algum plano de previdência privada?</p> <p>2 <input type="checkbox"/> Sim</p> <p>4 <input type="checkbox"/> Não</p> <p>(siga 27)</p>	<p>32 ... já morou em outro município ou país estrangeiro?</p> <p>1 <input type="checkbox"/> Sim (passe ao 34)</p> <p>3 <input type="checkbox"/> Não (encerre a entrevista)</p>
<p>27 ... frequenta escola?</p> <p>1 <input type="checkbox"/> Sim</p> <p>3 <input type="checkbox"/> Não</p> <p>(siga 28)</p>	<p>33 Em que estado (unidade da federação) ou país estrangeiro ... nasceu?</p> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 250px; height: 20px; margin-right: 5px;"></div> </div> <p>Código</p> <div style="border: 1px solid black; width: 250px; height: 20px; margin-top: 5px;"></div> <p>(siga 34)</p>
<p>28 ... frequenta ou frequentou curso de especialização ou de formação profissional?</p> <p>2 <input type="checkbox"/> Sim (siga 29)</p> <p>4 <input type="checkbox"/> Não (passe ao 30)</p>	<p>34 Em 31/10/2003 fez quanto tempo que ... estava morando, sem interrupção, neste município?</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 5px;"></div> </div> <p>Anos Meses</p> <p>(Se há menos de 5 anos, siga 35. Caso contrário, encerre a entrevista.)</p> <p>35 Qual foi o último estado (unidade da federação) ou país estrangeiro em que ... morou anteriormente?</p> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 250px; height: 20px; margin-right: 5px;"></div> </div> <p>Código</p> <div style="border: 1px solid black; width: 250px; height: 20px; margin-top: 5px;"></div> <p>(encerre a entrevista)</p>

ECINF 2.02 - QUESTIONÁRIO SUPLEMENTAR Pequenos Empreendimentos				Folha <div></div>	1 1	1 Controle <div></div>	2 Grupo <div></div>	3 Série <div></div>
Número de Ordem <div></div>		Nome do morador (nascido até 31/10/93) <div></div>						
5 LOCALIZAÇÃO DOS CLIENTES								
1 De que local(is) são seus clientes? <div> <div>1 <input type="checkbox"/> Do mesmo bairro</div> <div>4 <input type="checkbox"/> De outros estados</div> <div>2 <input type="checkbox"/> De outros bairros</div> <div>5 <input type="checkbox"/> De outros países</div> <div>3 <input type="checkbox"/> De outros municípios</div> <div>6 <input type="checkbox"/> Não sabe</div> </div> <div>(siga parte 6)</div>								
6 CARACTERÍSTICAS RELACIONADAS À REGULARIZAÇÃO DO NEGÓCIO								
1 Quando iniciou o seu negócio, ... teve dificuldade em regularizá-lo? <div> <div>1 <input type="checkbox"/> Sim (siga 2)</div> <div>3 <input type="checkbox"/> Não</div> <div>5 <input type="checkbox"/> Não tentou regularizar</div> </div> <div>(passe à parte 7)</div>					2 Qual o principal problema que ... teve para regularizar o negócio? <div> <div>1 <input type="checkbox"/> Alto custo para registrar o negócio</div> <div>2 <input type="checkbox"/> Falta de informação / orientação</div> <div>3 <input type="checkbox"/> Não queria pagar impostos</div> <div>4 <input type="checkbox"/> Não queria ter gastos com o contador</div> <div>5 <input type="checkbox"/> Grande burocracia envolvida na regularização</div> <div>6 <input type="checkbox"/> Outros</div> </div> <div>(siga parte 7)</div>			
7 ACESSO A SERVIÇOS NÃO FINANCEIROS								
1 De novembro de 1998 a outubro de 2003, ... teve capacitação em gestão do seu negócio? <div> <div>2 <input type="checkbox"/> Sim (siga 2)</div> <div>4 <input type="checkbox"/> Não (passe ao 5)</div> </div>					4 Esta capacitação em gestão teve impacto positivo no desempenho do seu negócio? <div> <div>1 <input type="checkbox"/> Sim, porém pequeno</div> <div>5 <input type="checkbox"/> Não</div> <div>3 <input type="checkbox"/> Sim, expressivo</div> </div> <div>(passe ao 6)</div>			
2 ... pagou por este tipo de capacitação em gestão do seu negócio? <div> <div>1 <input type="checkbox"/> Sim</div> <div>3 <input type="checkbox"/> Não</div> </div> <div>(siga 3)</div>					5 Por que não teve capacitação em gestão de negócio? <div> <div>1 <input type="checkbox"/> Não achou necessário</div> <div>2 <input type="checkbox"/> O preço cobrado era alto</div> <div>3 <input type="checkbox"/> O local da oferta era longe</div> <div>4 <input type="checkbox"/> Desconhecia a oferta de capacitação de gestão</div> <div>5 <input type="checkbox"/> Os serviços existentes não eram adequados</div> <div>6 <input type="checkbox"/> Outros motivos</div> </div> <div>(siga 6)</div>			
3 Qual foi a principal instituição responsável pela capacitação em gestão recebida? <div> <div>1 <input type="checkbox"/> SEBRAE</div> <div>2 <input type="checkbox"/> Instituições governamentais</div> <div>3 <input type="checkbox"/> Instituições privadas</div> <div>4 <input type="checkbox"/> Organizações não-governamentais - ONGs</div> <div>5 <input type="checkbox"/> Outras</div> </div> <div>(siga 4)</div>					<div>Para pessoas que receberam assistência técnica, jurídica ou financeira - Código 1 - Sim no Quesito 58 do ECINF 2.02, Parte 3, siga 6. Caso contrário, passe ao 18</div>			
					6 ... pagou pela assistência técnica? <div> <div>2 <input type="checkbox"/> Sim</div> <div>4 <input type="checkbox"/> Não</div> </div> <div>(siga 7)</div> <div>6 <input type="checkbox"/> Não teve assistência técnica (passe ao 9)</div>			

