



ESTABLISHMENT INQUIRY FORM

Dear Sir/Madam:

The Philippine Statistics Authority (PSA) is conducting the 2021 Updating of the List of Establishments (ULE) which aims to provide an updated Statistical Business Register containing information on basic characteristics of establishments needed for the conduct of economic census and surveys and formulation of policies and implementation of programs in the country.

This office is authorized to collect information from businesses and industries under Republic Act (RA) No. 10625 or also known as the Philippine Statistical Act of 2013. Section 25 of the same law obliges all respondents whether natural or legal persons to reply to the statistical inquiry or survey. Among the data to be collected in the ULE are business name, registered name, business address, economic activity, total employment, economic organization, legal organization, name and address of main office/parent company, nationality of owner/major stockholder/contributor, total assets, and the maximum farm capacity and animal inventory for establishments engaged in livestock and poultry.

Moreover, please be informed that Section 4(e) of RA No. 10173 (Data Privacy Act of 2012) states that the data privacy does not apply to "information necessary in order to carry out the functions of the public authority which includes the processing of personal data for the performance by the independent agencies of their constitutionally and statutorily mandated functions".

An authorized interviewer will visit your establishment to ask questions pertaining to the above-mentioned data requirements for the ULE. If personal interview is not possible at your end, please accomplish this inquiry form and submit to our authorized representative who will visit you on an agreed date. You may also accomplish the online questionnaire found in the PSA website with URL <https://ule.psa.gov.ph>.

Rest assured that the data you will provide will be treated with strict CONFIDENTIALITY and shall be considered privileged communication and as such shall be inadmissible as evidence in any proceeding as stated in Section 26 of RA No. 10625.

We look forward to your cooperation and support to this undertaking.

Thank you.

DENNIS S. MAPA, Ph.D.
 Undersecretary
 National Statistician and Civil Registrar General

For queries or submission of self-accomplished form, please contact:

Name _____

Telephone/Fax/Mobile No. _____

E-mail Address _____

FOR PSA USE ONLY (Do not fill)		
Method of Enumeration		
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Personal interview by PSA authorized interviewer	Self-Administered	Online

1. Business Name

Enter the business name of this establishment. If there is no business name, enter the name of the owner with surname first followed by the given name and the business activity.

2. Registered Name

Enter the establishment's name registered with the Securities and Exchange Commission (SEC), Cooperative Development Authority (CDA) or Department of Trade and Industry (DTI). If neither registered with SEC, CDA or DTI, enter the name registered with the Bureau of Internal Revenue (BIR), LGU Business Permit and Licensing Office or Barangay. Otherwise, enter name of owner.

3. Business Tax Identification Number (TIN)

Enter the 12-digit or 13-digit number provided by the BIR.

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4. Business Address

The address should refer to the physical location of the establishment.

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Number/Street Name

Building Name/ Floor/ Room No.

Subdivision/Purok/Sitio

Barangay

City/Municipality

Province

5. Contact Information of Establishment

5.1 Telephone No./s: _____ 5.2 Fax No./s: _____

5.3 Official/Company e-mail address: _____

5.4 Company Website: _____

5.5 Establishment's Social Media Account/s: _____

6. Economic Area**6.1 Type of Economic Area**

Mark (✓) the appropriate box corresponding to the economic area where the establishment is located.

- | | |
|--|---|
| 1 <input type="checkbox"/> Market | 5 <input type="checkbox"/> Seaport |
| 2 <input type="checkbox"/> Shopping Mall/Center | 6 <input type="checkbox"/> Airport |
| 3 <input type="checkbox"/> Information Technology Park | 7 <input type="checkbox"/> Other Commercial, Agricultural or Industrial Area/Bldg |
| 4 <input type="checkbox"/> Economic/Industrial Zone | 8 <input type="checkbox"/> Residential Area/Building with Business Activity |

6.2 Name of Economic Area

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Economic Area Code

7. Franchise

Indicate if this establishment is a franchisee, franchisor or not applicable.

7.1 Mark (✓) appropriate box corresponding to the answer

- 1 Franchisor 2 Franchisee 3 Not applicable

7.2 If franchisee, indicate the registered name of franchisor

8. Legal Organization of Establishment

Indicate the legal organization of this establishment

8.1 Mark (✓) appropriate box which best describes this establishment.

- 1 Single Proprietorship
- 2 Partnership
- 3 Government Corporation
- 4 Stock Corporation
- 5 Non-Stock, Non-Profit Corporation
- 6 Cooperative
- 7 Others, Specify _____

A corporation with a single stockholder is considered a **One Person Corporation (OPC)**. The single stockholder is the sole director and president of the one person corporation. An OPC has a separate juridical personality from its owner. Furthermore, OPCs are subject to the regulation of the Securities and Exchange Commission (SEC) and are required to file articles of incorporation and submit annual reportorial requirements.

