

THE WORLD BANK WATER SURVEY*Vietnam (2017)***FIELDWORK SUPERVISORS AND MANAGEMENT ARE RESPONSIBLE FOR THIS SECTION.****INFORMATION ACQUIRED PRIOR TO SCREENING:**

Sampling Information [CODES FROM WBG PROGRESS REPORT]	
Sampling sector	a4a
Sampling size	a6a
Sampling location	a2
Panel	panel

INFORMATION COMPLETED BY FIELD MANAGEMENT AFTER INTERVIEW**A.5** Sector match between screener information (a4b) and sample frame (a4a)**a5**

Yes, screener and sample frame info match	1
No, screener and sample frame do not match but establishment still conducts activities that match sample frame	2
No, does not match	3

INFORMATION BASED ON LOCATION OF INTERVIEW (a3x). ENSURE A3X IS THE NAME OF AN OFFICIAL LOCALITY AND NOT A NEIGHBORHOOD

Is this city the official capital city?	a3b	Is this city the main business city?	a3c	Size of locality	a3
Yes	1	Yes	1	City with population over 1 million	2
No	2	No	2	Over 250.000 to 1 million	3
				50.000 to 250.000	4
				Less than 50.000	5

PLEASE ENSURE ALL VALUES ARE VERIFIED BY SUPERVISOR AND MANAGEMENT. REVIEW SALES AND ACCOUNTING FIGURES AND DESCRIPTIONS FOR ACCURACY.**A.13** Supervisor code**a13**

A. CONTROL INFORMATION [TO BE COMPLETED FROM SCREENER BEFORE INTERVIEW]

A.4 Industry		Screener sector a4b	Questionnaire a0 FROM A4B
Manufacturing	Food	15	1 - manufacturing
	Tobacco	16	
	Textiles	17	
	Garments	18	
	Leather	19	
	Wood	20	
	Paper	21	
	Publishing, printing, and Recorded media	22	
	Refined petroleum product	23	
	Chemicals	24	
	Plastics & rubber	25	
	Non metallic mineral products	26	
	Basic metals	27	
	Fabricated metal products	28	
	Machinery and equipment (29-30)	29	
	Electronics (31-32)	31	
	Precision instruments	33	
	Transport machines (34-35)	34	
	Furniture	36	
	Recycling	37	
Retail	Retail	52	2 - retail
Other Services	Wholesale	51	3 - other services
	IT	72	
	Hotel and restaurants: section H	55	
	Services of motor vehicles	50	
	Construction Section F:	45	
	Transport: land transport; transport via pipelines	60	
	Transport: water transport	61	
	Transport: air transport	62	
	Transport: supporting and auxiliary transport activities; activities of travel agencies	63	
	Transport : Post and telecommunications	64	

A.3a	Screener Region a3a	A.6	Screener Size a6b
Region A	1	Small <20	1
Region B	2	Medium >=20 and <=99	2
Region C	3	Large >=100	3
Region D	4		
Region E	5		

A. CONTROL INFORMATION [TO BE COMPLETED AT THE TIME OF THE INTERVIEW]**INFORMATION AUTOMATICALLY GENERATED**

GPS COORDINATES	Degrees North (Latitude)	lat
	Degrees East (Longitude)	lon

A.14 Time face-to-face interview begins:

Day (dd)	Month (mm)	Year (yyyy)	Hour (00 to 23)	Minutes (00 to 59)
a14d	a14m	a14y	a14h	a14min

A.12 Interviewer code **a12** A.1A Language **a1a**

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A.3x Name of City/town/village

INTERVIEWR

a3x

UPDATE IF INCORRECT**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING.**

The goal of this survey is to gather information and opinions about the business environment in [insert country name]. The information gathered here will help to develop new policies and programs that enhance employment and economic growth.

The information obtained here will be held in the strictest confidentiality. Neither your name nor the name of your business will be used in any document based on this survey.

