CONFIDENTIAL

TO BE COMPLETED AND RETURNED TO THE CENTRAL STATISTICAL OFFICE, PLAZA 47 FREDERICK STREET, POS (NEXT TO ROYAL CASTLE)
MAILING ADDRESS: CENTRAL STATISTICAL OFFICE, BUSINESS SURVEY SECTION, PO BAG 98 POS



Serial No.		
Industry No.		

REPUBLIC OF TRINIDAD AND TOBAGO MINISTRY OF PLANNING AND DEVELOPMENT CENTRAL STATISTICAL OFFICE BUSINESS SURVEYS SECTION SURVEY OF ESTABLISHMENTS _____ TRANSPORT 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 of Trinidad and Tobago. For enquiries, please call 627-3183, 623-7044 or 625-3891. Additional information and forms can be accessed from our website at www.cso.gov.tt

1.1						
	Name of Establishment	TTSIC				
1.2	Address	EMPLOYMENT YEAR				
	* * * * * * * * * * * * * * * * * * * *					
	Phone Number					
	Email	EMPLOYMENT FIGURE				
1.3	Activity of Establishment (List in order of importance)					
	(1)	1010 0514 4				
	(2)	ISIC REV.4				
	(3)					
1.4	Type of Ownership (Please Tick one)	YEAR BEGAN OPERATION				
	O Sole Proprietorship O Government	LL				
	O Partnership O Co-operative O Private Limited Company O Non-Profit Institution	YEAR OF DATA				
	O Public Limited Company O Other (Specify):	Ш				
1.5*	Reference period for data supplied	COUNTY/WARD				
1.6	E.g. 1st January - 31st December 2018 / 1st April 2018 - 31st March 2019 (financial year for firm) Number of vehicles in operation					
1.7	Year began operation					
1.8	Ownership of Equity	LEGAL CODE				
	% National % Foreign Country					
		OWNERSHIP CODE				
		COMMUNITY CODE				
_	SECTION 2 - EMPLOYMENT	REGIONAL CORPORATION				
2.1						
	May November					
-	140Verifiber					

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SECTION 3 - CURRENT EXPENDITURE							
		For Office Use Only	Total				
			\$T.	Т.			
3.1	Total labour payments	03001					
3.2	Cost of fuel	03051					
3.3	Cost of electricity	03053					
3.4	Depreciation	07026					
3.5	All other current expenses	03132					
3.0	TOTAL CURRENT EXPENDITURE	03000					
	SECTION 4 -	RECEIPTS					
		For Office Use Only	Total				
			\$T.	Т.			
4.1	Receipts from services provided	04001					
4.2	All other receipts (Please specify)	04024					
4.0	TOTAL RECEIPTS	04000					
	SECTION 5	- STOCKS					
		For Office Use Only	As at the beginning of	As at the end of			
5.0	TOTAL STOCKS.	05000					
	SECTION 6 - CAPIT	AL EXPEND	DITURE				
	unt spent during the reference period, on the following assets:	For Office Use Only	N ew 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						
6.5	All other capital expenditure						
6.0	TOTAL CAPITAL EXPENDITURE	06000		<u> </u>			
Sign	ature of Person completing Form:		Position:				
Nam	e (Block Letters):		Date Completed:				
	arks from FIRM:			_			
Sign	nature of CSO Field Officer:		CSO Editor:				
Oigi	Signature of CSO Field Officer:CSO Editor:						
	DO NOT WRITE BELOW LINE -	FOR CSO	OFFICE USE ONLY				
Con	Contact Person: Phone No: Date:						
Query:							
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Res	ponse:						