<p>7 Qual foi a principal instituição responsável pela assistência técnica recebida?</p> <p>1 <input type="checkbox"/> SEBRAE</p> <p>2 <input type="checkbox"/> Instituições governamentais</p> <p>3 <input type="checkbox"/> Instituições privadas</p> <p>4 <input type="checkbox"/> Organizações não-governamentais - ONGs</p> <p>5 <input type="checkbox"/> Outras</p> <p>(siga 8)</p>	<p>14 ... pagou pela assistência contábil?</p> <p>1 <input type="checkbox"/> Sim</p> <p>3 <input type="checkbox"/> Não</p> <p>(siga 15) 5 <input type="checkbox"/> Não teve assistência contábil (passe ao 17)</p>
<p>8 Esta assistência técnica teve impacto positivo no desempenho do seu negócio?</p> <p>2 <input type="checkbox"/> Sim, porém pequeno 6 <input type="checkbox"/> Não</p> <p>4 <input type="checkbox"/> Sim, expressivo</p> <p>(passe ao 10)</p>	<p>15 Qual foi a principal instituição responsável pela assistência contábil recebida?</p> <p>1 <input type="checkbox"/> SEBRAE</p> <p>2 <input type="checkbox"/> Instituições governamentais</p> <p>3 <input type="checkbox"/> Instituições privadas</p> <p>4 <input type="checkbox"/> Organizações não-governamentais - ONGs</p> <p>5 <input type="checkbox"/> Outras</p> <p>(siga 16)</p>
<p>9 Por que não teve assistência técnica?</p> <p>1 <input type="checkbox"/> Não achou necessário</p> <p>2 <input type="checkbox"/> O preço cobrado era alto</p> <p>3 <input type="checkbox"/> O local da oferta era longe</p> <p>4 <input type="checkbox"/> Desconhecia a oferta de assistência técnica</p> <p>5 <input type="checkbox"/> Os serviços existentes não eram adequados</p> <p>6 <input type="checkbox"/> Outros motivos</p> <p>(siga 10)</p>	<p>16 Esta assistência contábil teve impacto positivo no desempenho do seu negócio?</p> <p>1 <input type="checkbox"/> Sim, porém pequeno 5 <input type="checkbox"/> Não</p> <p>3 <input type="checkbox"/> Sim, expressivo</p> <p>(passe ao 18)</p>
<p>10 ... pagou pela assistência jurídica?</p> <p>2 <input type="checkbox"/> Sim</p> <p>4 <input type="checkbox"/> Não</p> <p>(siga 11) 6 <input type="checkbox"/> Não teve assistência jurídica (passe ao 13)</p>	<p>17 Por que não teve assistência contábil?</p> <p>1 <input type="checkbox"/> Não achou necessário</p> <p>2 <input type="checkbox"/> O preço cobrado era alto</p> <p>3 <input type="checkbox"/> O local da oferta era longe</p> <p>4 <input type="checkbox"/> Desconhecia a oferta de assistência técnica</p> <p>5 <input type="checkbox"/> Os serviços existentes não eram adequados</p> <p>6 <input type="checkbox"/> Outros motivos</p> <p>(siga 18)</p>
<p>11 Qual foi a principal instituição responsável pela assistência jurídica recebida?</p> <p>1 <input type="checkbox"/> SEBRAE</p> <p>2 <input type="checkbox"/> Instituições governamentais</p> <p>3 <input type="checkbox"/> Instituições privadas</p> <p>4 <input type="checkbox"/> Organizações não-governamentais - ONGs</p> <p>5 <input type="checkbox"/> Outras</p> <p>(siga 12)</p>	<p>18 De novembro de 1998 a outubro de 2003, ... teve algum tipo de apoio à comercialização?</p> <p>1 <input type="checkbox"/> Sim (siga 19) 3 <input type="checkbox"/> Não (passe ao 22)</p>
<p>12 Esta assistência jurídica teve impacto positivo no desempenho do seu negócio?</p> <p>2 <input type="checkbox"/> Sim, porém pequeno 6 <input type="checkbox"/> Não</p> <p>4 <input type="checkbox"/> Sim, expressivo</p> <p>(passe ao 14)</p>	<p>19 ... pagou por algum tipo de apoio à comercialização?</p> <p>2 <input type="checkbox"/> Sim 4 <input type="checkbox"/> Não</p> <p>(siga 20)</p>
<p>13 Por que não teve assistência jurídica?</p> <p>1 <input type="checkbox"/> Não achou necessário</p> <p>2 <input type="checkbox"/> O preço cobrado era alto</p> <p>3 <input type="checkbox"/> O local da oferta era longe</p> <p>4 <input type="checkbox"/> Desconhecia a oferta de assistência jurídica</p> <p>5 <input type="checkbox"/> Os serviços existentes não eram adequados</p> <p>6 <input type="checkbox"/> Outros motivos</p> <p>(siga 14)</p>	<p>20 Qual foi a principal instituição responsável pelo apoio à comercialização recebido?</p> <p>1 <input type="checkbox"/> SEBRAE</p> <p>2 <input type="checkbox"/> Instituições governamentais</p> <p>3 <input type="checkbox"/> Instituições privadas</p> <p>4 <input type="checkbox"/> Organizações não-governamentais - ONGs</p> <p>5 <input type="checkbox"/> Outras</p> <p>(siga 21)</p>
	<p>21 Este apoio à comercialização teve impacto positivo no desempenho do seu negócio?</p> <p>2 <input type="checkbox"/> Sim, porém pequeno</p> <p>4 <input type="checkbox"/> Sim, expressivo</p> <p>6 <input type="checkbox"/> Não</p> <p>(passe ao 23)</p>

<p>22 Por que não teve apoio à comercialização?</p> <p>1 <input type="checkbox"/> Não achou necessário</p> <p>2 <input type="checkbox"/> O preço cobrado era alto</p> <p>3 <input type="checkbox"/> O local da oferta era longe</p> <p>4 <input type="checkbox"/> Desconhecia a oferta de apoio à comercialização</p> <p>5 <input type="checkbox"/> Os serviços existentes não eram adequados</p> <p>(passe ao 23)</p>	<p>27 Este curso teve impacto positivo no desempenho do seu negócio?</p> <p>2 <input type="checkbox"/> Sim, porém pequeno 6 <input type="checkbox"/> Não</p> <p>4 <input type="checkbox"/> Sim, expressivo</p> <p>(passe ao 29)</p>
<p>Para as pessoas que receberam ou estão recebendo curso de especialização ou formação profissional - Código 2 - (Sim) no Quesito 28 do ECINF 2.02, Parte 4, siga 23. Caso contrário, passe ao 28</p>	
<p>23 Qual foi a duração do último curso de formação profissional voltado para a atividade do negócio que ... frequentou?</p> <p>1 <input type="checkbox"/> Duração do curso voltado para a atividade do negócio</p> <div style="display: flex; justify-content: space-around; align-items: flex-end;"> <div style="text-align: center;"> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> Anos </div> <div style="text-align: center;"> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> Meses </div> <div style="text-align: center;"> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> Dias </div> <div style="text-align: center;"> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> Horas </div> </div> <p>(siga 24)</p> <p>3 <input type="checkbox"/> Não fez curso de formação profissional voltado para a atividade do negócio (passe ao 28)</p>	<p>28 Por que não fez curso de formação profissional voltado para a atividade do negócio ?</p> <p>1 <input type="checkbox"/> Não achou necessário</p> <p>2 <input type="checkbox"/> O preço cobrado pelo serviço era alto</p> <p>3 <input type="checkbox"/> O local da oferta do serviço era longe</p> <p>4 <input type="checkbox"/> Desconhecia a oferta deste tipo de curso</p> <p>5 <input type="checkbox"/> Os cursos existentes não eram adequados</p> <p>6 <input type="checkbox"/> Outros motivos</p> <p>(siga 29)</p>
<p>24 Qual o principal local de realização deste curso de formação profissional?</p> <p>1 <input type="checkbox"/> No local do negócio atual</p> <p>2 <input type="checkbox"/> No local do trabalho anterior</p> <p>3 <input type="checkbox"/> No local de outro trabalho</p> <p>4 <input type="checkbox"/> Em instituições de formação profissional</p> <p>5 <input type="checkbox"/> Outros locais</p> <p>(siga 25)</p>	<p>29 Utilizava serviços de informática para o desenvolvimento do seu negócio até outubro de 2003?</p> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <p>1 <input type="checkbox"/> Sim, no negócio</p> <p>3 <input type="checkbox"/> Sim, em casa</p> <p>5 <input type="checkbox"/> Sim, em outros lugares</p> <p>7 <input type="checkbox"/> Não</p> </div> <div style="font-size: 3em; margin-right: 10px;">}</div> <div> <p>(siga 30)</p> <p>(passe ao 31)</p> </div> </div>
<p>25 Qual a instituição que forneceu este último curso?</p> <p>1 <input type="checkbox"/> SEBRAE</p> <p>2 <input type="checkbox"/> Instituições governamentais</p> <p>3 <input type="checkbox"/> Instituições privadas</p> <p>4 <input type="checkbox"/> Instituições não-governamentais - ONGs</p> <p>5 <input type="checkbox"/> Instituições do Sistema S (com exceção do SEBRAE)</p> <p>6 <input type="checkbox"/> Outra</p> <p>(siga 26)</p>	<p>30 Contratava serviços de informática exclusivamente para o desenvolvimento do seu negócio até outubro de 2003?</p> <p>2 <input type="checkbox"/> Sim</p> <p>4 <input type="checkbox"/> Não</p> <p>(passe ao 32)</p>
<p>26 Qual a principal fonte de financiamento deste último curso?</p> <p>1 <input type="checkbox"/> Recursos próprios</p> <p>3 <input type="checkbox"/> Recursos do empregador anterior</p> <p>5 <input type="checkbox"/> Outros</p> <p>7 <input type="checkbox"/> Não foi financiado porque o curso era gratuito</p> <p>(siga 27)</p>	<p>31 Qual o principal motivo para não utilizar serviços de informática no seu negócio?</p> <p>1 <input type="checkbox"/> Não achava necessário</p> <p>2 <input type="checkbox"/> O custo era alto</p> <p>3 <input type="checkbox"/> O local da oferta era longe</p> <p>4 <input type="checkbox"/> Desconhecia a oferta do serviço</p> <p>5 <input type="checkbox"/> Os serviços existentes não eram adequados</p> <p>6 <input type="checkbox"/> Alto custo dos equipamentos e software</p> <p>7 <input type="checkbox"/> Outros motivos</p> <p>(siga 32)</p> <p>32 Que fator(es) ... considera importante(s) para a condução do seu negócio?</p> <div style="display: flex; justify-content: space-between;"> <div> <p>1 <input type="checkbox"/> Capacitação em gestão</p> <p>2 <input type="checkbox"/> Assistência técnica</p> <p>3 <input type="checkbox"/> Assistência jurídica</p> <p>4 <input type="checkbox"/> Assistência contábil</p> </div> <div> <p>5 <input type="checkbox"/> Apoio à comercialização</p> <p>6 <input type="checkbox"/> Formação profissional</p> <p>7 <input type="checkbox"/> Crédito</p> </div> </div> <p>(siga parte 8)</p>

