

**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....)**

10-10-68

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SURVEY OF LARGE AND MEDIUM MANUFACTURING INDUSTRIES

ITEM 1 - IDENTIFICATION PARTICULARS

1.1 ADDRESS OF THE ESTABLISHMENT

1	2	3	4	5	6	7	8
KILLIL	ZONE	WEREDA	TOWN	HIGHER	KEBELE	HOUSE NO.	QUES. L. M.
9	10				11		12
/ ISIC NO. (FOR OFFICE USE)	REGISTERED NAME OF ESTABLISHMENT/OWNER				SR.NO.OF ESTAB. (For Office)		TELEPHONE NO.
							P.O.BOX NO.

1.2 ADDRESS OF HEAD OFFICE IF SEPARATE FROM FACTORY

1	2	3	4	5	6	7	8	9
KILLIL	ZONE	WEREDA	TOWN	HIGHER	KEBELE	HOUSE NO.	TELEPHONE NO.	P.O.BOX NO.

ITEM 2 - BASIC INFORMATION ABOUT THE ESTABLISHMENT

<p>2.1 TYPE OF RECORD</p> <hr/> <p>2.2 MAJOR PRODUCTS OF THE ESTABLISHMENT (ENUMERATE IN ORDER OF THEIR VALUE OF SALES)</p> <p>_____</p> <p>2.3 IF MULTI-ESTABLISHMENT ENTERPRISE, NUMBER OF ESTAB.</p> <p>2.4 DATE OF COMMENCEMENT OF OPERATION (IN ETHIOPIAN CALENDAR YEAR)</p> <p>2.5 DO YOU KEEP BOOKS OF ACCOUNTS? YES =1 NO =2 (IF YES ATTACH DETAILED STATEMENT OF ACCOUNTS)</p> <p>2.6 IF THE ANSWER IS YES TO 2.5 STATE ACCORDING TO WHICH CALENDAR YEAR YOUR ACCOUNTS AND BOOKS ARE BEING KEPT</p> <p>ETHIOPIAN FISCAL YEAR (YEAR ENDING JULY 7) =1</p> <p>ETHIOPIAN CALENDAR YEAR (YEAR ENDING SEPT. 10) =2</p> <p>GREGORIAN CALENDAR YEAR (YEAR ENDING DEC. 31) =3</p> <p>OTHERS (SPECIFY) _____ =4</p>	<p style="text-align: center;">1</p> <p>2.1 <input type="text" value="0"/> <input type="text" value="1"/></p> <p style="text-align: center;">2</p> <p>2.3 <input type="text"/></p> <p style="text-align: center;">3</p> <p>2.4 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p style="text-align: center;">4</p> <p>2.5 <input type="text"/></p> <p style="text-align: center;">5</p> <p>2.6 <input type="text"/></p>
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2.7 TYPE OF OWNERSHIP

PRIVATE/CO-OPERATIVE =1 PUBLIC =2
PUBLIC/PRIVATE =3 % SHARE _____

2.8 IF THE ANSWER TO 2.7 IS CODE 1 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

2.9 NUMBER OF OWNERS OF THE ESTABLISHMENT BY SEX

2.10 INITIAL 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 _____

2.11 NUMBER OF MONTHS THE ESTABLISHMENT OPERATED DURING 1988 E.F.Y. (1995/96 G.C..)

2.12 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

2.13 OWNERSHIP OF NON-RESIDENTIAL BUILDINGS

PRIVATELY OWNED =1 RENTED =4
PROVIDED FREE =2 OTHERS (SPECIFY) =5
INHERITED =3 _____

2.14 MARKETING PERIOD OF THE ESTABLISHMENT (ENUMERATE IN ORDER OF IMPORTANCE)

AUTUMN (SEPTEMBER, OCTOBER, NOVEMBER) =1
MAIN (MEHER) SEASON (DECEMBER, JANUARY, FEBRUARY) =2
SUMMER (MARCH, APRIL, MAY) =3
WINTER (JUNE, JULY, AUGUST) =4
SIMILAR THROUGHOUT THE YEAR =5

2.15 MARKETING PLACE OF THE ESTABLISHMENT

FACTORY _____ =1 SHOP _____ =3
OPEN MARKET PLACE =2 OTHER (SPECIFY) _____ =4

2.7 ☐2.8 ☐

2.9

8		
MALE	FEM.	TOTAL

2.10

1.

