

ID0. Interview result <div style="text-align: right; padding-right: 20px;">1. Completed <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/></div>		First: General Data: ID1. Number of actual work months during the survey year _____ <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> ID2. Fiscal Years for the Enterprise: From ____ / ____ / 20__ To ____ / ____ / 20__ ID3. Data Sources <div style="display: flex; justify-content: space-between;"> 1. Financial books and records 2. Estimates 3. Both <input style="width: 20px;" type="checkbox"/> </div> ID4. Currency used in questionnaire completion <div style="display: flex; justify-content: space-between;"> 1. Jordanian Dinar (JD) 2. US Dollar (\$) 3. New Israeli Shekel (NIS) <input style="width: 20px;" type="checkbox"/> </div> ID5. For Non governmental sector : Does the enterprise work with serious economic prices (Revenue cover the cost or more) <div style="display: flex; justify-content: space-between;"> 1. Yes 2. No <input style="width: 20px;" type="checkbox"/> </div> <u>For enterprise Only (for sole proprietorship or main centers with branches):</u> ID6. Establishing Year: _____ <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> ID7. Declared Capital _____ <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> ID8. Paid Capital to the end of the 2010 _____ <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> <input style="width: 20px;" type="checkbox"/> ID9. The enterprise prepares profits/losses account and balance sheet? 1.Yes 2.No <input style="width: 20px;" type="checkbox"/> ID10. Does the enterprise have investments abroad? 1.Yes 2.No <input style="width: 20px;" type="checkbox"/> ID11. Does the enterprise have investments from abroad? 1.Yes 2.No <input style="width: 20px;" type="checkbox"/>
<div style="text-align: center; padding-top: 20px;">Not Completed (Specify)</div>	<div style="padding-top: 20px;"> 2.1 Completely closed before 2010 2.2 Completely closed after or through 2010 3. Temporarily closed 4. Could not reach the address 5. Did not practice any activity in2010. 6. Different economic activity * 7. Refused 8. Repeated 9. Central government 10. Agricultural Appropriation 11. Branch Keep No Records 12. The Balance isn't ready 13. Isn't an enterprise as Recognized 14. Israeli Ownership 15. Different Ownership 16.Other (specify), </div>	

* **ID12:** If the economic activity changed, describe the new economic activity; _____

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No.2 A: Employment and Employees Compensation:

Employed persons' categories	Auxiliary code	Average number of employed persons during the reference year		Average number of weekly work hours per employee	Compensations of employees during the reference year	
		Male	Female		Male	Female
EK	LS	LM	LF	LH	CM	CF
Unpaid employees	1					
Wage employees	2					
Total						
Payments in kind						
Other benefits						
Total Compensation						

No.2 B: Employment during 12/2010:

Employed persons' categories	Auxiliary code	No. of employed persons during 12/2010		Contracts		Yearly Paid Vacations		Work injury insurance		Retirement System	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
EM	EM1	EM2	EM3	EM4	EM5	EM6	EM7	EM8	EM9	EM10	EM11
Unpaid employees	1										
Wage employees:											
1. permanent	3										
2. temporary	4										
Total											

No.2C:insurance health

NA1. Does the institution avail health insurance for its labor?	1. Yes	2. No (If 2 skip to NA4)	<input type="checkbox"/>
NA2. Does the institution provide health insurance through insurance company?	1. Yes	2. No	<input type="checkbox"/>
NA3. Total value of claims which paid for insurance companies.			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
NA4. Is there clinic in the institution?	1. Yes	2. No	<input type="checkbox"/>
NA5. Total expenditure of the clinic			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

No. 3A: Goods Production Inputs

Item	Auxiliary code	Value of beginning Inventory	Purchases during the year			Production inputs sold as purchased (purchased price)	Lost and writtenoff	Value of ending inventory	Value of consumed during the year
			Internally purchases	Externally purchases	Total				
RM	RM1	RM2	RM3	RM4	RM5	RM6	RM7	RM8	RM9
Raw Materials	10								
other raw materials	11								
Electricity	12								
water	13								
Total	88								

Value of Production Inputs =(value of beginning inventory + total of purchases –production in puts sold as purchased –lost and written off –value of ending Inventory)

No.3B: Goods Production Inputs

Item	Auxiliary code	Value of beginning Inventory	Purchases during the year	Production inputs sold as purchased (purchased price)	Lost and writtenoff	Value of ending inventory	Value of consumed during the year	Value of consumed to produce electricity
OL	OL1	OL2	OL3	OL4	OL5	OL6	OL7	OL8
1. Gasoline	10							
2. Kerosene	11							
3. Diesel	12							
4. Gas	13							
5. Oils and lubrications	14							
6. Other fuel (coal, fire wood...)	15							
Total	88							

Value of Production Inputs =(value of beginning inventory + total of purchases –production in puts sold as purchased –lost and written off –value of ending Inventory)

No.4: Other Production Expenditures (Services Offered by Others)

Type of expenditure	Auxiliary code	Expenditure value			Type of expenditure	Auxiliary code	Expenditure value		
		Internal	External	Total			Internal	External	Total
PE	PE 1	PE 2	PE 3	PE 4	PE	PE 1	PE 2	PE 3	PE 4
Rent of buildings	10				Auditing	16			
Rent of machines and equipment	11				Computer consulting services	17			
Post, telegraph, telephone, and fax	12				Transportation of passengers and goods	18			
Maintenance and repair of machines and equipment	13				Cleaning services	19			
Maintenance and repair of buildings and constructions	14				Losses of selling production inputs	20			
Advertising	15				Unions and syndicates fees	21			
					Other	22			
					Total	88			

