

AUTHORITY:
Section 2(c) of Commonwealth Act (CA) No. 591 authorizes the National Statistics Office to prepare for and undertake all censuses of population, agriculture, industry and commerce.

CONFIDENTIALITY:
Section 4 of CA No. 591 provides that all information furnished on this form are held STRICTLY CONFIDENTIAL.



2012 CENSUS OF AGRICULTURE AND FISHERIES

**CORE QUESTIONNAIRE
FOR FISHERIES**

NSCB Approval No. NSO – 1218-05
Expires on October 9, 2013

CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me in accordance with the instructions given by the National Statistics Office.

ENUMERATOR SIGNATURE OVER PRINTED NAME	TEAM SUPERVISOR SIGNATURE OVER PRINTED NAME	DSO/SCO SIGNATURE OVER PRINTED NAME	CO/RO/PO SUPERVISOR SIGNATURE OVER PRINTED NAME
DATE ACCOMPLISHED	DATE REVIEWED	DATE REVIEWED	DATE REVIEWED

SECTION A – FISHING OPERATION IDENTIFICATION

L SHEET OF SHEETS

PROVINCE

CITY/ MUNICIPALITY

BARANGAY

ENUMERATION AREA NO.

SEGMENT NO.

BUILDING SERIAL NO.

HOUSING UNIT SERIAL NO.

HOUSEHOLD SERIAL NO.

LINE NO. OF OPERATOR ITEM C1 (COLUMN 1) OF CAF FORM 2

TYPE OF OPERATOR ITEM C16 (COLUMN 16) OF CAF FORM 2

SECTION B – INTERVIEW RECORD

	VISIT 1	VISIT 2	VISIT 3
DATE OF VISIT MONTH : DAY	<input type="text"/>	<input type="text"/>	<input type="text"/>
INTERVIEW TIME BEGAN HOUR:MINUTE	<input type="text"/>	<input type="text"/>	<input type="text"/>
INTERVIEW TIME ENDED HOUR:MINUTE	<input type="text"/>	<input type="text"/>	<input type="text"/>
RESULT OF VISIT*	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Result of Visit Codes
 1 Interview completed 3 Refused 5 Household not around/ No respondent
 2 Interview partly completed 4 Postponed 6 Others, Specify _____

SUMMARY OF VISIT

TOTAL NUMBER OF VISITS RESULT OF FINAL VISIT* ENUMERATOR'S CODE

NAME OF RESPONDENT _____

LINE NO. OF RESPONDENT

SECTION C – NAME OF OPERATOR/HIRED MANAGER

COPY CORRECTLY THE NAME OF THE OPERATOR/HIRED MANAGER FROM ITEM C2 (COL. 2) OF CAF F2 **C2 AND C3 ARE TO BE ASKED ONLY IF THE TYPE OF OPERATOR IN SECTION A IS CODE 2 OR 3**

C1 NAME OF THE OPERATOR/HIRED MANAGER	C2 What is the name of the employer/ establishment?	C3 In what province and city/municipality is the address of the employer/ fishing establishment?	
LAST NAME _____	NAME OF EMPLOYER/ESTABLISHMENT _____	PROVINCE	CODE DO NOT FILL
FIRST NAME _____		CITY/MUNICIPALITY	CODE DO NOT FILL
Establishment Control Number (ECN) (DO NOT FILL, FOR NSO USE ONLY)			
<input type="text"/>			

SECTION D – LEGAL FORM OF ORGANIZATION

D1 From January to December 2012, did _____ operate the **fishing activity** as an individual proprietor, on partnership, as a corporation, as a cooperative, as a private institution, as a government corporation/institution or through other form of legal organization? WRITE X IN THE BOX

<input type="checkbox"/> 1 Individual proprietor	<input type="checkbox"/> 4 Cooperative	<input type="checkbox"/> 7 Others, Specify _____
<input type="checkbox"/> 2 Partnership	<input type="checkbox"/> 5 Other private institution	
<input type="checkbox"/> 3 Corporation	<input type="checkbox"/> 6 Government corporation/institution	

SECTION E – FISHERIES

E1 From January to December 2012, where did _____ perform the fishing operation, in marine waters or inland waters?

WRITE X IN THE BOX

- 1 Marine waters
 2 Inland waters

E2 From January to December 2012, how many fishing boat(s)/vessel(s) did _____ use in the operation (including raft)?

--	--

WRITE IN THE BOX THE NUMBER OF BOATS/VESSELS USED. WRITE "00" IF NO BOAT/VESSEL WAS USED. IF "00", GO TO ITEM E6.