8	FORMA DE PAGAMENTO DA(S) MATÉRIA(S) - PRIMA(S) OU MERCADORIA(S)	
1	Qual a forma mais freqüente de pagamento da(s) matéria(s)-prima(s) e/ou mercadoria(s) necessária (s) à atividade?	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>1 <input type="checkbox"/> À vista</p> <p>2 <input type="checkbox"/> A prazo, com financiamento de loja/fornecedor</p> </div> <div style="width: 45%;"> <p>3 <input type="checkbox"/> A prazo, com cheque pré-datado</p> <p>4 <input type="checkbox"/> A prazo, com cartão de crédito</p> <p>5 <input type="checkbox"/> Outra forma</p> </div> </div> <p style="text-align: center;">(siga parte 9)</p>		
9	ACESSO A CRÉDITO E INSTRUMENTO(S) FINANCEIRO(S)	
1	Tinha conta corrente em algum banco em outubro de 2003? 1 <input type="checkbox"/> Sim (siga 2) 3 <input type="checkbox"/> Não (passe ao 4)	
2	Tinha cheque especial em alguma conta corrente em outubro de 2003? 2 <input type="checkbox"/> Sim 4 <input type="checkbox"/> Não <p style="text-align: center;">(siga 3)</p>	
3	Tinha direito à talão de cheque em alguma conta corrente em outubro de 2003? 1 <input type="checkbox"/> Sim 3 <input type="checkbox"/> Não <p style="text-align: center;">(siga 4)</p>	
4	Tinha caderneta de poupança em algum banco em outubro de 2003? 2 <input type="checkbox"/> Sim 4 <input type="checkbox"/> Não <p style="text-align: center;">(siga 5)</p>	
5	Tinha algum cartão de crédito em outubro de 2003? 1 <input type="checkbox"/> Sim 3 <input type="checkbox"/> Não <p style="text-align: center;">(siga 6)</p>	
6	... teve dificuldade em ter acesso aos serviços financeiros? 2 <input type="checkbox"/> Sim (siga 7) 4 <input type="checkbox"/> Não (passe ao 8)	
7	Qual foi a principal dificuldade que ... teve para ter acesso aos serviços financeiros? 1 <input type="checkbox"/> Insuficiência de renda 2 <input type="checkbox"/> Não possuía comprovante de renda 3 <input type="checkbox"/> Não possuía comprovante de residência 4 <input type="checkbox"/> Estava em condições de inadimplente (SERASA/SPC, etc) 5 <input type="checkbox"/> Altos custos das tarifas bancárias 6 <input type="checkbox"/> Necessidade de avalista <p style="text-align: center;">(siga 8)</p>	
8	Qual o principal meio que ... utilizava para efetuar pagamentos de todas as suas tarifas, impostos e taxas até outubro de 2003? 1 <input type="checkbox"/> Agência bancária 6 <input type="checkbox"/> Telefone 2 <input type="checkbox"/> Banco postal / Correios 7 <input type="checkbox"/> Internet 3 <input type="checkbox"/> Caixas eletrônicos fora dos bancos 8 <input type="checkbox"/> Outros 4 <input type="checkbox"/> Correspondente bancário 9 <input type="checkbox"/> Não efetua transações financeiras 5 <input type="checkbox"/> Débito em conta <p style="text-align: center;">(siga 9)</p>	
9	Quanto tempo, normalmente, ... levava para se locomover até a agência bancária mais próxima do seu negócio? 1 <input type="checkbox"/> Tempo de locomoção até agência bancária mais próxima <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div> <p>Dias</p> </div> <div style="text-align: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div> <p>Horas</p> </div> <div style="text-align: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div> <p>Minutos</p> </div> </div> 3 <input type="checkbox"/> Não se locomove 5 <input type="checkbox"/> Não sabe <p style="text-align: center;">(siga 10)</p>	
10	... costumava enviar dinheiro para morador(es) que morava(m) em outro município até outubro de 2003? 1 <input type="checkbox"/> Sim (siga 11) 3 <input type="checkbox"/> Não (passe ao 13)	
11	Qual a principal finalidade? 1 <input type="checkbox"/> Ajuda a familiares 4 <input type="checkbox"/> Pagar representantes comerciais 2 <input type="checkbox"/> Efetuar pagamentos de matérias-primas 5 <input type="checkbox"/> Pagamento de dívidas 3 <input type="checkbox"/> Efetuar pagamentos pessoais 6 <input type="checkbox"/> Outra <p style="text-align: center;">(siga 12)</p>	
12	Qual o principal meio que ... utilizava para efetuar essa transação? 1 <input type="checkbox"/> Serviços bancários 3 <input type="checkbox"/> Correios / Banco postal 2 <input type="checkbox"/> Pessoalmente 4 <input type="checkbox"/> Outros <p style="text-align: center;">(siga 13)</p>	
13	Tinha algum tipo de seguro em outubro de 2003? 2 <input type="checkbox"/> Sim (siga 14) 4 <input type="checkbox"/> Não (passe ao 15)	
14	Em outubro de 2003, que tipo(s) de seguro(s) ... tinha? 1 <input type="checkbox"/> Seguro de vida 2 <input type="checkbox"/> Previdência privada 3 <input type="checkbox"/> Imóvel / Instalação do negócio 4 <input type="checkbox"/> Saúde / Dental 5 <input type="checkbox"/> Residência 6 <input type="checkbox"/> Outros <p style="text-align: center;">(encerre a entrevista)</p>	
15	Qual o principal motivo para não ter feito seguro? 1 <input type="checkbox"/> Não achava necessário 4 <input type="checkbox"/> Desconhecia a oferta desses produtos 2 <input type="checkbox"/> Achava caro 5 <input type="checkbox"/> Outros motivos 3 <input type="checkbox"/> Os produtos não eram adequados <p style="text-align: center;">(encerre a entrevista)</p>	

B. Questions on labour force status of household members (SECOND JOB) (Ask only for persons 6 years old and over)

Have you ever worked for any other job than the one you described for the last one year? (For those who have a job more than one, consider only the one for self employed or employer)	What was the main activity of this place (firm, or organization)?	What was your employment status in this place (firm/organization)?	What is the status of this work place (firm/organisation)?	What is the legal status in this work place (firm/organisation)?	What is the location of your work place?	What is the name of the work place?	What is the telephone number?	How many persons were working in this place?	Are you registered with any social security institution due to your job?	Why aren't you working?
16	17	18	19	20	21	21A	21B	22	23	24
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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FORM II. SELF-EMPLOYED OR EMPLOYER QUESTIONNAIRE

A. QUALIFICATION OF OPERATOR

Q1. Name and Surname

Ask questions between 2 and 5 only if sample address is an establishment

Q2. Age completed ?

--	--	--

Q3. Sex?

Male ☐ 1
Female ☐ 2

Q4A. Educational status?

Illeterate	<input type="checkbox"/> 1
Literate but without diploma	<input type="checkbox"/> 2
Primary school (first stage)	<input type="checkbox"/> 3
Primary school (second stage)	<input type="checkbox"/> 4
Secondary school	<input type="checkbox"/> 5
Junior vocational high school	<input type="checkbox"/> 6
High school	<input type="checkbox"/> 7
Vocational high school	<input type="checkbox"/> 8
College (2 years)	<input type="checkbox"/> 9
College (3 years)	<input type="checkbox"/> 10
University	<input type="checkbox"/> 11
Master and post graduate	<input type="checkbox"/> 12

Q4B. Are you a student an educational institution?

Yes

Formal education (full time) ☐ 1
Open education (part time) ☐ 2
No ☐ 3

Q5. Marital status?

Single	<input type="checkbox"/> 1
Married	<input type="checkbox"/> 2
Divorced	<input type="checkbox"/> 3
Widowed	<input type="checkbox"/> 4

B. QUALIFICATION ON BUSINESS

Q6. a) What is the name of the work place you worked?

.....

b) What is the main activity of your work place?

(Example; shoe repairing, dressmaker, knitting, hairdresser, etc.),

--	--	--	--

.....

c) Give one or two examples of the products or services provided by your work place.

