



United Republic of Tanzania

National Bureau of Statistics

HOUSEHOLD BUDGET SURVEY: TANZANIA MAINLAND 2011/2012

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FORM III LABOUR STATUS, HOUSEHOLD BUSINESSES AND INDIVIDUAL INCOME

ALL QUESTIONS IN THIS FORM TO THOSE AGED 5 YEARS AND ABOVE ONLY

HID CODE

1. REGION:

| | |
|--|--|
| | |
|--|--|

2. DISTRICT

| |
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|--|

3. WARD

| | | |
|--|--|--|
| | | |
|--|--|--|

4. ENUMERATION AREA

| | | |
|--|--|--|
| | | |
|--|--|--|

5. HOUSEHOLD NUMBER :

| | |
|--|--|
| | |
|--|--|

INTERVIEWER NUMBER

| | | |
|--|--|--|
| | | |
|--|--|--|

INTERVIEWER NAME

SUPERVISOR NUMBER

| | | |
|--|--|--|
| | | |
|--|--|--|

Time third visit began

Hours Minutes

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Date Of Interview

Day Month Year

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

Section 12: Labour Force Status of all household members aged 5 years and above

| | | | | | | |
|---------------|---|---|---|--|--|--|
| INDIVIDUAL ID | 33. In the last one week , did [NAME] do the secondary activity (stated at question 10b)? IF NO SECONDARY ACTIVITY>> SECTION 13 Yes 10b =1,2 or 3..1 > Q35 Yes 10b= 4 or 5....2 > Q38 No, not in last 7 days...3 | 34. If [NAME] did not do their secondary activity in the last one week, will [NAME] continue with his/her secondary activity? Yes 10b =1,2 or 3..1 Yes 10b= 4 or 5....2 > Q38 No3 | 35. How many hours per week does [NAME] usually work in this activity? | 36. How many weeks per month does [NAME] usually work in this activity? | 37. How many months per year does [NAME] usually work this activity? >>Section 13 | 38. Is the employer in [NAME]'s activity National Government.....1 Local government.....2 Parastatal.....3 Private enterprise.....4 NGO.....5 Private household.....6 |
| | | | HOURS | WEEKS | MONTHS | CODE |
| | | | | | | |
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SECTION 13: NON-FARM HOUSEHOLD BUSINESSES

CHECK QUESTION 5 IN SECTION 12. FOR ALL THOSE CODED “YES” THAT THEY RAN A BUSINESS, OF ANY SIZE, FOR THEMSELVES OR ANOTHER HH MEMBER, EVEN IF JUST FOR AN HOUR ENTER THEIR INDIVIDUAL ID AND ASK QUESTIONS 2 TO 25 BELOW ABOUT EACH BUSINESS IF NO GOTO SECTION 14

1. ENTER INDIVIDUAL ID

| | | | | | |
|---|--|----------------------|----------------------|----------------------|----------------------|
| 2. What are the main products and/or services in order of importance: (list up to 2) | | ISIC CODE | | | |
| 1 | | <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"/> |
| 3. In which year and month did the business start operating? 99 IF DK MONTH | | Year | | Month | |
| | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 4. In which type of premises do you conduct your business activity? (TICK ONE ONLY) | | | | | |
| <ul style="list-style-type: none"> - In own or business partners home with special business space <input type="checkbox"/> 1 - In own or business partners home without special business space <input type="checkbox"/> 2 - Permanent building other than home <input type="checkbox"/> 3 - Fixed stall or kiosk at a market <input type="checkbox"/> 4 - Fixed stall or kiosk on the street <input type="checkbox"/> 5 - Vehicle, cart, temp stall on the street <input type="checkbox"/> 6 - No fixed location/mobile..... <input type="checkbox"/> 7 - Other (specify): _____ <input type="checkbox"/> 8 | | | | | |
| 5. What is the ownership type of this business? | | | | | |
| <ul style="list-style-type: none"> - Sole Proprietorship <input type="checkbox"/> 1 - Partnership..... <input type="checkbox"/> 2 - Religious <input type="checkbox"/> 3 - NGO <input type="checkbox"/> 4 - Other (specify): _____ <input type="checkbox"/> 5 | | | | | |
| 6. How many months in the last 12 months has the business been operating? | | | | | <input type="text"/> |
| 7. What was the main source of start-up capital for this business? | | | | | |
| <ul style="list-style-type: none"> - Proceeds from agricultural production..... <input type="checkbox"/> 1 - Proceeds from non-agricultural production <input type="checkbox"/> 2 - Loan from bank..... <input type="checkbox"/> 3 - Loan from SACCOS..... <input type="checkbox"/> 4 - Loan form family/friends..... <input type="checkbox"/> 5 - Gift from family/friends..... <input type="checkbox"/> 6 - From inheritance..... <input type="checkbox"/> 7 - Sale of assets owned..... <input type="checkbox"/> 8 - Own savings <input type="checkbox"/> 9 - Other (specify): _____ <input type="checkbox"/> 10 | | | | | |