No.5: Fees and Taxes on Production

Fees and Taxes	Auxiliary code	Value of payments		
		Internal	External	Total
TF	TF1	TF2	TF3	TF4
Customs duties	10			
Value added tax (net tax)	11			
Enterprise licensing fees	12			
Vehicles licensing fees	13			
Permit fees	14			
Other Fees and Taxes on Production	15			
Total	88			

No.6 : Various payments and transfers

Payments and Remittances	Auxiliary code	Value of Payments		
		Internal	External	Total
PD	PD1	PD2	PD3	PD4
Rent of land	10			
Interests on loans	11			
Withdrawals of proprietors	12			
Governmental and non Governmental fines	13			
Accident insurance premiums(exclude employees)	14			
Assets selling loses	15			
Other	16			
Total	88			

No.7 : Commodity Products

Type of product	Auxiliary code	ISIC code	Value of Beginning inventory	Sales Value			Value of Ending inventory	Products produced during the year
				Local	External	Total		
PM	PM1	PM2	PM3	PM4	PM5	PM6	PM7	PM8
Finished products								
1.	10							
2.	10							
3.	10							
4.	10							
5. Other:	10							
Work in Progress	11							
Fixed assets produced for own Accounts	12							
Wastes	13							
Total	88	88888						

No. 8: Goods Purchased for Resale (Trade Activity)

Goods	ISIC Code	Value of beginning inventory	Purchases during the year			Lost & written off	Sales Value			Value of ending inventory	Trade margin
			local	External	Total		local	External	Total		
GS	GS1	GS2	GS3	GS4	GS5	GS6	GS7	GS8	GS9	GS10	GS11
1.											
2.											
3.											
4.											
5. Other.....											
Total	88888										

No.9: Revenues of Services Rendered to Others

Type of revenue	Auxiliary code	Other Revenues Value		
		Internal	External	Total
	SI1	SI2	SI3	SI4
Main Revenue of the Service Activity	10			
Revenue of Transport and Storage	11			
Revenue of Communication and Information	12			
Industrial services on materials from others	13			
Maintenance and repairs services	14			
Rent of Building	15			
Other	16			
Total	88			

No10 : Various transfers and revenues

Types of revenue	Auxiliary Code	Other Revenue value		
		Internal	External	Total
DI	DI1	DI2	DI3	DI4
Rent of land	10			
Shares profits	11			
Grants and donations	12			
Profits of selling fixed assets	13			
Other	14			
Total	88			

No. 11 : Fixed Assets

Types of fixed assets	Auxiliary code	Book value at the beginning of the year	Value of purchased assets during the year			Fixed assets produced at the Enterprise	Capital additions and improvements	Written -off and losses	Assets sold during the year	Depreciation during the year	Book value at the end of year
			Imported	Local							
				New	Second-hand						
FA	FA1	FA2	FA3	FA4	FA5	FA6	FA7	FA8	FA9	FA10	FA11
Land	10										
Residential buildings	11										
Non residential buildings	12										
Machines, equipment & devices	13										
Goods vehicles	14										
Passengers vehicles	15										
Furniture and furnishings	16										
Computer programs	17										
Other	21										
Total	88										

No .12 : Section for goods transport vehicles (If it has goods transport vehicles)

No.12A: Number of kilometers that goods vehicles passed during the year by vehicles type:

Transport direction		Auxiliary code	Truck	Road tractor	Trailers	Semi -trailer	Others	total
km		KM1	KM2	KM3	KM4	KM5	KM6	KM7
Inside Palestinian territory		10						
Out Palestinian territory	Israel	11						
	Other Countries	12						
total		88						

No12B: : Number of goods tones transported according to goods type :

Goods Type	Auxiliary code	Inside Palestinian territory	Israel	Other Countries	total
To	To1	TO2	TO3	TO4	TO5
Solid goods	10				
Liquid goods	11				
Others	12				
Total	88				

No 13 : Section for Tourism and Transport agencies

No13-A : Number of trips implemented by Tourism Agencies:

Side of Trip		Auxiliary Code	Number of trips	Sum of trips time (in days)	Number of Contributors		
					Residents	Non Residents	Total
TR		TR1	TR2	TR3	TR4	TR5	TR6
Inside Palestinian Territory		10					
Outside Palestinian Territory	Israel	11					
	World Remaining	12					
Total		88					

No13-B : Number of tickets sold by Tourism Agencies:

Country	Auxiliary code	Resident	Non Resident	Total
TK	TK1	TK2	TK3	TK4
ARAB COUNTRIES	13			
ASIA	14			
AFRICA	15			
EUROPE	16			
CANADA AND AUSTRALIA	17			
USA	18			
OTHERS:	19			
Total	88			

ID13:Name and addresses of branches (for multi branch enterprise):

No.	Name of Branch	Enterprises sequence no.	Address	Data included in the main center questionnaire		Average Number of Employees
				1. Yes	2. No	
BR0	BR1	BR2	BR3	BR4		BR5
1.		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
2.		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
3.		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
4.		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
5.		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

Respondent

Name:	Official Seal
Jobs:	
Date:	
Signature	

For PCBS use

Name	Code	Signature	Date	Interviewer Notes
* Interviewer	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	____ / ____ / 2011	
* Supervisor	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	____ / ____ / 2011	
* Coordinator	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	____ / ____ / 2011	
* Editor	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	____ / ____ / 2011	
* Coder	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	____ / ____ / 2011	
* Data entry operator	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	____ / ____ / 2011	
* Post data entry editor	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____	____ / ____ / 2011	