8.2 If Stock Corporation (box 4) in item 8.1, mark (✓) "YES" if this establishment is a One Person Corporation, "NO" if not.

- YES, this establishment is a One Person Corporation
- NO, this establishment is not a One Person Corporation

9. Economic Organization of Establishment

Mark (✓) appropriate box which best describes this establishment.

- 1 Single Establishment
- 2 Branch Only
(Indicate name and address of main office in ITEM 17)
- 3 Establishment and Main Office are both located in the same address and with branches elsewhere
- 4 Main Office Only
- 5 Ancillary Unit other than Main Office
(Indicate name and address of main office in ITEM 17)

Single Establishment is an establishment which has neither branch nor main office. It may have ancillary unit/s, other than main office, located elsewhere.

Branch is an establishment which has a separate main office located elsewhere.

Main Office Only is a unit which controls, supervises and directs one or more establishments of an enterprise.

Ancillary Unit is a unit that operates primarily or exclusively for a related establishment or group of related establishments or its parent establishment and provides services that support those establishments.

(For codes 3 or 4, provide details on branches in ITEM 20)

10. Nationality of Owner/Major Stockholder/Contributor

Indicate nationality of owner or stockholder/contributor with the biggest percentage of capital participation. If the establishment is a One Person Corporation, indicate the nationality of the single stockholder.

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NATIONALITY CODE

11. Economic Activity or Business

Describe in detail the main economic activity and other activities of this establishment.

11.1 Main Activity

(Refers to the activity that contributes the biggest or major portion of the gross income or revenue of this establishment.)

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2009 PSIC Code

11.2 Major products/goods produced or sold or type of service rendered

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2009 PSIC Code

11.3 Secondary/Other Activities

(Refer to activities carried out by this establishment in addition to the main activity and in which the output, like that of the main activity, must be suitable for delivery outside this establishment.)

11.4 Ancillary Activity

(Refers to activities that exist to support the main productive activities of this establishment by providing non-durable goods or services entirely or primarily for the use of this establishment.)

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2009 PSIC Code

12. E-Commerce Transactions

E-commerce refers to the sale or purchase of goods and services, whether between businesses, households, individuals, government, and other public or private organizations, conducted over computer-mediated networks. The goods and services are ordered over those networks, but the payment and the ultimate delivery of the good or service may be conducted online or offline. **INCLUDE:** Orders made in web pages, extranet or Electronic Data Interchange (EDI). **EXCLUDE:** Orders made by telephone calls, facsimile, or manually typed e-mail.

Mark (✓) "YES" if this establishment is engaged in e-commerce, "NO" if not.

- YES, this establishment is engaged in e-commerce
- NO, this establishment is not engaged in e-commerce

13. Year Started Operation

Indicate the year in the box provided when this establishment started operation regardless of its location in the country.

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14. Total Employment

Indicate in the box provided the total number of persons (as of date of visit) who work in or for this establishment. (This includes paid employees, working owners, unpaid workers and all employees who work full-time or part-time including seasonal workers. Included also are persons on short term leave such as those on sick, vacation or annual leaves and on strike. Workers in barber shops, beauty parlors and cockpit arena who are receiving commission, and taxi drivers whose mode of payment is boundary system are also included. **Excluded** are consultants, home-workers, workers receiving pure commission only, workers on indefinite leave, silent or inactive partners and members of cooperative who are not involved in the operation of the cooperative. Also **excluded are workers on sub-contract agreement or under manpower agencies/contractor who are not in the payroll of this establishment, these are to be reported in Item 16.**

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15. Paid Employees

Indicate in the box provided the total number of paid employees (as of date of visit) receiving regular pay from this establishment. (This includes full-time or part-time workers, employees on sick or maternity leave and on paid vacation or holiday; employees working away from this establishment and employees paid by and under control of this establishment; and employees on strikes. Excluded are consultants, home workers, workers receiving commission only, workers on indefinite leave and subcontract workers not in the payroll of this establishment.)

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16. Workers on Sub-Contract Agreement or Under Manpower Agencies/Contractors

Indicate in the box provided the total number of workers on sub-contract agreement or under manpower agencies/contractors (as of date of visit).

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Workers on sub-contract agreement or under manpower agencies/contractors are workers employed by the contractors to perform or complete a job, work or service within the premise of this establishment pursuant to a service agreement. These workers are not in the payroll of this establishment.

17. Name and Address of Main Office

If the establishment is a Branch (box 2) or Ancillary Unit (box 5) in ITEM 9, provide name and complete address of main office.

