



BPS Statistics Indonesia
THE INFORMAL SECTOR SURVEY
(LISTING OF EMPLOYED PERSONS 10 YEARS OLD AND OVER)

CONFIDENTIAL

SECTION I. LOCATION IDENTIFICATION			
1	Province		<input type="text"/>
2	Regency/Municipality *)		<input type="text"/>
3	Sub-Regency		
4	Village *)		
5	Village Category	<i>Urban - 1 Rural - 2</i>	<input type="checkbox"/>
6	a. Census Block Code		
	b. Sub-Census Block Code		
7	Serial Number of Sampled Sakernas		<input type="text"/>
8	Serial Number of Sampled Household		<input type="text"/>
9	Name of Household Head		

SECTION II. ENUMERATORS AND SUPERVISORS			
1	ID Number of Enumerator :		<input type="text"/>
2	Name of Enumerator : _____	Enumeration Date :	Signature of Enumerator: _____
		_____	_____
3	Name of Supervisor: _____	Supervision Date :	Signature of Supervisor: _____
		_____	_____

SECTION III: INFORMAL SECTOR AND EMPLOYMENT

Serial No. (Copy from Section III, Column 1 of SAKERNAS)	Name of employed person (Copy from Section III, Column 2 of SAKERNAS)	Job Number	What is your occupation?	I S O C Codes	What is your employment status last week? (Enter code)	What is the nature of your employment? If Column 05= 1, 2, 3, and 7 go to column 14 (Enter code)	Ask column 07-13 if column 05 = 4, 5, and 6						
							Are the terms of your employment covered by a written contract? (Enter code)	Does your employer pay for your contribution to the pension fund? 1 – Yes 2 – No 3 – Don't know (Enter code)	Do you benefit from paid leave/ or from compensation instead of leave? 1 – Yes 2 – No 3 – Don't know (Enter code)	In case of incapacity to work due to health reasons, would you benefit from paid sick leave? 1 – Yes 2 – No 3 – Don't know (Enter code)	In case of a birth of a child, would you be given the opportunity to benefit from paid maternity/paternity leave? 1 – Yes 2 – No 3 – Don't know (Enter code)	If there is due cause, could your employment be terminated by your employer without advance notice? 1 – Yes 2 – No 3 – Don't know (Enter code)	In case of termination of employment (either initiated by you or your employer) would you receive the benefits and compensation specified in the existing labor laws? 1 – Yes 2 – No 3 – Don't know (Enter code)
(01)	(02)	(03)	(04)	(04a)	(05)	(06)	(07)	(08)	(09)	(10)	(11)	(12)	(13)

Codes for Column 05 (Employment Status)

- 1 – Own account worker
- 2 – Employer assisted by temporary workers/unpaid worker
- 3 – Employer assisted by permanent workers
- 4 – Employee
- 5 – Casual employee in agriculture
- 6 – Casual employee not in agriculture
- 7 – Unpaid workers

Codes for Column 06 (Nature of Employment)

- 1 - Permanent job/business
- 2 - Short-term or seasonal or casual work
- 3 - Worked for different employer on day-to-day or week-to-week

Codes for Column 07 (Contract)

- 1 - Yes, I have a written contract for long-term employment
- 2 – Yes, I have a written contract for short-term employment
- 3 – No, I only have a verbal contract
- 4 – No, I do not have a contract

Serial No. (Copy from Section III, Column 1 of SAKERNAS)	Job Number	Place of Work	Industry Enterprise		Legal Organization		Employment Size			Registration					Production		
		Where do you mainly undertake your work? (Enter code)	What is the kind of business/ industry of this work?	I S I C Codes	What is the legal status/ organization of the enterprise where you work? (Enter code)	Type of Enterprise	How many persons (including yourself) usually work in the place where you work/your business/your production unit?			How many are paid employees? Enter the total number	Under which form is the enterprise, in which you work, registered?					What is the type of tax payment by the enterprise? (Enter code)	Does the enterprise you own/where you work sell or barter some of its goods and/or services? 1 – Yes 2 – No (Enter code)
							Total	Male	Female		Tax agency 1 – Yes 2 – No 3 – Don't know (Enter code)	Business Registration, local govt 1 – Yes 2 – No 3 – Don't know (Enter code)	Business Registration, national govt 1 – Yes 2 – No 3 – Don't know (Enter code)	Social security agency 1 – Yes 2 – No 3 – Don't know (Enter code)			
(01)	(03)	(14)	(15)	(15a)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	