.....

Q7. What are your duties at your work place?

a) Give full title of your job

.....

b) Describe your main task and duties

(Example; taxi driver, carpenter, plasterer, shoeblack etc.)

--	--	--	--

.....

Q8. Is there any other activity of this work place?

Yes (specify)

☐ 1

.....

No

☐ 2

Q9. What is the activity status?

Permanent

☐ 1

Seasonal

☐ 2

Irregular

☐ 3

In holiday or special vocations

☐ 4

Q10. What is the legal status of your work place?

Individual ownership

☐ 1 → **Q12**

Ordinary partnership

☐ 2

Private company (Limited liability company,
general partnership, cooperatives etc.)

☐ 3

Q11. Are there any partners who are not members of your household?

Yes ☐ 1



No ☐ 2

--	--

How many

Q12. Who started this activity?

Respondent

☐ 1

Respondent and partners

☐ 2

Partners

☐ 3

Parents

☐ 4

Relatives

☐ 5

Other (specify)

☐ 6

Q13. When did this your activity start?

Month Year

Q14. How did you get the money to start/join the business?

- | | | |
|---|----------------------------|------|
| No money needed | <input type="checkbox"/> 1 | →Q16 |
| Business was inherited | <input type="checkbox"/> 2 | |
| Gift | <input type="checkbox"/> 3 | |
| Own savings (Including retirement bonuses etc.) | <input type="checkbox"/> 4 | |
| Borrowing from relatives or friends | <input type="checkbox"/> 5 | |
| Bank credit | <input type="checkbox"/> 6 | |
| Sale of assets | <input type="checkbox"/> 7 | |
| Other (specify) | <input type="checkbox"/> 8 | |

Q15. How much money did you spend to start or join this activity?

..... TL.
(Write down the value just in the time when activity is started)
(If code 2 in Q12, ask for the total of all partners.)

Q16. Why do you do this kind of business?

(Tick as many as three)

- | | |
|--|-----------------------------|
| Can not find other work | <input type="checkbox"/> 1 |
| Having free time | <input type="checkbox"/> 2 |
| Trained at school or in work place | <input type="checkbox"/> 3 |
| Retired from another job | <input type="checkbox"/> 4 |
| Family needs additional income | <input type="checkbox"/> 5 |
| Business provides good income opportunities | <input type="checkbox"/> 6 |
| Business does not require much capital | <input type="checkbox"/> 7 |
| Wants to be independents or his/her own master | <input type="checkbox"/> 8 |
| Can combine business with household or family responsibilities | <input type="checkbox"/> 9 |
| Traditional line of business of respondent or family | <input type="checkbox"/> 10 |
| Other (specify) | <input type="checkbox"/> 11 |

Q17. What is the location of your work place?

- | | | |
|---|----------------------------|-------|
| Regular establishment (e.g. shop, workshop, office etc.) | <input type="checkbox"/> 1 | → Q19 |
| Own or partner's house | <input type="checkbox"/> 2 | |
| Market place | <input type="checkbox"/> 3 | |
| Mobile (Selling doughnuts, selling meat ball, shoe shining, etc.) | <input type="checkbox"/> 4 | |
| Irregular work place (Construction site, taxi, minibuss, etc.) | <input type="checkbox"/> 5 | |
| Fixed stall –street (Buffet, workbench, etc.) | <input type="checkbox"/> 6 | |
| Consumer's house (White-washer, housepainter, decorator etc.) | <input type="checkbox"/> 7 | |
| Other (specify) | <input type="checkbox"/> 8 | |

Q18. The premises where you conduct your activity are;

- | | |
|-----------------------------------|----------------------------|
| Owned by yourself or your partner | <input type="checkbox"/> 1 |
| Rented | <input type="checkbox"/> 2 |
| Other (specify) | <input type="checkbox"/> 3 |

Q19. Why do you keep continuing your activity in this work place?

(Tick up to two)

- | | |
|---|-----------------------------|
| No other place available | <input type="checkbox"/> 1 |
| Can not afford to rent or buy other business space | <input type="checkbox"/> 2 |
| Can make good sales in this way | <input type="checkbox"/> 3 |
| Work place is close to other similar business | <input type="checkbox"/> 4 |
| Lives close to work place | <input type="checkbox"/> 5 |
| Can manage his job together with family duties | <input type="checkbox"/> 6 |
| Able to carry out the job at home (house painter, baby-sitter etc.) | <input type="checkbox"/> 7 |
| To avoid for legal responsibilities | <input type="checkbox"/> 8 |
| Carries traditional family job | <input type="checkbox"/> 9 |
| Owner this place (Including transportation vehicle etc.) | <input type="checkbox"/> 10 |
| Other (specify) | <input type="checkbox"/> 11 |

Q20. How many months during the last 12 months did this business actually operate?

(If Q20=12 go to Q22)

--	--

Q21. What is the reason for non-activity in your activity during last 12 months?

(Tick the two most importants ones.)

- | | |
|---|----------------------------|
| Business is less than 12 months old | <input type="checkbox"/> 1 |
| Economic reasons | <input type="checkbox"/> 2 |
| Seasonal nature of activity | <input type="checkbox"/> 3 |
| Works when he finds a job | <input type="checkbox"/> 4 |
| Causal activity (example; agriculture) | <input type="checkbox"/> 5 |
| Family or person reasons (example; sickness and vacation) | <input type="checkbox"/> 6 |
| Other (specify) | <input type="checkbox"/> 7 |

Q22. When was your last activity?

--	--

Month

--	--	--	--

Year

Q23. How many days in the latest month did this business actually operate?

--	--

Day

Q24. During the latest month, how many days did you actually work in this business?

--	--

Day

Q25. What is your average working hours per day in your activity?

--	--

Hour

Q26. How much profit did your business make after substructing of business expenses in the latest month that the activity has been achieved?

(Respondent's assessments)

..... TL

Q27A. Good and service purchasements and other payments in the latest month that the activity has been achieved
(PURCHASES)

Purchases and payments	Purchase value for this activity (TL)	Used value for this activity (TL)
Raw materials and materials		
Resale of Purchased Goods		
Fuel (gas, natural gas, fuel-oil etc.)		
Electricity, water, telephone etc.		
Small tools		
Maintenance and other expenses		
Rent (building, machine etc.)		
Compensation of employees		
TOTAL		

Q27B. Sales in the latest month that the activity has been achieved
(SALES)

Sales and income	Sales value (TL)	Value consumed at home (TL)
Manufactured products		
Resale of purchased goods		
Other (income due to service supply)		
TOTAL		

Q28. Purchases for investment within the last 12 months
(Record only investments for business purposes)

Purchases for investment	Purchases value (TL)
Machinery-equipment	
Land and buildings	
Vehicles and transport equipment	
Furniture	
Livestock and trees	
Other	
TOTAL	

C. EMPLOYMENT AND WORKING CONDITIONS

Q29. How many persons are employed in this work place in the latest month that the activity has been realized? (incl. Unpaid family worker and partners)

Person

*(If no person other than yourself works in the business, go to Q31.)
(Finish the questionnaire if the number of workers is more than 10)*

D. BUSINESS LINKAGES

Q31. Who is buying good or services that you produce/sell?
(Tick as much as two.)

- | | |
|--|----------------------------|
| Multinational company or foreign investors | <input type="checkbox"/> 1 |
| Private individuals or households | <input type="checkbox"/> 2 |
| Small business (traders, farmers) | <input type="checkbox"/> 3 |
| Middlemen, agents, contractors | <input type="checkbox"/> 4 |
| Private large enterprises | <input type="checkbox"/> 5 |
| Public enterprises | <input type="checkbox"/> 6 |
| Other (specify) | <input type="checkbox"/> 7 |

Q32. Is there any relationship between your work place and other place
or people who produce at home?

- | | |
|----------------|----------------------------|
| Yes, regularly | <input type="checkbox"/> 1 |
| Yes, sometimes | <input type="checkbox"/> 2 |
| No | <input type="checkbox"/> 3 |

E. TECNOLOGY

Q33. Compare the technological level of your working place with level of
similar working places?

