Form approved 0923-0048 Exp Date: 03/31/2019

## Attachment 4:

## Questionnaire for the Dimock Water Exposure Investigation OMB #0923-0048

Name of Surveyor:

Date:

I just want to repeat my name is #######. Now since we have your permission, we would now like to ask you some questions.

## Water History:

- What is the main source of drinking water in your home?Private Well
  - City or County (public)
  - Spring
  - Pond
  - Cistern
  - Supplied Bulk
  - Bottled
  - Other: (specify)
  - Don't know
  - Refused

ATSDR estimates the average public reporting burden for this collection of information as 20 minutes per response, including the time for

information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this

collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office,

reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and

reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of

1600 Clifton Roa			
NE MS D-74 Att	NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0923-0048).		
2. Ha	the water from your private well ever been tested at any time other than by EPA in 2012?		
<b>Δ.</b> Πd	s the water from your private wen ever been tested at any time other than by EPA in 2012:		
	Yes		
	-		
	No		
	-		
	_ Don't know		

Refused

3.

4.

If "yes" do you know the date it was tested who did the testing, whether it was tested for bacterial and/or chemical contamination, and the results?

What is your main source of water for cooking? Private Well		
	City or County (public)	
	Spring	
	Pond	
	Cistern	
	Supplied Bulk	
	Bottled	
	Other: (specify)	
	Don't know	
	Refused	
What is	s the main source of water for bathing and showering?	
	Private Well	
	City or County (public)	
	Spring	

Pond

- Cistern
- Supplied Bulk
- Bottled
- Other: (specify)
- Don't know
- Refused
- 5. What is the main source of water for pools and/or hot tubs (to include "kiddie" or wading pools)?
  - Private Well
  - City or County (public)
  - Spring
  - Pond
  - Cistern
  - Supplied Bulk
  - Bottled
  - Other: (specify)
  - Don't know
  - Refused
- 6. List all of the water treatment devices for your drinking water or water used for mixing drinks (e.g. baby formula, juices)
  - None

- Charcoal Filter/Granular Activated
- Ceramic Filter
- Reverse Osmosis
- Water Softener
- Distillation

- Sediment Filter
- Aerator
- Water Filter system (e.g. Brita, Pur, etc.)
- Iron Removal System
- Chlorinator
- Don't know
- Refused
- 7. List all of the water treatment devices for your water used for cooking.
  - None
  - Boil water
  - Charcoal Filter/Granular Activated
  - Ceramic Filter
  - Reverse Osmosis
  - Water Softener
  - Distillation
  - Sediment Filter
  - Aerator
  - Water Filter system (e.g. Brita, Pur, etc.)
  - Iron Removal System
  - Chlorinator
  - Don't know
  - Refused
- 8. List all of the water treatment devices for your bathing and showering water.
  - None
  - Charcoal Filter/Granular Activated

- Ceramic Filter **Reverse Osmosis** Water Softener Boil water Distillation Sediment Filter Aerator Water Filter system (e.g. Brita, Pur, etc.)
  - Iron Removal System
  - Chlorinator
  - Don't know
  - Refused
- 9. If you use filters, do you maintain them according to the manufacturers recommendations or if you have a whole house filter do you have a contractor maintain them?
  - YesNoDon't know
  - Refused
- 10. If you use a Water Softener, do you regularly maintain it?
  - Yes
  - No
  - Don't know
  - Refused
- 11. If yes, what is the brand and age of the Water Softener?

Brand:
Age:



Refused

12. Do you know the depth of your water well or have any records of the well history of your private water well?

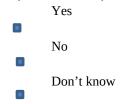
		Yes	
	۰	No	
		Don't know	
		Refused	
	a.	If yes, please provide details (type, age, depth of	well)
13.	Do you	obtain bulk water for drinking or household use?	
		Yes	

No	

Don't know 

If you answered "yes", how long have you used bulk water?\_\_\_\_\_ a.

- What is the source of your bulk water?\_\_\_\_\_ b.
- c. What do you use bulk water for (e.g., drinking, cooking, showering, laundry, etc.)
- d. Do you have any comments regarding the quality and taste of the bulk water?
- 14. Do you know of any natural gas extraction activities currently occurring near your home?



15. If yes, please explain

16. Have you ever had your home tested for radon gas? If so, what was the result?

	Yes
	No
	Don't know
	<b>l Information:</b> First name (please spell):
2.	Last name (please spell):
3.	Middle initial:
4.	How long have you lived at this address?
	4 year
	<b>1-10</b> years

- >10 years
- Don't know
- Refused

## **Demographic Information:**

- 1. Gender \_\_\_\_\_
- 2. Age at time of survey \_\_\_\_\_
  - Refused
- 3. Race :
  - American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White Refused
- 4. Ethnicity:

Hispanic or Latino

- Not Hispanic or Latino
- 5. How many people live here fulltime? \_\_\_\_\_ (if more than 1 person complete General Information question 4 and Demographic Information for each resident)

NOTE: Surveyor/Sampling team will also consult with home owner to diagram the location of a water supply well, septic system, home heating oil tank, and natural gas well pads at the residence of in the immediate vicinity of the property.