A. CONTROL INFORMATION

A.7	Is this establishment part of a larger firm? (larger firms include several distinct locations or establishments, including branch offices or production, distribution, or sales sites)
-----	--

Yes	1	SKIP TO B.1
No	2	
		a7

A.7a	How many establishments are part of the firm?
------	---

Number of establishments	a7a
DON'T KNOW (SPONTANEOUS)	-9

A.7b	Is this establishment the headquarters location?
------	--

Yes	1	SKIP TO A9
No	2	
		a7b

A.7c	Does this headquarters location engage in production or sales at this location?
------	---

Yes	1
No	2

TERMINATE**a7c**

A.11	Are the financial statements of the headquarters location separate from the rest of the other establishments?
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Yes	1
No	2

SKIP TO B.1**SKIP TO B.1****a11**

A.9	Are this establishment's financial statements prepared separately from headquarters' statements?
-----	--

Yes	1
No	2

TERMINATE**a9**

B. GENERAL INFORMATION**READ OUT THE FOLLOWING INTRODUCTORY SENTENCE ONLY IF A7 = 1 (yes):****The first few questions apply to the firm which your establishment is part of.****B.1** What is this firm's current legal status? **SHOW CARD 3**

Shareholding company with shares trade in the stock market	1
Shareholding company with non-traded shares or shares traded privately	2
Sole proprietorship	3
Partnership	4
Limited partnership	5
OTHER (SPONTANEOUS-SPECIFY) ___ b1x ___	6
DON'T KNOW (SPONTANEOUS)	-9

SKIP TO B.2**b1****INTERVIEWER: PLEASE NOTE WHEN b1 IS 3 (SOLE PROPRIETORSHIP), WRITE 100% FOR QUESTION b3.****B.3** What percentage of this firm does the largest owner or owners own?

	Percent
Percentage held by largest owner or owners	b3 %
DON'T KNOW (SPONTANEOUS)	-9

B.2 What percentage of this firm is owned by each of the following: **SHOW CARD 4**

	Percent	DON'T KNOW (SPONTANEOUS)
Private domestic individuals, companies or organizations	b2a %	-9
Private foreign individuals, companies or organizations	b2b %	-9
Government or State	b2c %	-9
Other	b2d %	-9
	100%	

IF 100% END INTERVIEW**INTERVIEWER: CHECK THAT TOTAL SUMS TO 100% (UNLESS RESPONDENT DOES NOT KNOW)****READ ONLY IF A7=1 (yes)****I want to proceed by asking you about this establishment only.**

B.5 In what year did this establishment begin operations?

	Year
Year establishment began operations	b5
DON'T KNOW (SPONTANEOUS)	-9

INTERVIEWER: PROVIDE FOUR DIGITS FOR YEAR

B.6 How many full-time employees did this establishment employ when it started operations? Please include all employees and managers (**INTERVIEWER: INCLUDE RESPONDENT WHEN APPLICABLE**)

	Number
Full-time employees at start-up	b6
DON'T KNOW (SPONTANEOUS)	-9

B.6a Was this establishment formally registered when it began operations?

Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9

b6a

B.6b In what year was this establishment formally registered?

	Year
Year establishment formally registered	b6b
DON'T KNOW (SPONTANEOUS)	-9
NEVER REGISTERED (SPONTANEOUS)	-7

INTERVIEWER: PROVIDE FOUR DIGITS FOR YEAR.

B.7 How many years of experience working in this sector does the Top Manager have?

	Years
Manager's experience in sector	b7
LESS THAN ONE YEAR	1
DON'T KNOW (SPONTANEOUS)	-9

B.7a Is the Top Manager female?

Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9

b7a

B.8	Does this establishment have an internationally-recognized quality certification? (INTERVIEWER: SOME EXAMPLES ARE ISO 9000 or 14000, or HACCP)
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Yes	1
No	2
STILL IN PROCESS	-6
DON'T KNOW (SPONTANEOUS)	-9

b8

C. INFRASTRUCTURE AND SERVICES

READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING.