- | | |
|------------------------------|----------------------------|
| Advanced level of technology | <input type="checkbox"/> 1 |
| Modern but not new | <input type="checkbox"/> 2 |
| Old but competitive | <input type="checkbox"/> 3 |
| Very old | <input type="checkbox"/> 4 |
| Other (specify) | <input type="checkbox"/> 5 |
| No needed for technology | <input type="checkbox"/> 6 |

Q34. What is the communication and computer technology that you use?
(Tick more than one)

- | | |
|------------------------|----------------------------|
| Computer | <input type="checkbox"/> 1 |
| Fax, telex, telephone | <input type="checkbox"/> 2 |
| Photocopy machine | <input type="checkbox"/> 3 |
| Other (specify) | <input type="checkbox"/> 4 |
| No need for technology | <input type="checkbox"/> 5 |

F. CREDIT AND LOANS

Q35. During the last 12 months, have you received and loan or obtained any credit
for business purposes from any source?

- | | |
|-----|---------------------------------|
| Yes | <input type="checkbox"/> 1 |
| No | <input type="checkbox"/> 2→Q 39 |

Q36. Who gave you the loan/credit?
(Tick the most suitable one)

- | | |
|---------------------------|----------------------------------|
| Bank | <input type="checkbox"/> 1 →Q 38 |
| Relative or friends | <input type="checkbox"/> 2 |
| Co-operative | <input type="checkbox"/> 3 |
| Business association etc. | <input type="checkbox"/> 4 |
| Other (specify) | <input type="checkbox"/> 5 |

Q37. Why don't you take the credit from a bank?

- | | |
|--|----------------------------|
| Bank wants guarantee | <input type="checkbox"/> 1 |
| Official procedures are intensive | <input type="checkbox"/> 2 |
| Interest rates are too high | <input type="checkbox"/> 3 |
| No knowledge about this kind of credit | <input type="checkbox"/> 4 |

Q38. What was the main use of the loan/credit?
(Tick the most suitable one)

- | | |
|---|----------------------------|
| Purchasing raw materials/supplies | <input type="checkbox"/> 1 |
| Maintaining/purchasing business furnishings | <input type="checkbox"/> 2 |
| Repayment of debts | <input type="checkbox"/> 3 |
| Special needs of respondent or family
(e.g. sickness, accident, funeral, marriage) | <input type="checkbox"/> 4 |
| Other (specify) | <input type="checkbox"/> 5 |

G. PROBLEMS AND PLANS

Q39. Which problems affect the operation of your business?
(Mark 1=Many, 2=Some, 3=No problems for each of following)

- | | |
|--|-----------------------------|
| Lack of capital to buy business premises, machinery, equipment | <input type="checkbox"/> 1 |
| Lack of capital to buy raw materials, supplies, resale goods | <input type="checkbox"/> 2 |
| Lack/high cost of financial services/credit | <input type="checkbox"/> 3 |
| Problems/high cost of findings suitable premises/business location | <input type="checkbox"/> 4 |
| Poor infrastructure and utilities (water, electricity, sewerage
waste disposal, etc.) | <input type="checkbox"/> 5 |
| High cost of purchasing appropriate machinery/equipment/
vehicle/spare parts | <input type="checkbox"/> 6 |
| Lack of customers or orders | <input type="checkbox"/> 7 |
| Customers are bad in paying | <input type="checkbox"/> 8 |
| High competition from others | <input type="checkbox"/> 9 |
| High cost and poor quality of raw materials and supplies | <input type="checkbox"/> 10 |
| High taxes | <input type="checkbox"/> 11 |
| Problems with authorities regarding work place | <input type="checkbox"/> 12 |
| Financial needed of family member | <input type="checkbox"/> 13 |
| Lack of time or mobility due to household/family duties | <input type="checkbox"/> 14 |
| Other (specify) | <input type="checkbox"/> 15 |

Q40. What are your plans for the development of your business in the next 5 years?

- | | | |
|----------------------------------|----------------------------|-------|
| Continue with present business | <input type="checkbox"/> 1 | |
| Switch to other line of business | <input type="checkbox"/> 2 | |
| Stop business | <input type="checkbox"/> 3 | →Q 42 |
| No plans | <input type="checkbox"/> 4 | |
| Other (specify) | <input type="checkbox"/> 5 | |

Q41. How do you plan to continue?

(Tick up to two)

- | | |
|----------------------------|----------------------------|
| Without major changes | <input type="checkbox"/> 1 |
| Make new investment | <input type="checkbox"/> 2 |
| Increase number of workers | <input type="checkbox"/> 3 |
| Enlarge line of products | <input type="checkbox"/> 4 |
| Increase production | <input type="checkbox"/> 5 |
| Reduce production | <input type="checkbox"/> 6 |
| Other (specify) | <input type="checkbox"/> 7 |
| Don't know | <input type="checkbox"/> 8 |

H. PROFESSIONAL TRAINING AND EXPERIENCE ON WORK

Q42. What were you doing before starting this job?

- | | |
|--|----------------------------|
| Being a student | <input type="checkbox"/> 1 |
| Don't work in a job | <input type="checkbox"/> 2 |
| Look for a job | <input type="checkbox"/> 3 |
| Retired | <input type="checkbox"/> 4 |
| Works as employee or apprentice in this establishment | <input type="checkbox"/> 5 |
| Works as employee or apprentice in other establishment | <input type="checkbox"/> 6 |
| Unpaid family worker | <input type="checkbox"/> 7 |
| Partner or owner of another work place (self employed or employer) | <input type="checkbox"/> 8 |

Q43. Have you completed any vocational training?

- | | |
|-----|---------------------------------|
| Yes | <input type="checkbox"/> 1 |
| No | <input type="checkbox"/> 2 →Q45 |

Q44. What was the subject of the most important vocational training?

(e.g. accountancy, mechanical engineering, nursing etc.)

.....

--	--	--

Q45. How did you learn the skills you use in your current business activity (activities)?

(Tick up to two)

- | | |
|-----------------------------------|----------------------------|
| No skills needed | <input type="checkbox"/> 1 |
| Self-taught | <input type="checkbox"/> 2 |
| Traditional apprenticeship | <input type="checkbox"/> 3 |
| Learning from relatives or family | <input type="checkbox"/> 4 |
| Other on-the-job training | <input type="checkbox"/> 5 |
| Training courses/programmes | <input type="checkbox"/> 6 |
| Training reported Q44 | <input type="checkbox"/> 7 |
| Other (specify) | <input type="checkbox"/> 8 |

Q46. In addition to the job that you described, is there any other job that you worked even if it is an hour in order to earn cash or income as paid or unpaid?

- | | |
|---|---|
| Yes, employee/regular employee/casual employee–private sector | <input type="checkbox"/> 1 |
| Yes, employee/regular employee/casual employee–public sector | <input type="checkbox"/> 2 |
| Yes, self employed/employer | <input type="checkbox"/> 3 |
| Yes, unpaid family worker | <input type="checkbox"/> 4 |
| No | <input type="checkbox"/> 5 → Q49 |

Q47. What is the main activity of other work place?

- | | |
|---|-----------------------------|
| Agriculture, hunting and forestry and fishing | <input type="checkbox"/> 1 |
| Mining and quarrying | <input type="checkbox"/> 2 |
| Manufacturing | <input type="checkbox"/> 3 |
| Electricity, gas and water supply | <input type="checkbox"/> 4 |
| Construction | <input type="checkbox"/> 5 |
| Wholesale and retail trade; repair of motor vehicles, motorcycles and personal and household goods | <input type="checkbox"/> 6 |
| Hotels and restaurants | <input type="checkbox"/> 7 |
| Transport, storage and communications | <input type="checkbox"/> 8 |
| Financial intermediation and real estate, renting and business activities | <input type="checkbox"/> 9 |
| Public administration and defence; compulsory social security and extra-territorial organization and bodies | <input type="checkbox"/> 10 |
| Education | <input type="checkbox"/> 11 |
| Health and social work | <input type="checkbox"/> 12 |
| Other community, social and personal service activities and private households with employed persons | <input type="checkbox"/> 13 |

Q48. What was your average monthly net earnings in other work place?
(Excl. Unpaid family worker)

..... TL

I. BUSINESS REGISTRATION

Q49. Is your business/are you member of professional association or official organization from this activity?

- | | |
|-----|--|
| Yes | <input type="checkbox"/> 1 |
| No | <input type="checkbox"/> 2 → Q 51 |

Q50. What are the advantages of being member of Professional Association?
(Tick up to two)

- | | | |
|---|----------------------------|-------|
| Lobbying for professional interest | <input type="checkbox"/> 1 | →Q 52 |
| Legal protection | <input type="checkbox"/> 2 | |
| Security of work place
(no expulsion or closing) | <input type="checkbox"/> 3 | |
| To avoid penalties | <input type="checkbox"/> 4 | |
| To obtain credit or cash | <input type="checkbox"/> 5 | |
| Auxiliary programs and services are provided | <input type="checkbox"/> 6 | |
| No advantage | <input type="checkbox"/> 7 | |
| Other (specify) | <input type="checkbox"/> 8 | |

Q51. Why are you or business not member of Professional Association?

