

SURVEY OF ELECTRICITY DISTRIBUTED

Questionnaire for the month of

↓ *When contacting Stats SA please quote this number*

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↑ *Please correct any errors in the above address label*

Purpose of the survey

The Survey of Electricity Distributed is a monthly survey covering a sample of undertakings which generate electricity. The information received is used to estimate key economic statistics used by the private and public sectors. The information is also used to calculate production indices in order to compile estimates of the Gross Domestic Product and its components, which are used, in turn, to monitor and develop government policy. The results of the survey will be published monthly in statistical release P4141 - Generation and Consumption of Electricity.

Collection authority

The information required is collected in accordance with regulations promulgated under section 16 of the Statistics Act, 1999 (Act No. 6 of 1999). Your co-operation is sought in completing and returning this questionnaire by the due date. The provision of the information sought is compulsory.

Confidentiality

According to section 17 of the Statistics Act, 1999 (Act No. 6 of 1999) your completed questionnaire remains confidential to Statistics South Africa (Stats SA).

Due date

Please complete this questionnaire and return it in the business reply service envelope or fax it to Stats SA not later than **ten days after the end** of the month concerned. It is recommended that you keep a copy for your use in case of a query.

Help available

If you have problems in completing this questionnaire, or feel that you may have difficulty in meeting the due date, please contact:

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|--------------------|---|-----------------|--|
| • Contact persons: | Dorcas Serapane Thabelo Maswanganyi | Postal address: | Statistics South Africa Private Bag X44 Pretoria 0001 |
| • Telephone number | (012) 310 8387 (012) 310 8228 | | |
| • Fax number | (012) 310 8664 | | |
| • e-mail address | DorcasS@statssa.gov.za ThabeloM@statssa.gov.za | | |

Person whom Stats SA should contact if any queries arise regarding this questionnaire.

| | | | |
|-------------------|--|------------------|--------|
| Name | | Telephone number | () |
| Position or title | | Fax number | () |
| Signature | | e-mail address | |
| Date | | | |

Please note

For this survey:

- The data furnished in the completed questionnaire must relate to the relevant electricity-generating undertaking.
- **The questionnaire must cover a period of one calendar month, ending at midnight.** Particulars must be submitted for the month concerned.

Part 1 - Electricity generated and available for distribution

Note

The information should refer to -

- the power station(s) of your undertaking

Kilowatt-hours

- | | |
|--|----------------------|
| 1. Electricity generated | <input type="text"/> |
| 2. Electricity consumed in power station(s) and energy storage systems | <input type="text"/> |
| 3. Net quantity of electricity generated and sent out from power station(s) (question 1 minus question 2) | <input type="text"/> |
| 4. Purchases outside the Republic of South Africa, e.g. Mozambique (please specify supplier) | <input type="text"/> |
| 5. "SCO, DWA and Assets" (Applicable to ESKOM only) | <input type="text"/> |

Abbreviations

- DWA - Department of Water Affairs
- CSO - Consumed in synchronous condenser operations

Note

- Assets - Consumed by generation asset storage stations

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|---|----------------------|
| 6. Sales to undertakings outside the Republic of South Africa, e.g. Mozambique (please specify) | <input type="text"/> |
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Part 2 - Comments

7. To minimise queries from Stats SA regarding the data provided, please provide comments on:

- Significant differences between monthly figures.
- Changes in business interests (e.g. takeover, merger, new location and expansions).
- Any other difficulties with the completion of the questionnaire.

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8. Please provide an estimate of the time taken to complete this questionnaire.

Reading *hours* *minutes*

Collecting information *hours* *minutes*

Completing the questionnaire *hours* *minutes*

9. Please indicate your preferred way of reporting the information contained in this questionnaire.

Mail

Fax Fax number

Internet e-mail address

Please ensure that the front page is completed.

Please retain a copy for your records.

Thank you for completing this questionnaire

For office use only

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