9				

2.

10				

3.

11				

4.

12				

5.

13				

6.

14				

2.11

15	

2.12

16

17

18

2.13

19

2.14

20

21

22

2.15

23

ITEM 3 - NUMBER OF PERSONS ENGAGED AND WAGES AND SALARIES PAID IN (BIRR) IN 19----

3.1 NUMBER OF PERSONS ENGAGED IN 19----

[illegible]

3.2 NUMBER OF PERSONS ENGAGED BY EDUCATIONAL STATUS

REC. TYPE	SR. NO.	GENERAL OCCUPATION	ILLITERATE	READ & WRITE ONLY*	COMPLETED GRADES 1-6	COMPLETED GRADES 7-8	COMPLETED GRADES 9-12	DIPLOMA PROGRAM INCOMPLETE	DEGREE PROGRAM INCOMPLETE	DIPLOMA	FIRST DEGREE & ABOVE
1	2	3	4	5	6	7	8	9	10	11	12
0	3	1 WORKING PROPRIETORS, ACTIVE PARTNERS AND FAMILY WORKERS									
0	3	2 UN-PAID APPRENTICES									
0	3	3 ADMINISTRATIVE, TECHNICAL EMPLOYEES, CLERICAL AND OFFICE									
0	3	4 PRODUCTION WORKERS									
0	3	5 PAID APPRENTICES									
0	3	6 TOTAL									

* WITH IRREGULAR EDUCATION

3.3 NUMBER OF PERSONS ENGAGED BY AGE GROUP

REC. TYPE	SR. NO.	GENERAL OCCUPATION	AGE GROUP							
			UNDER 18	18-19	20-29	30-39	40-49	50-55	56 & ABOVE	
1	2	3	4	5	6	7	8	9	10	
0	4	1 WORKING PROPRIETORS, ACTIVE PARTNERS AND FAMILY WORKERS								
0	4	2 UN-PAID APPRENTICES								
0	4	3 ADMINISTRATIVE, TECHNICAL EMPLOYEES, CLERICAL AND OFFICE								
0	4	4 PRODUCTION WORKERS								
0	4	5 PAID APPRENTICES								
0	4	6 TOTAL								

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

REC TYPE	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 S H I F T S	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, MED- ICAL & OTHER BENEFITS PROVIDED TO EMPLOY- EES FREE OF CHARGE					
			MALE	FEMALE									
1	2	3	4	5	6	7 = (4 + 5 + 6)	8	9	10	#	12	13	14
0	5	1 PAID APPRENTICES											
		ADMINISTRATIVE, TECHNICAL EMPLOYEES, CLERICAL & OFF. WORKERS											
0	5	2 PRODUCTION WORKERS											
0	5	3 TOTAL											

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

3.5 NUMBER OF PERMANENT EMPLOYEES BY BASIC SALARY GROUP*

REC. TYPE	SR. NO.	SEX	UNDER 75	75 AND UNDER 100	100 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	17
0	6	1 MALE														
0	6	2 FEMALE														
0	6	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 4 - PRODUCTS AND SERVICES OF THE ESTABLISHMENT (IN BIRR) IN 19----

4.1 PRODUCTS AND BY-PRODUCTS

[illegible]

* TOTAL SALES SHOULD INCLUDE ALL DUTIES AND INDIRECT TAXES COLLECTED, i.e., TRANSACTION, TURNOVER AND EXCISE TAXES etc..