- | | |
|---|----------------------------|
| Respondent does not know any association | <input type="checkbox"/> 1 |
| Conditions of becoming a member are too difficult or too costly | <input type="checkbox"/> 2 |
| Respondent does not see the benefits of being a member | <input type="checkbox"/> 3 |
| Other (specify) | <input type="checkbox"/> 4 |

Q52. Do you pay any tax for this activity?

- | | |
|--|----------------------------|
| Yes, simple taxation/lump-sum taxation | <input type="checkbox"/> 1 |
| Yes, real basis for taxation | <input type="checkbox"/> 2 |
| No | <input type="checkbox"/> 3 |

J. SOCIAL PROTECTIONS

Q53. Are you covered by any social security institution?

- | | | |
|------------------------------|----------------------------|-------|
| Self-Employment Organization | <input type="checkbox"/> 1 | →Q 57 |
| Social Security Institution | <input type="checkbox"/> 2 | |
| Retirement Fund | <input type="checkbox"/> 3 | |
| Not registered | <input type="checkbox"/> 4 | |
| Other (specify) | <input type="checkbox"/> 5 | |

Q54. Have you already made any provisions for your old age?

- | | | |
|-----|----------------------------|-------|
| Yes | <input type="checkbox"/> 1 | →Q 56 |
| No | <input type="checkbox"/> 2 | |

Q55. Which provisions for old age have you made?

- | | |
|-----------------|----------------------------|
| Savings | <input type="checkbox"/> 1 |
| Investment | <input type="checkbox"/> 2 |
| Life insurance | <input type="checkbox"/> 3 |
| Other (specify) | <input type="checkbox"/> 4 |

Q56. What source of income would you have in case of disability or long-term sickness?

- | | |
|--|----------------------------|
| Savings | <input type="checkbox"/> 1 |
| Support from family | <input type="checkbox"/> 2 |
| Sale or renting of property (land, house etc.) | <input type="checkbox"/> 3 |
| Take up another job with lighter work | <input type="checkbox"/> 4 |
| Employ somebody and retire from business | <input type="checkbox"/> 5 |
| No source of income | <input type="checkbox"/> 6 |
| Other (specify) | <input type="checkbox"/> 7 |

K. MIGRATION

Q57. How long have you lived in city?

- | | | |
|------------------|----------------------------|-------|
| Less than 1 year | <input type="checkbox"/> 1 | |
| 1 to 4 years | <input type="checkbox"/> 2 | |
| 5 to 9 years | <input type="checkbox"/> 3 | |
| 10 years or more | <input type="checkbox"/> 4 | |
| Since birth | <input type="checkbox"/> 5 | →Q 60 |

Q58. Where were you living before?

Province :.....	<div style="border: 1px solid black; width: 100px; height: 15px; margin: 0 auto;"></div>
District :.....	<div style="border: 1px solid black; width: 80px; height: 15px; margin: 0 auto;"></div>
Village :.....	<div style="border: 1px solid black; width: 100px; height: 15px; margin: 0 auto;"></div>
Country :.....	

Q59. Why did you come to province?

- | | |
|---|----------------------------|
| Job transfer of respondent or family member | <input type="checkbox"/> 1 |
| Started arranged job | <input type="checkbox"/> 2 |
| Look for wage employment | <input type="checkbox"/> 3 |
| Business opportunities | <input type="checkbox"/> 4 |
| Joint spouse or family | <input type="checkbox"/> 5 |
| Because of education | <input type="checkbox"/> 6 |
| Other (specify) | <input type="checkbox"/> 7 |

L. HOUSEHOLD INCOME

Q60. How important is this income from this activity for household?

- | | |
|----------------|----------------------------|
| Very important | <input type="checkbox"/> 1 |
| Important | <input type="checkbox"/> 2 |
| Unimportant | <input type="checkbox"/> 3 |

Ask the next questions only if sample address is an establishment

Q61. How many people are there in the house except for you?

--	--

(If household size is greater than 1, then ask Question 62. Otherwise end the interview)

Q62. Relationship to the household head?

- | | |
|---------------------|----------------------------|
| Household head | <input type="checkbox"/> 1 |
| Spouse | <input type="checkbox"/> 2 |
| Children | <input type="checkbox"/> 3 |
| Doughter/son in law | <input type="checkbox"/> 4 |
| Grandchildren | <input type="checkbox"/> 5 |
| Parents | <input type="checkbox"/> 6 |
| Other relatives | <input type="checkbox"/> 7 |
| Non relatives | <input type="checkbox"/> 8 |

Move to FORM I. This person will not be questioned in FORM I.
--



Palestinian Central Bureau of Statistics (PCBS)
Informal Sector Survey 2003

Establishment / Small Projects Survey Questionnaire

Quarter: _____

Questionnaire Serial No.

Data provided herein are used only for mere statistical purposes and are considered highly confidential, according to the General Statistics Law of 1994.

1. Establishment number:

Quarter:

1. First

2. Second

3. Third

4. Fourth

☐

Identification:

2. Establishment commercial name: _____

3. Owner or general manager: _____ **Sex:** 1. Male 2. Female

4. Main economic activity (in details): _____

5. Address

Governorate: _____ **Locality:** _____

Street: _____ **Building name/ owner:** _____

P.O. Box: _____ **Tel:** _____ **Fax:** _____

6. Tenure: 1. Private national 2. Private foreign 3. Government corporation 4. Foreign government corp

7. Legal Status: _____

8. Organizational Structure: 1. Sole Proprietorship 2. Main Center With Branches 3. Branch

9. Project Sampling Strata

<p>Remarks for Questionnaire Completion</p> <ul style="list-style-type: none"> • A separate questionnaire is completed for each establishment included in the sample regardless of whether it keeps records or not. • A separate questionnaire is completed for each economic activity within the establishment, provided its inputs, workers, wages, new fixed assets are separable, i.e. constitutes a branch. <p>A single questionnaire is completed for the establishment if the branches keep no records. However, if the branches keep separate records and practice activities similar or different from those practiced in the main center, then its questionnaire undergoes completion in coordination with the main center. The section on payments and transfers is completed in the questionnaire of the main center. Branches questionnaires are annexed to the questionnaire of the main center.</p>	<p>Enterprise (Project): Economic entity capable of possessing assets and liabilities; practicing economic activities and conducting transactions with other parties.</p>
<p>Workers: They are of two categories:</p> <ul style="list-style-type: none"> • Unpaid enterprise owners or family members. • Paid workers whether they are permanent, temporary or working for establishment. <p>Excluded are trainees, those in paid vacations and members of board of directors.</p>	<p>Establishment: An enterprise or a branch producing a single group of goods (with the possibility of having ancillary production activities), provided enough data are available for calculating operation surplus. Dividing the establishment into various establishments aims to creating more homogeneous statistical units from production viewpoint.</p>
<p>Wages and Salaries in Cash: All wages given to employees during the survey month in addition to allowances, rewards, overtime before applying any deductions, e.g. insurance, tax.....,etc.</p>	<p>Ownership: It is determined when the majority of capital (51% and more) is:</p> <ol style="list-style-type: none"> 1. Public sector 2. private sector 3. UNRWA 4. Nonprofit organizations 5. International bodies

Interview result:		Code
Completed		<input type="checkbox"/>
Not completed (specify):	1. Completely closed 2. Completely closed 3. Temporarily closed 4. Did not practice any activity in the reference quarter 5. Refusal 6. Other	

No. 1: General Information	
1. Number of actual work months during the survey quarter: _____	
2. Which is the last working month in the establishment /project: _____ / 2003	
3. Working time in the establishment is: 1. Morning (8: 00 – 16: 00) 2. Night (16: 00 ++) 3. Day & Night	
4. Currency used in questionnaire compilation: 1. Jordanian Dinar (JD) 2. US Dollar (\$) 3. New Israeli Shekel (NIS)	
5. Data Sources: 1. Financial books & records 2. Estimates 3. Both	
6. Does the establishment prepare profit / loses account and general balance sheet? 1. Yes 2. No	

No.2: Employment and Employees Remuneration

Engaged persons' categories		Average number of persons engaged during the reference quarter ❶		Average number of weekly work hours per employee	Salaries and wages in cash during the reference Quarter ❷	
		Male	Female		Male	Female
WR01	WR02	WR03	WR04	WR05	WR06	WR07
Unpaid employees	Proprietors					
	Family members					
Paid employees	Administrators					
	Operatives					
	Other					
Total						
Payments in kind ❸						
Other benefits❹						
Total remuneration						
Home- workers❺						

Notes:

❶ Average number of employees during the reference quarter = $\frac{\text{Total number of employees at the end of each month}}{3}$

❷ Salaries and wages in cash during the reference year include: Basic salary or wage, allowances, premium and overtime

❸ Payments in kind include: food, accommodation, transportation, and recreational and social services provided by the establishment to its employees.