Now, we turn to the establishment's operations

W.1	In fiscal year [insert last complete fiscal year], what percentage of this establishment's water supply was from the following? SHOW CARD 5
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	Percent
Water from public utility system	w1a %
Self-supplied groundwater or shared groundwater (well)	w1b %
Self-supplied surface water system (lake, river)	w1c %
Rainwater harvesting (tank)	w1d %
Purchased from private vendors (excluding bottled water)	w1e %
OTHER (SPONTANEOUS-SPECIFY) ___w1fx___	w1f %
	100 %

**INTERVIEWER: CHECK THAT TOTAL SUMS TO 100%
(UNLESS RESPONDENT DOES NOT KNOW)**

W.2	Over fiscal year [insert last complete fiscal year], did this establishment experience insufficient water supply?
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Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9

GO TO QUESTION W.5

GO TO QUESTION W.5

w2

W.4	In fiscal year [insert last complete fiscal year] how many days did you experience a water shortage?
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	Days
Number of days with water shortage	w4
LESS THAN ONE DAY	1
DON'T KNOW (SPONTANEOUS)	-9

W.4a	How long did these water shortages last on average?
-------------	---

	Hours	Minutes
Average duration of water outages	w4a	w4b
LESS THAN ONE MINUTE		1
DON'T KNOW (SPONTANEOUS)	-9	-9

W.4c	In fiscal year [insert last complete fiscal year] how many days did the business shut down due to a water shortage, flood, or drought?
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	Water Shortage	Flood	Drought
Number of days shut down	w4c	w4d	w4e
None	0	0	0
LESS THAN ONE DAY	1	1	1
DON'T KNOW (SPONTANEOUS)	-9	-9	-9

W.4f	Please estimate the losses that resulted from water shortages either as a percentage of total annual sales or as total annual losses.
-------------	---

	Percent
Loss as percentage of total annual sales due to water shortages	w4f%
NONE	0
DON'T KNOW (SPONTANEOUS)	-9

PROVIDE EITHER ONE OR THE OTHER, NOT BOTH

	LCUs
Annual losses due to water shortages	w4g
NONE	0
DON'T KNOW (SPONTANEOUS)	-9

W.4h	Have any of these shortages been caused by floods and/or droughts, and if so, how many?
-------------	---

	Floods	Droughts
Number of shortages caused by floods/droughts	w4h	w4i
None	0	0

GO TO QUESTION W.5

DON'T KNOW (SPONTANEOUS)	-9	-9	GO TO QUESTION W.5
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W.4j	Please estimate the losses that resulted from water shortages caused by droughts or floods , either as a percentage of total annual sales or as total annual losses. NOTE THAT THE SUM OF W4J + W4K SHOULD BE LESS THAN OR EQUAL TO W4F. IF LOSSES ARE REPORTED IN LCU's, THE SUM OF W4L + W4M SHOULD BE LESS THAN OR EQUAL TO W4G.
-------------	--

	Floods	Droughts
Loss as percentage of total annual sales due to water shortages caused by floods/droughts	w4j%	w4k%
NONE	0	0
DON'T KNOW (SPONTANEOUS)	-9	-9

PROVIDE EITHER ONE OR THE OTHER, NOT BOTH

	Floods	Droughts
Annual losses due to water shortages caused by floods/droughts	w4l	w4m
NONE	0	0
DON'T KNOW (SPONTANEOUS)	-9	-9

W.5	In fiscal year [insert last complete fiscal year], what percentage of this establishment's water supply was from the following in the case of a water service interruption? SHOW CARD 6
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	Percent	DON'T KNOW (SPONTANEOUS)	NOT APPLICABLE
Self-supplied groundwater or shared groundwater (well)	w5a %	-9	-9
Self-supplied surface water system (lake, river)	w5b %	-9	-9
Rainwater harvesting (tank)	w5c %	-9	-9
Purchased from private vendors (excluding bottled water)	w5d %	-9	-9
OTHER (SPONTANEOUS-SPECIFY) w5ex	w5e %	-9	-9
	100 %		

