

Survey of taxi operators

Your response is anonymous — no personal information will be recorded with your response.
This questionnaire is made up of 12 questions. Please answer all relevant questions.

Date questionnaire completed: _____

1. Is it easier or harder to find taxi drivers now compared to 12 months ago? <i>(choose one)</i>					
<input type="checkbox"/> Easier now		<input type="checkbox"/> Harder now		<input type="checkbox"/> Same as before	
2. How many taxis do you operate? _____					
3. What area(s) do your taxi(s) operate in? <i>(tick all that apply)</i>					
<input type="checkbox"/> Sydney <input type="checkbox"/> Central Coast <input type="checkbox"/> Newcastle			<input type="checkbox"/> Wollongong <input type="checkbox"/> Other urban. Please indicate: _____ <input type="checkbox"/> Country NSW. Please indicate: _____		
4. This question relates to your taxi licences/licence plates . Please answer parts (a), (b), (c) and (d).					
a. Do you lease any of your licences (including from Transport for NSW)? <input type="checkbox"/> Yes <input type="checkbox"/> No					
b. If yes, who do you lease your licences from?					
<input type="checkbox"/> Transport for NSW <input type="checkbox"/> Directly from private owner <input type="checkbox"/> Through a network			<input type="checkbox"/> Through a licence broker <input type="checkbox"/> Other, please specify: _____		
c. If yes, what is the <u>annual</u> lease cost for each type of licence on average?					
\$_____ Standard taxi licence \$_____ Wheelchair accessible taxi (WAT) licence			\$_____ Peak availability licence		
d. Please indicate if the licence lease costs reported above include other services? <i>(tick all that apply)</i>					
<input type="checkbox"/> Lease of the vehicle <input type="checkbox"/> Network fees			<input type="checkbox"/> Insurance <input type="checkbox"/> Other, please specify: _____		
5. This question relates to your vehicles . Please answer parts (a), (b), (c) and (d).					
a. Please provide the information requested in the table below.					
	Standard taxi(s)	Premium taxi(s)	WAT(s)	Maxi taxi(s)	Hybrid
Number of taxis operated (No.)					
Average purchase cost of vehicle if owned (\$)					
Average cost of fit-out (if not included in the purchase price) (\$)					
Average age of vehicle at purchase (years)					
Expected life of vehicles as a taxi from date of purchase (years)					
Average distance per year as a taxi (Km)					
If known, average fare revenue per year (\$)					
Type of fuel (LPG/ULP/Diesel)					

b. Do you lease any of your vehicles ? <input type="checkbox"/> Yes <input type="checkbox"/> No						
c. If yes, what is the <u>annual</u> lease cost for each type of vehicle on average?						
\$ _____ Standard	\$ _____ WAT					
\$ _____ Premium	\$ _____ Maxi taxi (vehicle that carries 5-11 passengers but is not wheelchair accessible)					
\$ _____ Hybrid						
d. Please indicate if the vehicle lease costs reported above include other services? (<i>tick all that apply</i>)						
<input type="checkbox"/> Licence lease			<input type="checkbox"/> Insurance			
<input type="checkbox"/> Network fees			<input type="checkbox"/> Other, please specify: _____			
<p>6. Please indicate how many taxis you had on the road during each shift period in the last week. If you work a shift that covers part of the usual day shift (3am to 3pm) and part of the usual night shift (3pm to 3am), such as 10am to 10pm, please tick day or night depending on when most of the shift took place.</p> <p>Please report figures in the first four columns for vehicles operating with unrestricted time licences. Use the fifth column for all vehicles operating on time restricted licences, such as peak availability licences.</p>						
	Standard taxi(s)	Premium taxi(s)	WAT(s)	Maxi taxi(s)	Restricted time taxi(s)	Average pay-in per taxi
	Number	Number	Number	Number	Number	\$
Day shifts						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
Night shifts						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
7. In the space provided please indicate what insurance you have on your business/vehicles, the <u>annual</u> premium (including GST) and the excess on your policy.						
	Do you have this type of insurance?	What is the annual premium?	What is the excess on your policy?			
	Tick if yes	\$ (incl. GST)	\$			
Compulsory third party insurance (green slip)	<input type="checkbox"/>					
Comprehensive insurance	<input type="checkbox"/>					
Third party property (if not part of comprehensive)	<input type="checkbox"/>					
Workers' compensation	<input type="checkbox"/>					
General liability insurance (separate to your comprehensive policy)	<input type="checkbox"/>					

8. Please tick yes or no for the following questions. If you tick yes, please provide additional information if requested.			
Question	No	Yes	If "yes"...
Do you use bailee drivers?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you pay for fuel used by bailee drivers?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you pay for daily cleaning costs for your vehicle(s)?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you also drive your taxi? <i>If you drive please also fill out the driver survey</i>	<input type="checkbox"/>	<input type="checkbox"/>	How many hours each week on average? _____
Do you collect a percentage of fares (rather than a fixed amount from the driver)?	<input type="checkbox"/>	<input type="checkbox"/>	What share do you collect? _____%
9. This question is about administrative tasks related to your role as an operator. This includes organising drivers, paying bills, organising maintenance for the vehicle, obtaining insurance, completing Business Activity Statements etc. (Do not include administration related to your role as a driver if you also drive your cab.) Please answer all parts of this question — answer No if it is not relevant to your business.			
a) Do you spend your own time on administration? <input type="checkbox"/> No <input type="checkbox"/> Yes, hours per <u>week</u> ? _____	b) Do you pay staff to undertake administration? <input type="checkbox"/> No <input type="checkbox"/> Yes, staff costs per <u>year</u> (including overheads)? \$ _____	c) Do you pay other businesses for administration (such as accounting fees)? <input type="checkbox"/> No <input type="checkbox"/> Yes, costs per <u>year</u> (including GST)? \$ _____	
10. This question is about costs to access services provided by a network or cooperative. Please answer all parts of this question — answer No if not relevant to your business.			
a. What is the <u>annual</u> network fee (including GST) that you pay for each taxi that you operate? \$ _____			
b. Please indicate if the network fees reported above includes services other than standard network services (such as radio bookings, lost property etc.) (<i>tick all that apply</i>)			
<input type="checkbox"/> Lease of the vehicle <input type="checkbox"/> Lease of the licence		<input type="checkbox"/> Insurance <input type="checkbox"/> Other, please specify: _____	
11. This question is about repairs and maintenance costs for your vehicle(s). Do not include costs that were covered by insurance. Please answer all parts of this question — answer No if not relevant to your business.			
a) Do you spend time on repairs and maintenance yourself? <input type="checkbox"/> No <input type="checkbox"/> Yes, hours per <u>year</u> ? _____ hours	b) Do you pay staff to undertake repairs and maintenance? <input type="checkbox"/> No <input type="checkbox"/> Yes, <u>annual</u> staff costs (including overheads)? \$ _____	c) Do you pay other businesses to undertake repairs and maintenance (mechanics, parts etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes, <u>annual</u> expenses? (including GST): \$ _____	
12. How many permanent drivers (at least five shifts per week) work in your business (include yourself if you normally drive the taxi)? _____			

Thank you for completing this survey!

Please return this survey in the reply paid envelope provided or mail to:

The CIE
Taxi Survey Team
Reply Paid 87720
Sydney NSW 2000

If you are interested in discussing the survey or providing additional information, please provide contact details. These contact details will not be recorded with your survey responses.

Name:	
Telephone:	
Email:	