8. How much did you spend on these inputs during the last one month? IF NONE ENTER 0

| Item No. | Description of Items | Value of Purchases/Expenses in Tanzania Shillings | | | | | | | |
|----------|---------------------------------------|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 1 | Electricity | <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 | Bank charges (not interest) | <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 | Car running costs | <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. | Tricycle running costs | <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 | Bajaji running costs | <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 | Fuel and Lubricants | <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 | Mobile phone (bills and top up cards) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 8. | Fixed phone bills | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 9 | Postage | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 10 | Rent for land buildings | <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 13: NON-FARM HOUSEHOLD BUSINESSES

| Item No. | Description of Items | Value of Purchases/Expenses in Tanzania Shillings | | | | | | | |
|----------|---|---|--|--|--|--|--|--|--|
| 11 | Rent for equipment hire | | | | | | | | |
| 12 | Travel allowances paid to employee | | | | | | | | |
| 13 | Water charges | | | | | | | | |
| 14 | Sewerage charges | | | | | | | | |
| 15 | Repair & maintenance of equipment (spare parts, etc.) | | | | | | | | |
| 16 | Security | | | | | | | | |
| 17 | Tools and equipment | | | | | | | | |
| 18 | Packaging materials (bags, containers, etc.) | | | | | | | | |
| 19 | Brokerage, commissions | | | | | | | | |
| 20 | Legal expenses | | | | | | | | |
| 21 | Taxes including Trading fees & Licenses, etc. | | | | | | | | |
| 22 | Interest paid on a loan | | | | | | | | |
| 23 | Bad debts, donations, less recoveries | | | | | | | | |
| 24 | Advertising | | | | | | | | |
| 25 | Cost of raw materials | | | | | | | | |
| 26 | Cost of goods bought for resale | | | | | | | | |
| 27 | Others expenses (specify) _____ | | | | | | | | |

8a. Specify the major raw materials purchased corresponding to Item 24 in question 8 above IF NONE LEAVE BLANK

| | a. Major raw materials | b. ISIC Code | c. Tanzania shillings |
|---|------------------------|--------------|-----------------------|
| 1 | | | |
| 2 | | | |

9. What was the total income received by the business during the last one month from the following? IF NONE ENTER "0"

| Item no. | Item | Tanzania shillings | | | | | | | |
|----------|--|--------------------|--|--|--|--|--|--|--|
| 1 | Sale of Products mined/manufactured | | | | | | | | |
| 2 | Sale of goods purchased from others for resale | | | | | | | | |
| 3 | Construction work done | | | | | | | | |
| 4 | Receipts for services rendered | | | | | | | | |
| 5 | Rent from land | | | | | | | | |
| 6 | Rent from buildings | | | | | | | | |
| 7 | Hire out of equipment /tools | | | | | | | | |
| 8 | Interest receivable (e.g. from village circles) | | | | | | | | |
| 9 | Dividends receivable | | | | | | | | |
| 10 | Income received as a gift, donation, gain in the sale of assets, remittances etc | | | | | | | | |
| 11 | Other income (specify) | | | | | | | | |

SECTION 13: NON-FARM HOUSEHOLD BUSINESSES

10. What was the total investment by the business during the last 12 months on the following? IF NONE ENTER "0"

| Item no. | Item | Tanzania shillings |
|----------|--|---|
| 1 | Purchase of premises (shop, office etc) | <input type="text"/> |
| 2 | Expenditure of own construction of business premises | <input type="text"/> |
| 3 | Expenditure on capital repairs | <input type="text"/> |
| 4 | Expenditure on machinery and equipment | <input type="text"/> |
| 5 | Expenditure on transportation equipment | <input type="text"/> |

