

REPORT ON LOCAL BUSINESS ENABLING ENVIRONMENT SURVEY

Surveyor

No	Name of business	Full Name of the surveyed	Date of Survey	Time of Survey (from – to)	No of tel/ cel	Any Problem		Rezerve Business	Date of submission of questionnaire
						Yes	No		
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									

If you have encountered any problem, please mention them below per each case: 1- problems in understanding the questionnaire, 2- problems in the behaviour of the surveyed, 3- problems in arranging the survey.

