

**CONFIDENTIAL  
FOR STATISTICAL USE ONLY**

**FOR OFFICE USE ONLY  
QUEST. (MI)\_\_\_\_\_**

**NAME OF ESTABLISHMENT \_\_\_\_\_**

**ISIC \_\_\_\_\_**

**SR. NO. \_\_\_\_\_**

**THE FEDERAL DEMOCRATIC REPUBLIC OF  
ETHIOPIA  
CENTRAL STATISTICAL AUTHORITY**

**ANNUAL SURVEY OF MANUFACTURING  
INDUSTRY  
(19....)**

THE UNIVERSITY OF CALIFORNIA

LIBRARY

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2.6 TYPE OF OWNERSHIP

PRIVATE/CO-OPERATIVE = 1 PUBLIC = 2  
 PUBLIC & PRIVATE = 3 % SHARE \_\_\_\_\_

2.7 IF THE ANSWER TO 2.6 IS CODE 1 OR 3

WHAT IS THE LEGAL FORM OF ORGANIZATION?

INDIVIDUAL PROPRIETOR \_\_\_\_\_ = 1  
 PARTNERSHIP \_\_\_\_\_ = 2  
 SHARE COMPANY \_\_\_\_\_ = 3  
 PRIVATE LIMITED COMPANY \_\_\_\_\_ = 4  
 CO-OPERATIVE \_\_\_\_\_ = 5  
 OTHER (SPECIFY) \_\_\_\_\_ = 6

2.8 NUMBER OF OWNERS OF THE ESTABLISHMENT BY SEX

2.9 PAID-UP CAPITAL BY OWNERSHIP AND SEX

1. PRIVATE ETHIOPIAN MALE BIRR \_\_\_\_\_  
 2. PRIVATE ETHIOPIAN FEMALE BIRR \_\_\_\_\_  
 3. PRIVATE NON-ETHIOPIAN BIRR \_\_\_\_\_  
 4. PUBLIC BIRR \_\_\_\_\_  
 5. OTHERS (SPECIFY) \_\_\_\_\_ BIRR \_\_\_\_\_  
 6. TOTAL BIRR \_\_\_\_\_

2.10 NUMBER OF MONTHS THE ESTABLISHMENT OPERATED DURING 1989 E.F.Y. (1998/97 G.C.)

2.11 WHAT WERE THE THREE MAJOR PROBLEMS THAT PREVENTED YOU FROM OPERATING FULL YEAR (ENUMERATE IN ORDER OF IMPORTANCE)

SHORTAGE OF RAW MATERIALS \_\_\_\_\_ = 1  
 SHORTAGE OF SPARE PARTS \_\_\_\_\_ = 2  
 GETTING MARKET/CUSTOMERS \_\_\_\_\_ = 3  
 LACK OF WORKING CAPITAL \_\_\_\_\_ = 4  
 SHORTAGE OF FOREIGN EXCHANGE \_\_\_\_\_ = 5  
 SHORTAGE OF ELECTRIC & WATER SUPPLY \_\_\_\_\_ = 6  
 REPEATED BREAKAGE OF MACHINERY \_\_\_\_\_ = 7  
 GOVERNMENT RULES & REGULATIONS \_\_\_\_\_ = 8  
 OTHERS (SPECIFY) \_\_\_\_\_ = 9

2.12 OWNERSHIP OF NON-RESIDENTIAL BUILDINGS

PRIVATELY OWNED = 1  
 RENTED = 2  
 OTHERS (SPECIFY) \_\_\_\_\_ = 3

2.13 IF PRIVATELY OWNED, WHAT WAS THE SOURCE OF OWNERSHIP?

INHERITTED = 1  
 PROVIDED FREE = 2  
 CONSTRUCTED BY THE ESTAB. = 3  
 OTHER (SPECIFY) \_\_\_\_\_ = 4

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 2.6

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7

MALE	FEM.	TOTAL
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 2.9 1.

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3.1 NUMBER OF PERSONS ENGAGED IN 19----

SR. NO.	GENERAL OCCUPATION	NUMBER OF PERSONS ENGAGED AS OF THE LAST PAY PERIOD OF WORKING DAY IN 19----												PERSON/ MONTHS	WAGES			
		MESKEREM			TAHSAS			MEGABIT			SENE							
		ETHIOPIAN		FOR.	ETHIOPIAN		FOR.	ETHIOPIAN		FOR.	ETHIOPIAN		FOR.					
		MALE	FEMALE		MALE	FEMALE		MALE	FEMALE		MALE	FEMALE						
3	4	5	6	7	8	9	10	11	12	13	14	15	16					
1	WORKING PROPRIETORS, ACTIVE PARTNERS AND FAMILY WORKERS																	
2	UN-PAID APPRENTICES																	
3	ADMINISTRATIVE, TECHNICAL EMPLOYEES, CLERICAL AND OFFICE WORKERS																	
4	PRODUCTION WORKERS																	
5	PAID APPRENTICES																	
6	SEASONAL & TEMPORARY WORKERS																	
7	TOTAL																	