11. What was the amount spent during the last 12 months for your business on....?

| Item no. | Item | IF NONE ENTER "0" AND DO NOT ASK Q12 AND Q13 Tanzania shillings | 12. Who owns this asset? Myself.....1 Shared.....2 Leased.....3 Rented.....4 Borrowed.....5 Don't know.....8 | 13. How is the asset used? Exclusively for business.....1 By the household and the business.....2 |
|----------|--|---|--|---|
| 1 | Land | <input type="text"/> | | |
| 2 | Buildings | <input type="text"/> | | |
| 3 | Other structures (kiosks etc) | <input type="text"/> | | |
| 4 | Other machinery, equipment and small tools | <input type="text"/> | | |
| 5 | Expenditure on transportation equipment | <input type="text"/> | | |

14. Is your business registered with BRELA (the business registrations and licensing agency)?

- Yes 1
- No..... 2

15. Do you pay any taxes? (tick all that apply)

- VAT 1
- Pay as you earn 2
- Income tax..... 3
- Other (specify) 4
- None..... 5

16. Do you keep records of business transactions?

- Yes 1
- No..... 2

| Item no. | Item | 17. Which <u>members of the household</u> had the following roles in the household business in the last month? ENTER THE INDIVIDUAL ID(S). IF NONE LEAVE BLANK | 18. How many of the following <u>non-household member employees</u> did you have in the last month? IF NONE LEAVE BLANK |
|----------|-----------------------------|---|---|
| | | Individual IDs | Number |
| 1 | Working proprietor | <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| 2 | Paid casual | <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| 3 | Paid regular | <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| 4 | Unpaid helper/family worker | <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |

SECTION 13: NON-FARM HOUSEHOLD BUSINESSES

NOW SOME QUESTIONS ABOUT NON HOUSEHOLD MEMBER EMPLOYEES (NUMBERED IN QUESTION 18) WORKING IN THE BUSINESS - IF MORE THAN 12 NON-HOUSEHOLD MEMBER EMPLOYEES ASK THE RESPONDENT TO SELECT THE 12 HIGHEST PAID.

| Employee number | 19. What is their sex? | | 20. Which age bracket are they in? | | 21. What is their status within the business? | | | | Tanzania Shillings | | 24. FOR AMOUNT MENTIONED IN Q22 OR Q23 – What period of time does that payment refer to? | | | | 25. How many days did the employee work in the last month? | |
|-----------------|------------------------|------------|------------------------------------|-----------------|---|-------------------------------|----------------------------|-------------------------------------|--|--|--|--------------|---------------|-------------------------|--|--|
| | Male..... 1 | Female.. 2 | Adult (18+).. 1 | Child (<18).. 2 | Working Proprietor 1 | Paid regular employee 2 | Paid Casual worker 3 | Unpaid helpers/Family Workers ... 4 | 22. How much do they receive for wages & salaries? | 23. How much do they receive for payments in kind? | Day 1 | Week 2 | Month 3 | Other (specify) 4 | | |
| 1 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 2 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 3 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 4 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 5 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 6 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 7 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 8 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 9 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 10 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 11 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |
| 12 | 1 | 2 | 1 | 2 | 1 | 2 | 3 | 4 | | | 1 | 2 | 3 | 4 | | |

SECTION 14: INDIVIDUAL NON-WAGE INCOME

For each household member aged 5 and above record whether individually they have received have received any of the following during the last 12 months?

| No. | Individual ID <input type="text"/> <input type="text"/> | 1. Did you receive any of the following? Yes 1 No..... 2 Don't know 8 2 or 8 goto next item | 2. What was the net amount of the last monthly payment you received? (T.sh) <i>If the income was in kind estimate the value of the in kind payment</i> | 3. What is the number of payments you have received over the last 12 months? |
|-----|---|--|---|--|
| | Source of income | Code | Amount in TSH | Number |
| A1 | Earnings or food from a cash for work or food work program | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A2 | Income from the rent of residential premises abroad | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A3 | Income from the rent of residential premises in Tanzania | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A4 | Income from the rent of non agricultural business premises, garages, etc abroad .. | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A5 | Income from the rent of non agricultural business premises, garages, etc in Tanzania | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A6 | Money from other households or persons in Tanzania | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A7 | Money from other households or persons abroad (remittances) | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A8 | Food assistance | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A9 | Assistance with school uniform or shoes... | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A10 | Assistance with teaching aids, books etc... | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A11 | Assistance with bed nets..... | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A12 | A loan..... | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A13 | Exemption or waiver for school fees | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A14 | Exemption or waiver for health expenses .. | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A15 | Cash transfer program (Govt or NGO)..... | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |
| A16 | Anything else? WRITE IN _____ | <input type="text"/> | <input type="text"/> | <input type="text"/> <input type="text"/> |

Time third visit ended

Hours Minutes