ASK ITEMS E3 TO E5 FOR EACH FISHING BOAT/VESSEL USED. INCLUDE ALL FISHING BOATS/VESSELS USED REGARDLESS OF OWNERSHIP AND FREQUENCY OF USE.

BOAT/ VESSEL NO.	E3 What type of boat/vessel did _____ use? WRITE X IN THE BOX	E4 What was the gross tonnage of the boat/vessel used in the fishing operation? WRITE X IN THE BOX	E5 Does _____ own this boat/vessel? WRITE X IN THE BOX
01	<input type="checkbox"/> 1 Boat with engine and outrigger <input type="checkbox"/> 2 Boat with engine but without outrigger <input type="checkbox"/> 3 Boat without engine but with outrigger <input type="checkbox"/> 4 Boat without engine and outrigger <input type="checkbox"/> 5 Raft, GO TO ITEM E5	<input type="checkbox"/> 1 More than three (3) gross tons <input type="checkbox"/> 2 Three (3) gross tons or less	<input type="checkbox"/> 1 Owned <input type="checkbox"/> 2 Not owned
02	<input type="checkbox"/> 1 Boat with engine and outrigger <input type="checkbox"/> 2 Boat with engine but without outrigger <input type="checkbox"/> 3 Boat without engine but with outrigger <input type="checkbox"/> 4 Boat without engine and outrigger <input type="checkbox"/> 5 Raft, GO TO ITEM E5	<input type="checkbox"/> 1 More than three (3) gross tons <input type="checkbox"/> 2 Three (3) gross tons or less	<input type="checkbox"/> 1 Owned <input type="checkbox"/> 2 Not owned
03	<input type="checkbox"/> 1 Boat with engine and outrigger <input type="checkbox"/> 2 Boat with engine but without outrigger <input type="checkbox"/> 3 Boat without engine but with outrigger <input type="checkbox"/> 4 Boat without engine and outrigger <input type="checkbox"/> 5 Raft, GO TO ITEM E5	<input type="checkbox"/> 1 More than three (3) gross tons <input type="checkbox"/> 2 Three (3) gross tons or less	<input type="checkbox"/> 1 Owned <input type="checkbox"/> 2 Not owned
04	<input type="checkbox"/> 1 Boat with engine and outrigger <input type="checkbox"/> 2 Boat with engine but without outrigger <input type="checkbox"/> 3 Boat without engine but with outrigger <input type="checkbox"/> 4 Boat without engine and outrigger <input type="checkbox"/> 5 Raft, GO TO ITEM E5	<input type="checkbox"/> 1 More than three (3) gross tons <input type="checkbox"/> 2 Three (3) gross tons or less	<input type="checkbox"/> 1 Owned <input type="checkbox"/> 2 Not owned
05	<input type="checkbox"/> 1 Boat with engine and outrigger <input type="checkbox"/> 2 Boat with engine but without outrigger <input type="checkbox"/> 3 Boat without engine but with outrigger <input type="checkbox"/> 4 Boat without engine and outrigger <input type="checkbox"/> 5 Raft, GO TO ITEM E5	<input type="checkbox"/> 1 More than three (3) gross tons <input type="checkbox"/> 2 Three (3) gross tons or less	<input type="checkbox"/> 1 Owned <input type="checkbox"/> 2 Not owned

ARE THERE MORE THAN FIVE (5) BOATS/VESSELS USED IN THE FISHING OPERATION? 1 Yes, USE ADDITIONAL CAF FORM 5 2 No

REMARKS/COMPUTATION

E6 From January to December 2012, did _____ use fishing gears/ accessories/devices in the fishing operation?

1 Yes, FILL OUT THE MATRIX BELOW 2 No, END INTERVIEW FOR THIS OPERATOR AND GO TO THE NEXT OPERATOR/HOUSEHOLD

E7 What kind of gears/accessories/devices did _____ use?

E8 How many?

E7 Continuation - What kind of gears/accessories/devices did _____ use?

E8 Continuation - How many?

	KIND OF GEAR/ACCESSORY/DEVICE	CODE DO NOT FILL	NUMBER AS OF DECEMBER 31, 2012		KIND OF GEAR/ACCESSORY/DEVICE	CODE DO NOT FILL	NUMBER AS OF DECEMBER 31, 2012
1				6			
2				7			
3				8			
4				9			
5				10			

ARE THERE MORE THAN TEN (10) GEARS/ACCESSORIES/DEVICES USED IN THE FISHING OPERATION? 1 Yes, USE ADDITIONAL CAF FORM 5

2 No, END INTERVIEW FOR THIS OPERATOR AND GO TO THE NEXT OPERATOR/HOUSEHOLD