

CONFIDENTIAL

TO BE COMPLETED AND RETURNED TO THE CENTRAL STATISTICAL OFFICE, NATIONAL STATISTICS BUILDING,
80 INDEPENDENCE SQUARE, P.O. BOX 98, PORT OF SPAIN.



Serial No.

Industry No.

**REPUBLIC OF TRINIDAD AND TOBAGO
MINISTRY OF PLANNING, HOUSING & ENVIRONMENT
CENTRAL STATISTICAL OFFICE
BUSINESS SURVEYS SECTION
SURVEY OF ESTABLISHMENTS 200.....
HOTELS AND GUEST HOUSES FORM
Date due for submission to C.S.O.**

This survey is conducted in accordance with the Statistics Act, Chapter 19:02 of the Revised Laws of the Republic Trinidad & Tobago (1981). For enquiries, please Phone 623-4493 exts. 4414-23, Email: annecia.ellies@statistics.gov.tt or Fax 625-3802. Information on this survey and Instructions for the completion of this form can also be accessed from our website: www.cso.gov.tt

SECTION 1 - CHARACTERISTICS OF ESTABLISHMENT				FOR OFFICE USE ONLY	
1.1	Name of Establishment			TTSIC <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 22 - 25	
1.2	Address			EMPLOYMENT YEAR <input type="text"/> <input type="text"/> 26 - 27	
	Phone Number	Fax			EMPLOYMENT FIGURE <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 28 - 31
	Email	Website			
1.3	Activity of Establishment (<i>List in order of importance</i>)			E.D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 32 - 36	
	(1)			YEAR BEGAN OPERATION <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 37 - 40	
	(2)				
	(3)				
1.4	Type of Ownership (<i>Please Tick one</i>)			YEAR OF DATA <input type="text"/> <input type="text"/> 41 - 42	
	<input type="radio"/> Sole Proprietorship	<input type="radio"/> Government			
	<input type="radio"/> Partnership	<input type="radio"/> Co-operative			
	<input type="radio"/> Private Limited Company	<input type="radio"/> Non-Profit Institution			
	<input type="radio"/> Public Limited Company	<input type="radio"/> Other (<i>Specify</i>):			
1.5*	Reference period for data supplied			COUNTY/WARD <input type="text"/> <input type="text"/> 43 - 44	
	(see below)				
1.6	<input type="text"/> Number of rooms	<input type="text"/>	Single Occupancy rate T.T.\$		LEGAL CODE <input type="text"/> 45
		<input type="text"/>	Double Occupancy rate T.T.\$		
1.7	<input type="text"/> Occupancy rate (see instruction 1.7)			OWNERSHIP CODE <input type="text"/> <input type="text"/> <input type="text"/> 	
1.8	Year began operation			COMMUNITY CODE <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 	
1.9	Ownership of Equity	<input type="text"/> % National	<input type="text"/> % Foreign	<input type="text"/>	REGIONAL CORPORATION CODE <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"/>	
SECTION 2 - EMPLOYMENT					
2.1	State number employed at the end of each of the following periods.				
	<input type="text"/> May	<input type="text"/>	November		
*Reference period is normally the firm's financial year. E.g. March 1st 2006 to February 28th 2007					
In order for data submitted to be classified as survey year data, the period to which it pertains should be either of the following:-					
(1) the calendar year under survey e.g. January to December;					
(2) any 12-month period in which at least six (6) of those months fell within the year being surveyed.				<input type="checkbox"/> Type of Form	

Figures should be rounded to the nearest \$TT

SECTION 3 - CURRENT EXPENDITURE			
	For Office Use Only	Total	
		\$T.T.	
3.1 Total labour payments	03001		
3.2 Total cost of supplies purchased	03010		
3.3 Purchase of goods for resale in same condition	03026		
3.4 Cost of fuel	03051		
3.5 Cost of electricity	03053		
3.6 Depreciation	07026		
3.7 All other current expenses	03132		
3.0 TOTAL CURRENT EXPENDITURE	03000		
SECTION 4 - RECEIPTS			
	For Office Use Only	Total	
		\$T.T.	
4.1 Room Revenue	04001		
4.2 Receipts from services provided	04022		
4.3 All other receipts (Please specify)	04024		
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4.0 TOTAL RECEIPTS	04000		
SECTION 5 - STOCKS			
	For Office Use Only	As at the beginning of	As at the end of
		200...	200...
5.0 TOTAL STOCKS	05000		
SECTION 6 - CAPITAL EXPENDITURE			
Amount spent during the reference period, on the following fixed assets:	For Office Use Only	New assets	Alterations, renovations, improvements
6.1 Buildings (New buildings, renovations, extensions)	06002		
6.2 Motor vehicles	06018		
6.3 Plant, machinery and equipment	06017		
6.4 Furniture and office equipment	06020		
6.5 All other capital expenditure	06019		
6.0 TOTAL CAPITAL EXPENDITURE	06000		

Signature of Person completing Form: _____ Position: _____

Name (**Block Letters**): _____ Date Completed: _____

Remarks from FIRM: _____

Signature of CSO Field Officer: _____ CSO Editor: _____

DO NOT WRITE BELOW LINE - FOR CSO OFFICE USE ONLY

Contact Person: _____ Phone No: _____ Date: _____

Query: _____

Response: _____