W.6a	Over the last five fiscal years [fiscal year xxx to xxx], did this establishment purchase any water equipment such as tanks or pumps?
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Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9

GO TO QUESTION W.7 or W.8

GO TO QUESTION W.7 or W.8

w6a

W.6b Over the last five fiscal years [fiscal year xxx to xxx] how much was spent on purchasing the following: **SHOW CARD 7**
INTERVIEWER: READ OUT

	LCUs	DON'T KNOW (SPONTANEOUS)
Tank	w6b1	-9
Pump for well	w6b2	-9
Pump for surface water	w6b3	-9
Other SPECIFY ___ w6b4x ___	w6b4	-9

INTERVIEWER: PLEASE ASK THE QUESTION W.7 BELOW FOR HOTELS AND RESTAURANTS (a4b=55).

W.7 Please indicate what percentage of water was used for the purposes indicated below for fiscal year [fiscal year xxx] **SHOW CARD 8**

	Percent	DON'T KNOW (SPONTANEOUS)
Sanitation	w7a %	-9
Food preparation	w7b %	-9
Recreation (eg. Swimming pool)	w7c %	-9
Gardening/ landscaping	w7d %	-9
OTHER (SPONTANEOUS-SPECIFY) ___ w7ex ___	w7e %	-9
	100 %	

INTERVIEWER: PLEASE ASK THE QUESTION W.8 BELOW FOR MANUFACTURING FIRMS (a4b ranges from 15 to 37)

W.8 Please indicate what percentage of water was used for the purposes indicated below for fiscal year [fiscal year xxx] **SHOW CARD 9**

	Percent	DON'T KNOW (SPONTANEOUS)
Sanitation	w8a%	-9
Production	w8b%	-9
OTHER (SPONTANEOUS-SPECIFY) ___ w8cx ___	w8c%	-9
	100 %	

W.9 Was water accessibility a major factor in the decision of where the establishment is currently located?

Yes	1
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No	2
DON'T KNOW (SPONTANEOUS)	-9
w9	

W.10 Over the last two years, did this establishment submit an application to obtain a water connection?

Yes	1	GO TO QUESTION W.12 GO TO QUESTION W.12
No	2	
DON'T KNOW (SPONTANEOUS)	-9	
w10		

W.11 In reference to that application for a water connection, approximately how many days did it take to obtain it from the day of the application to the day the service was received?

	Days
Wait for water connection (no. of days)	w11
LESS THAN ONE DAY	1
STILL IN PROCESS	-6
APPLICATION DENIED	-5
DON'T KNOW (SPONTANEOUS)	-9

W.12 Is this establishment connected to a water sewage system?

Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9
w12	

W.13 Over the last fiscal year **[fiscal year xxx]** how much was spent on water sewage:

	LCUs	DON'T KNOW (SPONTANEOUS)
Water sewage	w13	-9

W.14 Please indicate the point of discharge for fiscal year **[fiscal year xxx]** **SHOW CARD 10**

Point of discharge	Yes	No	DON'T KNOW (SPONTANEOUS)
Public utility w14a	1	2	-9
Septic tank w14b	1	2	-9
Ocean w14c	1	2	-9
Land or water body (apart from Oceans) w14d	1	2	-9

Other SPECIFY	___ w14ex ___	w14e	1	2	-9
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W.15a	Over the last fiscal year [fiscal year xxx] how much was spent on water from the following sources:
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	LCUs	DON'T KNOW (SPONTANEOUS)
Water Utility (includes sewage)	w15a	-9
Private Vendor	w15b	-9
Other SPECIFY w15cx	w15c	-9