Codes for Column 14 (Place of work)

Fixed Premises

- 1 - At home with no special work space
- 2 - At home with work space inside/attached to the home
- 3 - Business premises with fixed location independent from home
- 4 - Farm or individual agricultural /subsidiary plot
- 5 - Home or workplace of the client

- 6 - Construction site
- 7 - Market, bazaar stall, trade fair
- 8 - Street pavement or highway with fixed post
- 9 - Employer's home
- 10 - Others (specify) _____
- No fixed premises**
- 11 - Transport vehicle
- 12 - No fixed location e.g. mobile, door-to-door; street w/o fixed post)

Codes for Column 16 (Legal Status/ Organization)

- 1 - Single proprietorship/individual business or farm
- 2 - Partnership
- 3 - Corporation (stock or non-stock; non-profit)
- 4 - Cooperative
- 5 - Others (specify) _____
- 6 - Don't know

Codes for Column 17 (Type of Enterprise)

- 1 - Factory or plantation
- 2 - Bank or insurance company
- 3 - Commercial/ restaurant/ service chain
- 4 - Construction company
- 5 - Hospital or school
- 6 - Engineering firm
- 7 - Farm, small workshop/ garage/shop, mobile
- 8 - Others (specify) _____

Codes for Column 26 (Type of Tax Payment)

- 1 - No tax payment
- 2 - Corporate tax
- 3 - Other types of taxes (e.g. lump-sum tax, special regime tax, petente, retribution)
- 4 - Don't know

Serial No. (Copy from Section III, Column 1 of SAKERNAS)	Name of employed person (Copy from Section III, Column 2 of SAKERNAS)	J o b N u m b e r	Bookkeeping and Accounting Practices		Do you have other jobs? If "YES" enter the number, go to page 2 Column 03 If "NO" enter "0", go to next employed person/ HH (Enter code)	TO BE FILLED-UP BY THE ENUMERATOR					What is the full name and address/location of your enterprise? <i>If place of work is in fixed business premise outside of housing unit, write complete name and address.</i> <i>Otherwise, write "Housing Unit".</i> <i>Go to next job of employed person/next employed person. If this is the last person or job, proceed to Section IV. After completing ISS Form 1, continue with ISS Form 2 interviews for each IS identified and marked in Column 35.</i> <i>(Write the name of the business (if applicable)/Name of operator)</i>		
			Ask Column 28 if Column 05 = 1, 2, 3, and 7 How does your enterprise/ business maintain its records or account? (Enter code)	Ask Column 29 if Column 05 = 4, 5, and 6 Do you get a payslip? (Enter code)		If the entry in Column 05 is either code 1, 2, or 3 enter "O". Otherwise enter "X".	If the entry in Column 16 is either code 1, 5, or 6, enter "O". Otherwise, enter "X".	If entry in Column 27 is code 1, enter "O". Otherwise enter "X".	If entry in Column 28 is either code 1, 2, or 3, enter "O". Otherwise enter "X".	Put a check mark (✓) if the entries in Columns 31 to 34 are all "O" and go to Column 36.		(31)	(32)
(01)	(02)	(03)	(28)	(29)	(30)	(31)	(32)	(33)	(34)	(35)	(36)	Name:	Address:
												Name:	Address:
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- Codes for Column 28 (Bookkeeping)**
- 1 - No written accounts kept
 - 2 - Informal records for personal use
 - 3 - Simplified accounting format required for tax payment
 - 4 - Detailed formal accounts (balance sheet)
 - 5 - Others (specify)

- Codes for Column 29 (Payslip)**
- 1 - Yes, with complete information
 - 2 - Yes, simple pay slip
 - 3 - No