4.2 SERVICES AND OTHER RECEIPTS (IN BIRR) IN 19----

[illegible]

ITEM 5 - VALUE OF STOCKS (IN BIRR) IN 19----

REC. TYPE	SR. NO.	STOCKS OF	BEGINNING OF THE YEAR	END OF THE YEAR	DIFFERENCE (END YEAR - BEG. YEAR)
1	2	3	4	5	6 = 5 - 4
0 7	1	FINISHED GOODS			
0 7	2	SEMI-FINISHED GOODS			
0 7	3	RAT MATERIALS			

ITEM 6 - COST AND QUANTITY OF RAW MATERIALS, PARTS AND CONTAINERS USED AND PAYMENTS FOR OTHER VARIOUS EXPENSES (IN BIRR) IN 19----

6.1 COST AND QUANTITY OF RAW MATERIALS, PARTS AND CONTAINERS USED (VALUE IN BIRR) IN 19----

REC. TYPE	SR. NO.	DESCRIPTION OF PRINCIPAL RAW MATERIALS, PARTS & CONTAINERS USED	UNI OF EA	RAW MATERIAL CODE	U/M CODE	LOCAL		IMPORTED		TOTAL	
						QUANTITY	VALUE	QUANTITY	VALUE	QUANTITY	VALUE
1	2	3	4	5	6	7	8	9	10	11 = 7 + 9	12 = 8 + 10
0 8	0 1										
0 8	0 2										
0 8	0 3										
0 8	0 4										
0 8	0 5										
0 8	0 6										
0 8	0 7										
0 8	0 8	SPARE PARTS									
0 8	0 9	AUXILIARY MATERIALS									
0 8	1 0	TOTAL									

N.B: ONLY THE PRINCIPAL RAW MATERIALS USED IN THE REFERENCE YEAR SHOULD BE DESCRIBED IN THE SPACES PROVIDED.
VALUE OF PARTS & CONTAINERS USED AND OTHER NON-PRINCIPAL MATERIALS SHOULD BE INCLUDED UNDER AUXILIARY MATERIALS.

6.2 OTHER INDUSTRIAL COSTS (VALUE IN BIRR) IN 19---

REC. TYPE	SR. NO.	TYPE	UM	UNIT COD	QUANTITY	VALUE OF FUEL & LUBRICATING OIL*	ELECTRICITY		WOOD AND CHARCOAL FOR ENERGY	OTHER EXPENSES				TOTAL
							(KWH) CONSUMED	VALUE		WATER CONSUMED	COST OF CONTRACT WORK DONE BY OTHERS FOR THIS ESTAB.	COST OF GOODS BOUGHT AND RESOLD	COST OF REPAIR & MAINTENANCE WORK DONE BY OTHERS FOR THE ESTAB.	
1	2	3	4		6	7	8	9	10	11	12	13	14	(15=7+8+9+10+11+12+13+14)
0 9	1	FUEL OIL												
0 9	2	DIESEL FUEL OIL												
0 9	3	OTHER(SPECIFY)												
0 9	4	a.												
0 9	5	b.												
0 9	6	c.												
0 9	6	d.												
0 9	7	TOTAL												

* PLEASE DO NOT INCLUDE HERE FUEL FOR TRANSPORT

6.3 OTHER NON-INDUSTRIAL EXPENSES (IN BIRR) IN 19---

REC. TYPE	SR. NO.	LICENSE FEE	ADVERTISING	STATIONARY, TELEPHONE MAILING EXPENSES	PAYMENTS FOR ACCOUNTING, LEGAL COMMISSION, etc.	TRANSPORT COST	INTEREST PAID & BANK CHARGES	DIVIDENDS PAID	RENT PAYABLE FOR RENTAL OF STRUCTURES AND EQUIPMENT	INSURANCE PREMIUM ON PROPERTY	OTHERS
1	2	3	4	5	6	7	8	9	10	11	12
1 0	1										

TOTAL
13 = (3+4+...+11+12)

6.4 TAXES PAID (IN BIRR) IN 19---

REC. TYPE	SR. NO.	INDIRECT TAXES PAID**	INCOME TAX PAID ON PROFIT	TOTAL
1	2	3	4	5
1 1	1			

* DUTIES AND INDIRECT TAXES COLLECTED, i.e., TRANSACTION, TURNOVER AND EXCISE TAX etc..