W.15d	Over the last fiscal year [fiscal year xxx] how much water was purchased from the following sources:
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	m ³	DON'T KNOW (SPONTANEOUS)
Water utility	w15d	-9
Private Vendor	w15e	-9
Other SPECIFY w15fx	w15f	-9

W.16	With regards to applications for water connections, are informal gifts or payments expected?
------	--

Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9
REFUSAL (SPONTANENOUS)	-8

w16

W.17	It is said that establishments sometimes have informal water connections. Do establishments in this town (area) have any informal water connections?
------	--

Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9
REFUSAL (SPONTANENOUS)	-8

w17

W.30Using the response options on the card; To what degree are the following an obstacle to the current operations of this establishment? **SHOW CARD 11**

	No obstacle	Minor obstacle	Moderate obstacle	Major obstacle	Very Severe Obstacle	(SPONTANEOUS) DON'T KNOW	DOES NOT APPLY
Getting a connection to the public water utility system w30a	0	1	2	3	4	-9	-7
Interruptions to water supply w30b	0	1	2	3	4	-9	-7
Poor water quality w30c	0	1	2	3	4	-9	-7
Removal of waste water w30d	0	1	2	3	4	-9	-7

C.6 Over fiscal year **[insert last complete fiscal year]**, did this establishment experience power outages?

Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9

GO TO QUESTION C.12**GO TO QUESTION C.12****c6**

C.7 In a typical month, over fiscal year **[insert last complete fiscal year]**, how many power outages did this establishment experience?

	Number
Number of power outages in a typical month	c7
DON'T KNOW (SPONTANEOUS)	-9

IF 0, GO TO QUESTION C.9**GO TO QUESTION C.9**

C.8 How long did these power outages last on average?

	Hours	Minutes
Average duration of power outages	c8a	c8b
LESS THAN ONE MINUTE		1
DON'T KNOW (SPONTANEOUS)	-9	-9

C.9 Please estimate the losses that resulted from power outages either as a percentage of total annual sales or as total annual losses.

	Percent
Loss as percentage of total annual sales due to power outages	c9a%
NONE	0
DON'T KNOW (SPONTANEOUS)	-9

PROVIDE EITHER ONE OR THE OTHER, NOT BOTH

	LCUs
Annual losses due to power outages	c9b
NONE	0
DON'T KNOW (SPONTANEOUS)	-9

C.10	In fiscal year [insert last complete fiscal year] how many days did the business shut down due to a power outage?
-------------	--

	Days
Number of days shut down due to a power outage	c11a
None	0
LESS THAN ONE DAY	1
DON'T KNOW (SPONTANEOUS)	-9

4j

C.11	Have any of these power outages been caused by floods and/or droughts, and if so, how many?
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	Floods	Droughts
Number of power outages caused by floods/droughts	c10a	c10b
None	0	0
DON'T KNOW (SPONTANEOUS)	-9	-9

GO TO QUESTION C.13
GO TO QUESTION C.13

C.12	Please estimate the losses that resulted from power outages caused by droughts or floods , either as a percentage of total annual sales or as total annual losses. NOTE THAT THE SUM OF C12A + C12B SHOULD BE LESS THAN OR EQUAL TO C9A. IF LOSSES ARE REPORTED IN LCUs, THE SUM OF C12D + C12E SHOULD BE LESS THAN OR EQUAL TO C9B.
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	Floods	Droughts
Loss as percentage of total annual sales due to power outages caused by floods/droughts	c12a%	c12b%
NONE	0	0
DON'T KNOW (SPONTANEOUS)	-9	-9

PROVIDE EITHER ONE OR THE OTHER, NOT BOTH

	Floods	Droughts
Annual losses due to power outages caused by floods/droughts	c12d	c12e
NONE	0	0
DON'T KNOW (SPONTANEOUS)	-9	-9

C.13	Over the course of fiscal year [insert last complete fiscal year] , did this establishment own or share a generator?
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Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9