❹ Other payments include: social and health insurance installments and end of service appropriation.

❺ Home workers are part of the aforementioned employees.

No.2 (Cont.): Employees Information

EM 1 Did individuals leave work in the reference quarter? 1. Yes 2. No If No go to EM5	How many did they leave work in the reference quarter?		EM4 Why did they leave work? 1. Yes 2. No	EM5 Did the establishment have new employees in the reference quarter? 1. Yes 2. No If No go to EM16	How many were individuals included in the reference quarter?	
	EM2 Number of male individuals left work	EM3 Number of female individuals left work	1. New Job with Best Salary <input type="checkbox"/> 2. Marriage <input type="checkbox"/> 3. Sickness <input type="checkbox"/> 4. Elderness <input type="checkbox"/> 5. As a request of the Owner <input type="checkbox"/> 6. Decreasing No. of Employees <input type="checkbox"/> 7. Others <input type="checkbox"/>		EM6 New male employees	EM7 New female employees
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No.2(Cont.): Employees Information

Why did the est./ project employ new employees?					Why did they agreed on working in the est./ project?			Questions about the obtained training courses				
1. Yes 2. No					1. Yes 2. No			1. Yes 2. No				
EM8 Instead of whom left work	EM9 Training	EM10 Family member or relative	EM11 Service for a friend	EM12 Establishment expansion	EM13 Best salary better than the previous	EM14 Unemployed persons	EM15 Better sociality	EM16 Administrative Courses	EM17 Finance and accounting courses	EM18 Marketing courses	EM19 Computer courses	EM20 Other courses: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No.3 Operator Information

EQ1 Age by years	EQ2 Sex: 1. Male 2. Female	EQ3 Years of schooling	EQ4 Experience	EQ5 Residency: 1. Resident 2. Returned (with national number) 3. Returned and resident (without national number) 4. Business Investment 5. Visitor	EQ6 Training: Did you get on training courses? 1. Yes 2. No	EQ7 Type of Training: 1. Yes 2. No 1. Administrative 2. Technical 3. Financial 4. Computer 5. Other	EQ8 Is your work in the est./project? 1. Unique Job 2. Main job 3. Second job If "1" go to EQ10	EQ9 In the second job, you are: 1. Public employee 2. Private sector employee 3. Employee in Israel 4. Unpaid family member 5. Other(specify): _____ Go to EQ11	EQ10 Why is it your only project? 1. No other job 2. No job suitable to my qualifications 3. Has enough income by the project 4. It is a desire to have this project 5. Other(specify): _____
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No. 3 (Cont.): Operator Information

EQ11 Is your work in the project in the reference quarter? 1. Full time 2. Full time for part of the period 3. Part time 4. Part time for part of the period 5. Not applicable	EQ12 What was your last work before establishing the est./ project? 1. Governmental employee 2. Private sector employee 3. Own account employee 4. Working outside 5. Unpaid family member 6. Unemployed 7. Student 8. Housekeeper 9. Retirement 10. Prisoner 11. Other (specify): _____	EQ13 Do you employ others? 1. Yes 2. No If No go to EQ15	EQ14 How did you know your employees? 1. Yes 2. No 1. Family member 2. Relative other than family 3. Friend 4. By attending to the project 5. Neighborhood 6. By media 7. Other (specify): _____
<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	

No. 4: Establishment Organization

EQ15 Is your est./project registered? Yes No If No go to EQ17	EQ16 Is your est./project registered at: Yes No 1. Ministry 2. Local council 3. chamber of Commerce 4. industrial unions 5. Other	EQ17 Do you have a license? 1. Yes 2. No	EQ18 Type of ownership: 1. Personal ownership 2. Family ownership 3. Relatives partnership 4. Other partnership 5. Mixed partnership 6. Cooperative 7. Other (specify): _____	EQ19 you keep a set of accounting records: 1. Only income statement 2. Only balance sheet 3. Complete set of accounting records 4. No accounting records at all	EQ20 Do you have a tax file / record in ministry of finance to your est./ project? Yes No If no go to Eo22	EQ21 How taxes are paid? 1. One payment as of personal estimation 2. Different payments as of income levels 3. No payment 4. Other (specify): _____	EQ22 Do you have special accountant / auditor office? 1. Yes 2. No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No. 4 (Cont.): Establishment / project organization

EQ23 Where your est./ project is taking place?		EQ24 Is the est. / project working place: 1.Personal ownership 2.Partnership 3.Est./ project asset 4.Rented 5.Grants 6. Not applicable 7.Other (specify):	EQ25 What is the est. / project area by meter squared?	EQ26 What is your est./project electricity source? 1. Public Network 2. Private Network 3. Not applicable	EQ27 What is your est./project water source? 1. Public Network 2. Private Network 3. Not applicable	EQ28 Is there a telephone line for the est. / project? 1.Yes 2.No	EQ29 How the est. / project get rid of the solid wastes? 1. Special site of the establishments 2. Public sites 3. no wastes 4.Other (specify):
1. At Home (no special space) 2. Special Place inside Home 3. Place attached to the home 4.Independent place 5. Field or land	6. Homes of customers 7. Building Place 8. Market 9. In the Street 10. Not Specified by a place 11.Other (specify): If 1,2,5,6,8,9,10 go to EQ30						
<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No. 5: Information on establishing the est. / project

EQ30 When the est. / project was established? Year	EQ31 Who is the manager? 1.The owner 2.Family member 3.Paid employee 4.Other (specify):	EQ32 Is there partners in the est. / project? Yes No <i>If no go to EQ32</i>	Questions on the type and number of partners				EQ37 How the est. / project was established? 1.I started it alone 2.I started it with other family member 3.I started it with others 4.Bequeathed 5.Purchase it from others 6.Other (specify):
			EQ33 Family members	EQ34 Relatives or friends	EQ35 Others (non family)	EQ36 Others (specify):	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No. 5 (Cont.): Information on establishing the est. / project

EQ38 What are the reasons around establishing the est./project? 1. To have a job 2. To keep on household project 3. To increase income 4. To have a loan 5. To use personal abilities 6. Others (specify):_____	EQ39 When was the est. / project started? Month Year	EQ40 When the new manager starts his job in the est. / project? Month Year	EQ41 Is the est. / project: 1. Permanent (all the year) 2. Seasonal 3. Connected to National feasts 4. By demand	EQ42 What is the secondary economic activity of the est. / project	
				1. Agriculture 2. Fishing 3. Mining 4. Manufacturing 5. Tourism 6. Construction 7. Internal trade 8. Restaurants and hotels	9. Transport, Storage and communication 10. Other services 11. Finance (money exchange) 12. Maintenance 13. Education 14. Insurance 15. Other (specify):_____ 16. No secondary activity
<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

EQ43: Goods Production Inputs

Type of Inputs	Auxiliary code	Value of total purchases during the reference quarter	Value of consumed amount
1	2	3	4
Raw and Primary Materials	10		
Other Inputs	11		
Fuel and oil	12		
Water	13		
Electricity	14		
Total			

EQ44: Other Production Expenditures (Services Offered by Others)

Types of expenditure	Auxiliary code	Expenditure value in the reference quarter
Rent of buildings, machines and equipment	10	
Industrial maintenance	11	
Other non industrial maintenance	12	
Total		

EQ45: Indirect Fees and Taxes	13	
--------------------------------------	----	--

EQ46: Production of Construction	Auxiliary code	Value
carried out projects during survey year as main contractor only	10	
Value of completed projects as sub-contractor (underlet)	11	
Value of completed projects to contractor establishment own account	12	
Total		

