QUESTIONNAIRE 4

COMPETITION AND CONSUMER PROTECTION COMMISSION

MARKET INQUIRY INTO AUDIO-VISUAL (AV) SERVICE AGREEMENTS IN THE HOSPITALITY AND CONFERENCING SECTOR IN ZAMBIA

QUESTIONNAIRE FOR CONFERENCE SERVICE PROVIDERS WITHOUT IN-HOUSE AV SERVICES

Period covered: 1 January 2021 to 31 December 2025

INTRODUCTION

The Competition and Consumer Protection Commission is undertaking a sector-wide market inquiry into the provision of audio-visual services within Zambia's hospitality and conferencing sector.

The inquiry is examining the structure and functioning of the AV services market and, in particular, the relationships between conference facilities, hotels, AV service providers, event management companies and customers.

This questionnaire is directed at conference service providers that **do not provide AV services in-house** and therefore rely, to some extent, on independent AV service providers or other external arrangements.

The Commission is particularly interested in the manner in which external AV providers are selected, approved and accessed, the existence of preferred or exclusive arrangements, accreditation requirements, access charges, commissions, revenue-sharing arrangements, customer choice, bundling and other contractual or commercial practices that may affect competition.

The inquiry does not presume that any particular practice or agreement is anti-competitive. Respondents are therefore encouraged to explain the commercial, operational, technical, security or other rationale for the arrangements they have adopted.

PART A: RESPONDENT PROFILE

1. General information

Particular	**Response**
Registered name	
Trading name	
Registration number	
Year established	
Year conferencing operations commenced	
Principal business address	

Other locations/facilities	
Contact person	
Position	
Telephone	
Email	
Website	

2. Ownership structure

Please provide details of shareholders/owners holding **5% or more**.

Name	Type of ownership	Percentage	Other relevant business interests

3. Board and management composition

Name	Position	Date appointed	Shareholding	Other relevant business interests

4. Related interests

Does your organisation, or any shareholder, director or senior manager, have an ownership, management or other significant interest in:

☐ AV service providers
☐ Hotels/conference facilities
☐ Event management companies
☐ AV equipment suppliers/rental companies
☐ Other event-related businesses
☐ None
☐ Other: _____

If yes, provide details.

……

PART B: CONFERENCING ACTIVITIES AND MARKET POSITION

5. What conferencing/event facilities do you provide?

☐ Conference rooms
☐ Meeting rooms
☐ Exhibition space
☐ Training facilities
☐ Banqueting/event facilities
☐ Outdoor event facilities
☐ Other: _____

6. Please provide the following information for 2021-2025.

Indicator	**2021**	**2022**	**2023**	**2024**	**2025**
Total turnover (K)					
Conferencing revenue (K)					
Number of events hosted					
Number requiring AV services					
Number using external AV providers					
Number of AV providers used					
Number of conference facilities					

PART C: AV PROCUREMENT

7. How are AV services normally procured for events held at your facilities?

☐ Customer appoints AV provider directly
☐ Conference facility appoints provider on behalf of customer
☐ Event management company appoints provider
☐ Competitive quotation process
☐ Approved supplier list
☐ Preferred supplier arrangement
☐ Other: _____

8. How many AV providers did your organisation use during each year from 2021-2025?

Year	**Number of AV providers**
2021	
2022	
2023	
2024	

2025	

9. Please identify your five most frequently used providers.

AV provider	Period used	Approx. number of events	Nature of relationship

PART D: CONTRACTUAL RELATIONSHIPS

10. Did your organisation have any formal or informal contractual/commercial relationship with AV providers between 2021 and 2025?

☐ Yes
☐ No

If yes, indicate the type:

☐ Preferred-provider agreement
☐ Exclusive agreement
☐ Approved supplier arrangement
☐ Framework agreement
☐ Concession
☐ Revenue-sharing arrangement
☐ Commission arrangement
☐ Referral arrangement
☐ Informal understanding
☐ Other: _____

11. Did any agreement contain provisions concerning:

Provision	**Yes**	**No**	**N/A**
Exclusive provision of AV services	☐	☐	☐
Preferred access to customers	☐	☐	☐
Restriction on other AV providers	☐	☐	☐
Minimum business volumes	☐	☐	☐
Venue/customer referrals	☐	☐	☐
Commission	☐	☐	☐
Revenue sharing	☐	☐	☐
Access fees	☐	☐	☐
Accreditation requirements	☐	☐	☐