GO TO NEXT SECTION

GO TO NEXT SECTION

c13

C.14	In fiscal year [insert last complete fiscal year] , what percentage of this establishment's electricity came from a generator or generators that the establishment owned or shared?
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	Percent
Percentage electricity from generators	c14 %
DON'T KNOW (SPONTANEOUS)	-9

D. SALES AND SUPPLIES**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:****The next topic to be covered is how and where this establishment makes its sales.**

D.1a1	In fiscal year [insert last complete fiscal year] , what was this establishment's main activity and product, that is, the activity and product that represented the largest proportion of annual sales? ENUMERATOR: PLEASE SPECIFY THE ACTIVITY AND PRODUCT IN DETAIL, FOR EX., "LEATHER SHOE MANUFACTURING" NOT JUST SHOES' MANUFACTURING
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	d1a1a	DETAILED DESCRIPTION OF MAIN ACTIVITY AND PRODUCT
Manufacturing of	1	d1a1x
Retail trade of	2	
Wholesale trade of	3	
Construction of	4	
Hotel or restaurant	5	
Provide services of	6	

INTERVIEWER: THE FOLLOWING QUESTION IS NOT PART OF THE INTERVIEW. IT WILL BE FILLED OUT IN THE OFFICE

D.1a2	PLEASE CHOOSE THE 4-DIGIT ISIC REV. 3.1 CODE THAT BEST APPLIES TO THE ESTABLISHMENT'S MAIN ACTIVITY AND PRODUCT.
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	Code
CODE OF THE MAIN PRODUCT AND ACTIVITY	d1a2

D.1a3	What percentage of total sales does the main activity or product represent?
--------------	---

Percent

Percentage of sales represented by main product or activity	d1a3
DON'T KNOW (SPONTANEOUS)	-9

INTERVIEWER: PLEASE NOTE THAT THE NEXT QUESTION REFERS TO THE TOTAL SALES OF ALL PRODUCTS AND SERVICES

D.2	In fiscal year [insert last complete fiscal year], what were this establishment's total annual sales for ALL products and services?
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	LCUs
Last complete fiscal year's total sales	d2
DON'T KNOW (SPONTANEOUS)	-9
PLEASE ALSO WRITE OUT THE NUMBER (i.e. 50,000 as Fifty Thousand)	
	d2x

N.3	Looking back at the end of fiscal year [insert last complete fiscal year minus one], what were total annual sales for this establishment?
------------	---

	LCUs
Total annual sales two years ago	n3
IF ESTABLISHMENT WAS NOT IN BUSINESS THREE YEARS AGO	-7
DON'T KNOW (SPONTANEOUS)	-9

WD.14	Do you agree or disagree with the following statements: SHOW CARD 26 SHOW CARD 17
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	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	(SPONTANEOUS) DON'T KNOW	DOES NOT APPLY
Poor water quality and/or reliability has impacted sales of your establishment wd14a	1	2	3	4	5	-9	-7
Poor water quality and/or reliability increased the costs of operating your establishment wd14b	1	2	3	4	5	-9	-7
Water quality and/or reliability has improved over the past 5	1	2	3	4	5	-9	-7

years wd14c							
Obtaining a water/sewerage connection is costly and burdensome wd14d	1	2	3	4	5	-9	-7
Poor electricity reliability has impacted sales of your establishment wd14e	1	2	3	4	5	-9	-7
Poor electricity reliability increased the costs of operating your establishment wd14f	1	2	3	4	5	-9	-7
Electricity reliability has improved over the past 5 years wd14g	1	2	3	4	5	-9	-7
Obtaining an electricity connection is costly and burdensome wd14h	1	2	3	4	5	-9	-7

WD.15	Using the response options on the card; To what degree is/are [INSERT OPTION] an obstacle to the current operations of this establishment? SHOW CARD 18
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ROTATE OPTIONS						(SPONTANEOUS)		
						No obstacle	Minor obstacle	Moderate obstacle
Water infrastructure	wd15a	0	1	2	3	4	-9	-7
Sewerage system	wd15b	0	1	2	3	4	-9	-7
Electricity	wd15c	0	1	2	3	4	-9	-7
Telecommunciations (cellular, internet, and landline	wd15d	0	1	2	3	4	-9	-7
Transport	wd15e	0	1	2	3	4	-9	-7

K. FINANCE**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:****I would like to ask you a few questions about how you finance the operations of this establishment.**

K.4 In fiscal year **[insert last complete fiscal year]**, did this establishment purchase any new or used fixed assets, such as furniture, machinery, vehicles, equipment, land or buildings?