EQ47: Commodity Products

Type of Product	Auxiliary code	Sales during the reference quarter	Products produced during the quarter
1	2	3	4
Finished products	10		
Semi finished products	11		
Capital products for the establishments	12		
Wastes (value)	13		
Total			

EQ48: Goods Purchased for Resale (Trade Activity)

Items purchased for sale without manufacturing	Value of stock at the beginning of the quarter (estimated at reference quarter price)	Total value of purchases during the quarter	Lost & damaged	Sales	Value of stock at the end of the quarter	Trade margin
1	2	3	4	5	6	7
Total						

EQ49: What is the average of the trade margin: _____%

EQ50: Revenues of Services Rendered to Others

Type of revenue	Auxiliary code	Revenues Value
1	2	3
Main services revenues	10	
Revenues of transport, supporting and auxiliary transport, and post and telecommunications	11	
Other services provided to others	12	
Total		

No. 13: Fixed Assets

Table 15: Fixed Assets												
Types of fixed assets	Auxiliary code	ISIC code	Book value at the beginning of the quarter	Value of purchased assets during the quarter			Fixed assets produced at the establishment	Capital additions and improvements	Written -off and losses	Assets sold during the quarter	Depreciation during the quarter	Book value at the end of quarter
				Imported	Local							
					New	Second-hand						
AS01	AS02	AS03	AS04	AS05	AS06	AS07	AS08	AS09	AS10	AS11	AS12	AS13
Land	10	1028										
Residential buildings	11	4520										
Non residential buildings	12	4520										
Machines, equipment & devices	13	2925										
Goods vehicles	14	3410										
Passengers vehicles	15	3410										
Furniture and furnishings	16	3610										
Livestock (goats & cows)	17	0121										
Others, specify:												
	21											
Total fixed assets												

No. 14: Inputs, outputs sources and market information

MS01 Where you market your products / services 100%	MS02 What is the target market of the est. / project products or services? 100%	MS03 What is the competitive advantage of the est. / project?	MS04 What is the source of the inputs? 100%	MS05 What is the way of getting the raw materials? 100%
1. In the same locality <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2. In the same governor-ate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3. In West Bank <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4. In Gaza Strip <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5. In Arab regions in Israel <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 6. In Israel <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 7. Export <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 8. Other (specify): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Whole seller <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2. Retailer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3. Final consumer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4. Agent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5. Public place <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 6. Through personal relations <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 7. Subcon-tract <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 8. Other (specify): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Good quality 2. Price 3. Target market 4. Promotion 5. All previous items 6. Other (specify): <input type="checkbox"/>	1. West Bank <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2. Gaza Strip <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3. Israel <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4. Jordan <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5. Egypt <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 6. Not applicable <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 7. Other (specify): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Other producers <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2. Whole-salers <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3. Retailers <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4. Direct import <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5. The customer himself <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 6. Agent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 7. Other (specify): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

No. 14 (Cont.): Inputs, outputs sources and market information

MS06 What are the factors that have negative effects on your est. / project performance											
1. More Important 2. Important 3. Less Important 4. Not Important											
1. High taxes	2. Confusing legislation & rules	3. Complicated procedures	4. Weakness in the owner performance	5. Lack of funding resources	6. Address problems	7. High competition	8. Partners conflicts	9. Fluctuation of demand	10. Weakness of customer purchasing ability	11. Owner lack of experience	12. Other (specify):
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MS07 What are the main problems that affect your est. / project													
1. More Important 2. Important 3. Less Important 4. Not Important													
1. Marketing	2. Getting raw materials	3. Getting sufficient fund	4. Getting new technology	5. Getting technicians	6. Organizing accounting records	7. Increasing tax rate	8. Complicated registration procedures	9. No government subsidies	10. High wages & salaries	11. Foreign competition	12. Local competition	13. Storage problems	14. Other (specify):
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No. 14 (Cont.): Inputs, outputs sources and market information

MS08 Do you face difficulties in getting funds? Yes No <i>If no go to Pc01</i>	MS09 Why you face difficulties in getting funds					
<input type="checkbox"/>	1. Complicated procedures in the banks	2. Complicated procedures in the NGOs	3. No sufficient documents	4. High interest rate	5. Demand fluctuations	6. Other (specify):
<input type="checkbox"/>	<input type="checkbox"/>					

*** Respondent**

Name:	Official Seal
Title:	
Date:	
Signature	

*** For internal use**

Name	Code	Signature	Date
* Interviewer _____	□□□□	: _____	____ / ____ / 200
* Supervisor _____	□□□□	: _____	____ / ____ / 200
* Editor _____	□□□□	: _____	____ / ____ / 200
* Coder _____	□□□□	: _____	____ / ____ / 200
* Data entry operator _____	□□□□	: _____	____ / ____ / 200
* Post data entry editor _____	□□□□	: _____	____ / ____ / 200

**Continuous to Second Part of the Questionnaire (Economics Data for the Persons in the Main Work (First)
For the Persons who Answer the Second Part of the Questionnaire (Main Work (First))**

CUR. Currency used in questionnaire compilation	1. New Israeli Shekel (NIS)	2. Jordanian Dinner (JD)	3. US Dollar (\$) <input type="checkbox"/>

Person No. In the Family Register	P1	P2	P3
	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
EQ16.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EQ17. No. Of Employees

Family members	10	Male	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	20	Female	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Paid employees	30	Male	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	40	Female	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
EQ18. Remuneration	50	Male			
	60	Female			

EQ19. Goods Production Inputs		Value	Value	Value
Raw and Primary Materials	10			
Other Inputs	20			
Fuel and oil	30			
Water	40			
Electricity	50			
Other	60			
Total	100			

EQ20. Other Production Expenditures		Value	Value	Value
Rent of buildings, machines and equipment	10			
Industrial maintenance	20			
Other non industrial maintenance	30			
Other	40			
Total	100			

EQ21. Production of Construction		Value	Value	Value
Carried out projects during this period as main contractor only	10			
Value of completed projects as sub-contractor (underlet)	20			
Value of completed projects to contractor establishment own account	30			
Total	100			

EQ22. Commodity Products during the period				
Finished products	10			
Semi finished products	20			
Total	100			

EQ23. Goods Purchased for Resale (Trade Activity)				
Value of stock at the beginning of the period	10			
Total value of purchases during the period	20			
Lost & damaged	30			
Sales	40			
Value of stock at the end of the period	50			
Trade margin	100			

EQ24. Revenues of Services Rendered to Others				
Main services revenues	10			
Revenues of transport, supporting and auxiliary transport, and post and telecommunications	20			
Maintenance and repairs services	30			
Industrial services on materials from others	40			
Total	100			

For the Persons who Answer the fourth Part of the Questionnaire (Second Job)

CUR. Currency used in questionnaire compilation	1. New Israeli Shekel (NIS)	2. Jordanian Dinner (JD)	3. US Dollar (\$) <input type="checkbox"/>

Person No. In the Family Register	P1	P2	P3
	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
EQ16a.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EQ17a. No. of Employees

Family members	10	Male	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	20	Female	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Paid employees	30	Male	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	40	Female	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
EQ18a. Remuneration	50	Male			
	60	Female			

EQ19a. Goods Production Inputs		Value	Value	Value
Raw and Primary Materials	10			
Other Inputs	20			
Fuel and oil	30			
Water	40			
Electricity	50			
Other	60			
Total	100			

EQ20a. Other Production Expenditures				
Rent of buildings, machines and equipment	10			
Industrial maintenance	20			
Other non industrial maintenance	30			
Other	40			
Total	100			

EQ21a. Production of Construction		Value	Value	Value
Carried out projects during this period as main contractor only	10			
Value of completed projects as sub-contractor (underlet)	20			
Value of completed projects to contractor establishment own account	30			
Total	100			

EQ22a. Commodity Products				
Finished products	10			
Semi finished products	20			
Total	100			

EQ23a. Goods Purchased for Resale (Trade Activity)				
Value of stock at the beginning of the period	10			
Total value of purchases during the period	20			
Lost & damaged	30			
Sales	40			
Value of stock at the end of the period	50			
Trade margin	100			

EQ24a. Revenues of Services Rendered to Others				
Main services revenues	10			
Revenues of transport, supporting and auxiliary transport, and post and telecommunications	20			
Maintenance and repairs services	30			
Industrial services on materials from others	40			
Total	100			

IN01: Currency used: **1.NIS** **2.JD** **3. US \$**

[illegible]