Other preferential treatment	☐	☐	☐

PART E: ACCESS TO THE FACILITY

12. What requirements must an external AV provider meet before providing services at your facility?

☐ Registration
☐ Accreditation
☐ Technical certification
☐ Insurance
☐ Security clearance
☐ Minimum equipment requirements
☐ Staff qualification requirements
☐ Payment of access fee
☐ Prior approval
☐ Other: _____

13. Are these requirements applied equally to all AV providers?

☐ Yes
☐ No
☐ Don't know

If no, explain.

……

14. Do you levy any fees or charges on external AV providers?

☐ Yes
☐ No

If yes:

Charge	**Amount/percentage**	**Basis**	**Purpose**

15. Who ultimately bears the cost indicated above?

☐ AV provider
☐ Customer

☐ Event manager
☐ Shared
☐ Other

PART F: CUSTOMER CHOICE

16. Can a customer freely choose an AV provider other than the provider normally used by your facility?

☐ Yes, without conditions
☐ Yes, subject to approval
☐ Yes, subject to accreditation
☐ Yes, but additional charges apply
☐ Only from an approved list
☐ No
☐ Other: _____

17. During 2021-2025, have customers ever requested to use an AV provider that your facility did not normally use?

☐ Frequently
☐ Sometimes
☐ Rarely
☐ Never

18. When the above occurred, what was the outcome?

☐ Provider was allowed
☐ Provider was approved subject to conditions
☐ Provider was refused
☐ Customer was directed to an alternative provider
☐ Customer changed venue
☐ Other: _____

PART G: COMPETITIVE EFFECTS

19. What are the principal reasons your organisation does not provide AV services in-house?

☐ Cost of equipment
☐ Lack of technical expertise
☐ Insufficient demand
☐ Preference for specialist providers
☐ Existing supplier arrangements
☐ Operational considerations

☐ Quality considerations
☐ Other: _____

20. What factors influence your choice of external AV providers?

Rank your **three most important** factors.

Factor	**Rank**
Price	
Quality	
Reliability	
Availability	
Technical capability	
Existing relationship	
Customer preference	
Venue requirements	
Reputation	
Commission/revenue arrangement	
Other	

21. Have contractual or commercial arrangements with AV providers affected the ability of other AV providers to compete for events at your facility?

☐ Significantly
☐ Moderately
☐ Slightly
☐ Not at all
☐ Don't know

Please explain and provide examples where possible.

22. Have you observed any of the following effects?

☐ Higher AV prices
☐ Lower prices
☐ Reduced supplier choice
☐ Improved service quality
☐ Reduced service quality
☐ Better availability
☐ Reduced innovation
☐ Greater investment by AV providers
☐ Reduced investment
☐ No material effect
☐ Other: _____

PART H: MARKET ASSESSMENT

23. In your view, what are the principal barriers preventing an AV provider from obtaining business at conference facilities?

☐ Exclusive agreements
☐ Preferred-provider arrangements
☐ Accreditation
☐ Access charges
☐ Existing relationships
☐ Customer loyalty
☐ Technical requirements
☐ Equipment requirements
☐ Reputation
☐ Price
☐ Other: _____

24. What changes, if any, would improve competition in the AV services market while preserving legitimate venue requirements relating to security, quality, technical standards and operational efficiency?

Response:

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……
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SCHEDULE A: AV PROVIDER CONTRACT REGISTER

Provider	Agreement type	Start	End	Exclusive/preferred	Fees	Revenue sharing	Restrictions

SCHEDULE B: DOCUMENTS

Please attach:

☐ AV contracts
☐ Preferred-provider agreements
☐ Supplier agreements
☐ Accreditation policies
☐ Venue access policies
☐ Price lists
☐ Commission/revenue-sharing agreements
☐ Customer terms and conditions
☐ Procurement procedures
☐ Other relevant documents

DECLARATION

I certify that the information provided in this questionnaire and accompanying schedules is, to the best of my knowledge and belief, complete and accurate.

Name: _____

Position: _____

Organisation: _____

Signature: _____

Date: _____