Yes	1
No	2
DON'T KNOW (SPONTANEOUS)	-9

GO TO QUESTION L.1**GO TO QUESTION L.1****k4**

N.5 In fiscal year **[insert last complete fiscal year]**, how much did this establishment spend on purchases of: **SHOW CARD 19**

INTERVIEWER: READ OUT

	LCUs	DON'T KNOW (SPONTANEOUS)
New or used furniture, machinery, vehicles, and equipment	n5a	-9
Land and buildings	n5b	-9

L. LABOR**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**

Now I would like to ask you a few questions about this establishment's labor force.

- L.1** At the end of fiscal year **[insert last complete fiscal year]**, how many permanent, full-time individuals worked in this establishment? Please include all employees and managers (Permanent, full-time employees are defined as all employees that are employed for a term of one or more fiscal years and/or have a guaranteed renewal of their employment and that work a full shift) **(INTERVIEWER: INCLUDE INTERVIEWEE IF APPLICABLE).**

	Number
Permanent, full-time workers end of last fiscal year	11
DON'T KNOW (SPONTANEOUS)	-9

- L.2** Looking back, at the end of fiscal year **[insert last complete fiscal year minus one]**, how many permanent, full-time individuals worked in this establishment? Please include all employees and managers **(INTERVIEWER: INCLUDE INTERVIEWEE IF APPLICABLE).**

	Number
Permanent, full-time workers in [insert last complete fiscal year minus one]	12
IF ESTABLISHMENT WAS NOT IN BUSINESS IN [insert last complete fiscal year minus one]	-7
DON'T KNOW (SPONTANEOUS)	-9

- L.4** At the end of fiscal year **[insert last complete financial year]**, how many permanent, full-time individuals working in this establishment were: **INTERVIEWER: READ EACH CATEGORY SHOW CARD 20**

	Number	NOT APPLICABLE	DON'T KNOW (SPONTANEOUS)
Highly skilled workers	w14a1	-7	-9
Semi-skilled workers	w14a2	-7	-9
Unskilled workers	w14b	-7	-9

- L.6** How many full-time seasonal or temporary employees did this establishment employ during **[insert last complete fiscal year]**?
(Full-time, temporary workers are all short-term (i.e. for less than a year) employees with no guarantee of renewal of employment and work full-time)

Number

Full-time seasonal or temporary workers employed last fiscal year	16
NO FULL-TIME SEASONAL OR TEMPORARY WORKERS	0
DON'T KNOW (SPONTANEOUS)	-9

GO TO QUESTION L.9a

GO TO QUESTION L.9a

L.8	What was the average length of employment of all full-time temporary employees in fiscal year [insert last complete fiscal year] ?
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	Months
Average length full-time seasonal or temporary employment last fiscal year, in months	18
LESS THAN ONE MONTH	1
DON'T KNOW (SPONTANEOUS)	-9

L.9b	What is the percentage of full-time permanent workers who completed secondary school?
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	Percent
Percentage of full time permanent workers who completed secondary school	19b
DON'T KNOW (SPONTANEOUS)	-9

M. BUSINESS ENVIRONMENT**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**

M.1 By looking at card [insert card number] can you tell me which of the elements of the business environment included in the list, if any, currently represents the biggest obstacle faced by this establishment **SHOW CARD 21**
INTERVIEWER: DO NOT READ OUT