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

REC. TYPE	SR. NO.	3	FIXED ASSETS				8	INVESTMENT DURING THE YEAR			
			4	5	6	7		9	10	11	12
1	2		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	SOURCE OF FINANCING	CODE NO.	FIXED ASSETS	WORKING CAPITAL
1	2	1	DWELLING HOUSES					TOTAL DOMESTIC SOURCE	1 0		
1	2	2	NON-RESIDENTIAL BUILDINGS					DOMESTIC END	1 1		
1	2	3	OTHER CONSTRUCTION & WORKS					BANK LOAN	1 2		
1	2	4	MACHINERY & EQUIPMENT					OTHERS	1 3		
1	2	5	VEHICLES					FOREIGN SOURCE	2 0		
1	2	6	OTHERS (OFFICE FURNITURE AND FIXTURE, etc.)								
1	2	7	TOTAL					TOTAL			

* MAKE SURE THAT IN COLUMN 7 ONLY ANNUAL DEPRECIATION IS INCLUDED

ITEM 8 - YEARLY FULL CAPACITY

8.1 ANNUAL PRODUCTION AT FULL CAPACITY

REC TYPE	SR. NO.	DESCRIPTION OF PRODUCTS	U/M	PRODUCT CODE	U/M CODE	QUANTITY OF PRODUCT THAT CAN BE PRODUCED ANNUALLY	VALUE OF PRODUCT (AT CURRENT MARKET PRICE)
1	2	3	4	5	6	7	8
1	3	0 1					
1	3	0 2					
1	3	0 3					
1	3	0 4					
1	3	0 5					
1	3	0 6					
1	3	0 7					
1	3	0 8					
1	3	1 9 OTHERS (BY PRODUCTS)					
1	3	1 0 TOTAL					

8.2 ESTIMATED VALUE AND QUANTITY OF RAW MATERIALS NEEDED, AT FULL CAPACITY

REC. TYPE	SR. NO.	TYPE OF RAW MATERIALS	U/M	RAW MAT. CODE	U/M CODE	LOCAL		IMPORTED		TOTAL	
						QUANTITY	VALUE (AT MARKET PRICE)	QUANTITY	VALUE (AT MARKET PRICE)	QUANTITY	VALUE (AT MARKET PRICE)
1	2	3	4	5	6	7	8	9	10	11	12
1	4	1									
1	4	2									
1	4	3									
1	4	4									
1	4	5									
1	4	6 OTHERS									
1	4	7 TOTAL									

**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	1 1 5
SHORTAGE OF SPARE PARTS	=2	2 <input type="checkbox"/>
GETTING MARKET/CUSTOMERS	=3	3 <input type="checkbox"/>
LACK OF CREDIT FROM BANKS AND OTHER SOURCES	=4	4 <input type="checkbox"/>
LACK OF FOREIGN EXCHANGE	=5	5 <input type="checkbox"/>
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	1 1 6
SHORTAGE OF SPARE PARTS	=2	2 <input type="checkbox"/>
DIFFICULT MARKET COMPETITION	=3	3 <input type="checkbox"/>
GETTING MARKET/CUSTOMERS	=4	4 <input type="checkbox"/>
SHORTAGE OF WORKING CAPITAL	=5	5 <input type="checkbox"/>
FREQUENT MACHINE BREAKAGE	=6	6 <input type="checkbox"/>
INCONVENIENT WORKING PLACE	=7	7 <input type="checkbox"/>
PROBLEMS WITH WORKERS	=8	8 <input type="checkbox"/>
GOVERNMENT RULES & REGULATION	=9	9 <input type="checkbox"/>
NO PROBLEMS FACED	=10	10 <input type="checkbox"/>
OTHERS (SPECIFY) _____	=11	11 <input type="checkbox"/>

ITEM 9 - REMARKS

ITEM 10 - NAME OF PERSON TO CONTACT REGARDING THIS REPORT

I CERTIFY THAT THE PRECEDING INFORMATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

NAME	_____	TITLE	_____
SIGNATURE	_____	TEL. NO.	_____
DATE	_____	OFFICIAL SEAL	_____

ITEM 11 - NAME OF ENUMERATOR AND SUPERVISOR

NAME OF ENUMERATOR	_____	SIGNATURE	_____	DATE	_____
NAME OF SUPERVISOR	_____	SIGNATURE	_____	DATE	_____
HEAD OF STATISTICS (BRANCH OFF.)	_____	SIGNATURE	_____	DATE	_____