SECTION IV. HOUSEHOLD EXPENDITURE

I.A. FOOD EXPENDITURE	(1)	Last Week (Rp) (2)	Last Month (Rp) (3)	12 Months Ago (Rp) (4)
1. Cereals				
a. Rice				
b. Other (corn, white flour, rice flour, corn flour, etc)				
2. Tuber (cassava, sweet potato, potato, dried cassava chip, taro, sago, etc)				
3. Fish/Shrimp				
a. Fresh fish				
b. Salted/preserved fish				
4. Meat (beef/buffalo/lamb/mutton/ham/chicken, entrails, liver, spleen, shredded dried meat, dried meat, etc)				
5. Egg And Milk				
a. Chicken/duck/quail egg				
b. Fresh milk, sweetened condensed milk, powdered milk, etc				
6. Vegetables (spinach, swamp cabbage, cucumber, carrot, string bean, green bean, onion, Chili, tomato, etc)				
7. Pulses (peanut/mungbean/ soybean/ kidney bean/ lima bean/ cashew nut, tofu, fermented soybean sauce, peanut expeller cake, etc)				
8. Fruits (orange, mango, apple, durian, rambutan, snakefruit, lanzon, pineapple, water melon, banana, papaya, etc)				
9. Oil and Fat (coconut oil,/frying oil, coconut butter, etc)				
10. Beverage Flavour (granulated sugar, palm sugar, tea, coffee, cocoa, syrup, etc)				
11. Spices (salt, candle nut, coriander, pepper, fish paste, soybean sauce, monosodium glutamate, etc)				
12. Other consumption				
a. Noodle, dry/wet noodle, white noodle, macaroni				
b. Other (crisp, crisp chip, etc)				
13. Prepared food and beverages				
a. Prepare food (bread, biscuits, wet cake, porridge, meat ball, mix vegetables, plate of rice and side dish, etc)				
b. Non alcoholic beverages (soft drink, syrup ice, lemonade, mineral water, etc),				
c. Alcoholic beverages (beer, wine, and other alcoholic drink)				
14. Tobacco and betel				
a. Cigarette (clove cigarette, menthol cigarette, cigar)				
b. Other (betel, tobacco, areca nut, etc)				
15. Total food (Item 1 to Item 14)				
I.B. NON FOOD EXPENDITURE				
16. Housing and household facility				
a. Rent, value of imputed rent, house rent estimate (own-home, free, official property, etc)				
b. Electricity bill, water, gas, kerosene, wood, etc				
c. Handphone pulse, public telephone, house telecommunication, post materials, etc				
17. Miscellaneous goods and services				
a. Soaps, cosmetics, hair treatment/face care, Kleenex, etc				
b. Transportation, gasoline, diesel fuel, lubricating oil				
c. Other services (sopir, housekeeping, hotel, etc)				
18. House maintenance and repairs				
19. Health expenses (hospital, puskesmas, practice doctor, traditional healer, medicines, etc)				
20. Education expenses (entry/registration fee, tuition, 'uang daftar ulang, scouts, handicraft, course fee, etc)				
21. Clothing, footwear, head gear (ready-made clothes, material clothes, shoes, hat, etc)				
22. Durable goods (household appliance, tools, kitchen ware, amusement tools, sport equipment, expensive jewellery/imitation jewellery, vehicles, umbrellas, watches, cameras, telephone installment expenses)				
23. Taxes, retribution, and insurance				
a. Taxes (building and land tax, vehicle tax)				
b. Retribution				
c. Health insurance				
d. Others (another insurance, traffic ticket, income tax, etc)				
24. Festivities and ceremonies without food (wedding, circumsion, b-day, religious festival, trad'l ceremony, etc)				
ITEMS 25 TO 29 ARE FOR ENUMERATORS ONLY				
25. Total Non Food (Last Month) (Item 16 – Item 17)				
26. Total Non Food (Last 12 Months) (Item 18 – Item 24)				
27. Average of monthly food expenditure (Item 15 x 30/7)				
28. Average of monthly non food expenditure (Last 12 months) (Item 26 column 4/ 12)				
29. Average of monthly household expenditure (Item 25 + Item 27 + Item 28)				
30. The largest income of household (from household member with the largest income)				
a. Main industry				
b. Status of worker 0. receiver income 1. employer 2. entrepreneur 3. Other				