1-Access to finance
2-Access to land
3-Business licensing and permits
4-Corruption
5-Courts
6-Crime, theft and disorder
7-Customs and trade regulations
8-Electricity
9-Inadequately educated workforce
10-Labor regulations
11-Practices of competitors in the informal sector
12-Tax administration
13-Tax rates
14-Transport
15-Water

Biggest obstacle	wm1a
DON'T KNOW (SPONTANEOUS)	-9
DOES NOT APPLY (SPONTANEOUS)	-7

Rotation (option 1, 2 or 3)	wm1d
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N. PERFORMANCE**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**

Now, we would like to ask you a few questions about the financial results of this establishment. It is important that this information be as accurate as possible. The individual data are treated as confidential – the identity of your establishment will not be revealed at any point. Please provide the following information from the financial statements of this establishment.

N.2	From this establishment's Income Statement for fiscal year [insert last complete fiscal year], please provide the following information: SHOW CARD 22
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	LCUs	DON'T KNOW (SPONTANEOUS)
Total annual cost of labor including wages, salaries, bonuses, social security payments	n2a	-9
Total annual cost of raw materials and intermediate goods used in production (ONLY ASK MANUFACTURING FIRMS)	n2e	-9
Total annual cost of finished goods and materials purchased for resell (ONLY ASK SERVICES FIRMS)	n2i	-9
Total annual cost of electricity	n2b	-9
Total annual cost of water	n2w	
Total cost of sales	n2p	-9

N.6	From this establishment's Balance Sheet for fiscal year 2015 , what was the net book value, that is the value of assets after depreciation, of the following:
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	LCUs	DON'T KNOW (SPONTANEOUS)
Machinery, furniture, vehicles, and equipment	n6a	-9

N.7	Hypothetically, if this establishment were to purchase the assets it uses now , in their current condition and regardless of whether the establishment owns them or not, how much would they cost, independently of whether they are owned, rented or leased?
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	LCUs	DON'T KNOW (SPONTANEOUS)
Machinery, furniture, vehicles, and equipment	n7a	-9

A.15a Please complete the following information about the interviewee(s)

QUESTIONNAIRE NUMBER **id**

0								
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	rotation
--	-----------------

	Position in the firm	Years with the firm	Gender
Main respondent	a15a1ax	a15a2a	a15a3
Second respondent	a15a1bx	a15a2b	a15b3
Third respondent	a15a1cx	a15a2c	a15c3

ENTER 1 WHEN YEARS WITH THE FIRM IS LESS THAN ONE. FOR GENDER 1: MALE, 2: FEMALE

THE SURVEY ENDS HERE

THANK YOU VERY MUCH FOR YOUR COOPERATION.

A.15 Time face-to-face interview ends:

Day (dd)	Month (mm)	Year (yyyy)	Hour (00 to 23)	Minutes (00 to 59)
a15d	a15m	a15y	a15h	a15min

INTERVIEWERS PLEASE ANSWER AT END OF THE INTERVIEW:

A.16	It is my perception that the responses to the questions regarding opinions and perceptions:
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Truthful	1
Somewhat truthful	2
Not truthful	3

a16

A.17	The responses to the questions regarding figures (productivity and employment numbers):
-------------	---

Are taken directly from establishment records	1
Are estimates computed with some precision	2
Are arbitrary and unreliable numbers	3
Are in some case taken from books in some case estimates	4

a17

INTERVIEWER COMMENTS:

a17x

(Problems occurred/extraordinary circumstances which could influence results)

QUESTIONNAIRE NUMBER **id**

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	rotation
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SUPERVISORS PLEASE ANSWER:

A.18	This questionnaire was completed in:
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One visit in face-to-face interview with one person	1
One visit in face-to-face interview with different managers/staff	2
Several visits	3

STOP HERE

a18

A.19	If option 2 or 3 in A.18 , estimate duration of the whole interview
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Hour	Minutes

a19h

a19m