NB :- SR.NO 3 AND 4 SHOULD INCLUDE ONLY PERMANENT EMPLOYEES

**3.2 WAGES AND SALARIES AND OTHER EMPLOYEE BENEFITS PAID (IN BIRR) IN 19----**

SR. NO.	GENERAL OCCUPATION	GROSS ANNUAL WAGES AND SALARIES PAID*				EMPLOYEES BENEFITS		ESTABLISHMENTS CONTRIBUTION ON BEHALF OF EMPLOYEES TO PENSION, LIFE AND CASUALTY INSURANCE SCHEMES	NO. OF SHIFTS	HRS. PER DAY	M O N T H S	NO. OF WORKERS PER SHIFT
		ETHIOPIAN		FOREIGNERS	TOTAL	COMMISSION, BONUSES, PROFESSIONAL AND HARDSHIP ALLOWANCES (EXCLUDING CAR ALLOWANCE AND PERDIEM)	ACTUAL COST TO THE ESTABLISHMENT OF FOOD, LODGING, MEDICAL & OTHER BENEFITS PROVIDED TO EMPLOYEES FREE OF CHARGE					
		MALE	FEMALE									
1	2	3	4	5	6 (3+4+5)	7	8	9	10	11	12	13
1	PAID APPRENTICES											
2	ADMINISTRATIVE, TECHNICAL EMPLOYEES, CLERICAL & OFF. WORKERS											
3	PRODUCTION WORKERS											
4	TOTAL											

\* HERE WAGES AND SALARIES FOR SEASONAL AND TEMPORARY WORKERS SHOULD BE EXCLUDED.

**3.3 NUMBER OF PERMANENT EMPLOYEES BY BASIC SALARY GROUP\***

SR. NO.	SEX	UNDER 75	75 AND UNDER 105	105 AND UNDER 150	150 AND UNDER 200	200 AND UNDER 250	250 AND UNDER 300	300 AND UNDER 400	400 AND UNDER 500	500 AND UNDER 700	700 AND UNDER 1000	1000 AND UNDER 1500	1500 AND UNDER 2000	2000 AND OVER	TOTAL
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1	MALE														
2	FEMALE														
3	TOTAL														

\* NUMBER OF PERMANENT EMPLOYEES BY SEX & BASIC SALARY GROUP COULD BE COMPILED FROM THE PAYROLL OF LAST PERIOD OF WORKING DAY IN SENE.







## ITEM 7 - FIXED ASSETS AND INVESTMENT (IN BIRR) IN 19----

### 7.1 TYPE AND VALUE OF FIXED ASSETS

SR. NO.		FIXED ASSETS				
		BOOK VALUE BEGINNING OF THE YEAR	INVESTMENT FOR PURCHASE & CAPITAL REPAIR OF FIXED ASSETS	SOLD & DISPOSED DURING THE YEAR	DEPRECIATION DURING THE YEAR*	BOOK VALUE END OF THE YEAR
1	2	3	4	5	6	7
1	DWELLING HOUSES					
2	NON-RESIDENTIAL BUILDINGS					
3	OTHER CONSTRUCTION & WORKS					
4	MACHINERY & EQUIPMENT					
5	VEHICLES					
6	OTHERS (OFFICE FURNITURE AND FIXTURE, etc..)					
7	<b>TOTAL</b>					

\* MAKE SURE THAT IN COLUMN 6 ONLY ANNUAL DEPRECIATION IS INCLUDED

### 7.2 ANNUAL INVESTMENT BY TYPE AND SOURCE

SR. NO.	SOURCE OF FINANCING	TYPE OF INVESTMENT	
		FIXED ASSETS	WORKING CAPITAL
1	2	3	4
1	TOTAL DOMESTIC SOURCE		
2	OWN FUND		
3	BANK LOAN		
4	OTHERS		
5	FOREIGN SOURCE		
6	<b>TOTAL</b>		



**8.3 WHAT WERE THE THREE MAJOR PROBLEMS THAT PREVENTED THE ESTABLISHMENT FROM OPERATING WITH FULL CAPACITY**

		CODE
SHORTAGE OF SUPPLY OF RAW MATERIALS	=1	
SHORTAGE OF SPARE PARTS	=2	<input type="checkbox"/> 1
GETTING MARKET/CUSTOMERS	=3	
LACK OF CREDIT FROM BANKS AND OTHER SOURCES	=4	<input type="checkbox"/> 2
LACK OF FOREIGN EXCHANGE	=5	<input type="checkbox"/> 3
LACK OF TECHNICAL KNOW HOW	=6	
OTHERS (SPECIFY) _____	=7	

**8.4 WHAT ARE THE THREE MAJOR PROBLEMS THAT ARE FACING THE ESTABLISHMENT AT PRESENT**

		CODE
SHORTAGE OF SUPPLY OF RAW MATERIALS	=1	
SHORTAGE OF SPARE PARTS	=2	
DIFFICULT MARKET COMPETITION	=3	<input type="checkbox"/> 1
GETTING MARKET/CUSTOMERS	=4	<input type="checkbox"/>
SHORTAGE OF WORKING CAPITAL	=5	
FREQUENT MACHINE BREAKAGE	=6	<input type="checkbox"/> 2
INCONVENIENT WORKING PLACE	=7	<input type="checkbox"/>
PROBLEMS WITH WORKERS	=8	
GOVERNMENT RULES & REGULATION	=9	<input type="checkbox"/> 3
NO PROBLEMS FACED	=10	<input type="checkbox"/>
OTHERS (SPECIFY) _____	=11	

**ITEM 9 - REMARKS**


11

<b>ITEM 10 - NAME OF PERSON TO CONTACT REGARDING THIS REPORT</b>	
I CERTIFY THAT THE PRECEDING INFORMATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.	
NAME _____	TITLE _____
SIGNATURE _____	TEL. NO. _____
DATE _____	OFFICIAL SEAL _____

<b>ITEM 11 - NAME OF ENUMERATOR AND SUPERVISOR</b>		
NAME OF ENUMERATOR _____	SIGNATURE _____	DATE _____
NAME OF SUPERVISOR _____	SIGNATURE _____	DATE _____
HEAD OF STATISTICS (BRANCH OFF.) _____	SIGNATURE _____	DATE _____

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