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17.1 Name of Main Office: _____

17.2 Address _____

18. Total Assets

Assets are resources controlled by the establishment as a result of past transactions and events from which future economic benefits are expected to flow to the enterprise. In short, assets are properties owned, including land. Assets are classified into current and non-current assets. **Current assets** refer to assets such as cash, stocks, accounts receivables and other assets which could be consumed or disposed of in the short term; as opposed to fixed assets. **Noncurrent assets** refer to all assets which the company intends to hold for the long term and which it does not intend (or cannot) dispose of quickly.

If the establishment is a Single Establishment (box 1), or both Establishment and Main Office (box 3) or Main office only (box 4) in ITEM 9, mark (✓) the appropriate box corresponding to total assets of this establishment **including its branch/es and ancillary unit/s** as of **December 31, 2020**.

18.1 Total Assets Including Land

- | | |
|---|--|
| 1 <input type="checkbox"/> PHP 100,000 and below | 5 <input type="checkbox"/> PHP 3,000,001 to 15,000,000 |
| 2 <input type="checkbox"/> PHP 100,001 to 500,000 | 6 <input type="checkbox"/> PHP 15,000,001 to 100,000,000 |
| 3 <input type="checkbox"/> PHP 500,001 to 1,500,000 | 7 <input type="checkbox"/> Above PHP 100,000,000 |
| 4 <input type="checkbox"/> PHP 1,500,001 to 3,000,000 | |

18.2 Total Assets Excluding Land

- | | |
|---|--|
| 1 <input type="checkbox"/> PHP 100,000 and below | 5 <input type="checkbox"/> PHP 3,000,001 to 15,000,000 |
| 2 <input type="checkbox"/> PHP 100,001 to 500,000 | 6 <input type="checkbox"/> PHP 15,000,001 to 100,000,000 |
| 3 <input type="checkbox"/> PHP 500,001 to 1,500,000 | 7 <input type="checkbox"/> Above PHP 100,000,000 |
| 4 <input type="checkbox"/> PHP 1,500,001 to 3,000,000 | |

19. Name and Address of Parent Company

If the establishment has a parent company, provide the name and address of the parent company.

19.1 Name of Parent Company:

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PRV	MUN	BGY		

19.2 Address of the Parent Company:

20. Branches (for Main Office)

If the Establishment and Main Office are located in the same address with branches elsewhere (box 3) or Main Office only (box 4) in ITEM 9, indicate the total number of branches. Also, for each branch, indicate the name, address, economic activity, total employment (as of date of visit), year started operation (YSO) and contact information.

Total number of branches

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LN	Branches	MAIN ECONOMIC ACTIVITY	Total Employment	Year Started Operation	Contact Information
01	Name				
	Address				
02	Name				
	Address				
03	Name				
	Address				
04	Name				
	Address				
05	Name				
	Address				

Use additional sheet/s if necessary or request establishment's list of branches.

FILL-OUT THE SUCCEEDING ITEMS IF THE ESTABLISHMENT IS ENGAGED IN LIVESTOCK AND/OR POULTRY RAISING.

21. Maximum Farm Capacity

Maximum Farm Capacity refers to the maximum number of animals that the establishment can accommodate in the farm. There may be instances where the maximum farm capacity is greater than the total inventory. Indicate in the space provided the maximum animal capacity (heads/birds) of the farm as of the date of visit.

Animal Type	No. of Heads/Birds
1. Carabao	
2. Cattle	
3. Swine	
4. Goat	
5. Chicken, Broiler	

Animal Type	No. of Heads/Birds
6. Chicken, Layer	
7. Chicken, Native/Improved	
8. Chicken, Gamefowl (Breeding)	
9. Duck	
10. Other Animals, specify: _____	

22. Animal Inventory

Animal Inventory refers to the actual number of animals (in head/bird) present in the farm as of a specific reference date regardless of ownership. Indicate in the box provided the number of animals in the farm as of time of visit.

Animal Type	No. of Heads/Birds
1. Carabao	
1a. Caracow	
2. Cattle	
2a. Cow	
3. Swine	
4. Goat	
4a. Doe	

Animal Type	No. of Heads/Birds
5. Chicken, Broiler	
6. Chicken, Layer	
7. Chicken, Native/Improved	
8. Chicken, Gamefowl (Breeding)	
9. Duck	
10. Other Animals, specify: _____	

C E R T I F I C A T I O N

I hereby certify that the information in this form has been responded as accurately as the records of this establishment.

Signature Over Printed Name

Position Title/Designation

Telephone No./Fax No.

Date

REMARKS:

FOR PSA USE ONLY (Do Not Fill)

ACTIVITY	NAME	SIGNATURE	DATE
Field Office			
Enumerated / Field Edited by:			
Manual/Machine Processed by:			
Validated by:			

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Enter EA Code and BSN

THANK YOU FOR ACCOMPLISHING THIS FORM!