**2015 RECS Household Questionnaire**

**July 13, 2015**

**SECTION A: STRUCTURAL CHARACTERISTICS**

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| CARI (New) *CARI* | | | | | | |
| ASK | All respondents | | | | | |
| Some parts of this interview will be recorded for quality control purposes. I'd like to continue now unless you have any questions.  1 Gives consent to record interview  0 Does not give consent to record interview | | | | | | |
| NEXT | CONFIRM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| CONFIRM *CONFIRM* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you haven't already, confirm you are at the correct address. Record your answer below.  1 Correct address as listed  2 Mostly correct address, needs updating  0 Not at correct address | | | | | | |
| NEXT | If CONFIRM=1: INTHUQ  If CONFIRM=2: CSTREET  If CONFIRM=0: This is not the housing unit you are supposed to be interviewing. Excuse yourself and terminate the interview. | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| CSTREET *ConfirmStreet* | | | | | | |
| ASK | If CONFIRM=2 | | | | | |
| Interviewer Task: You are at the correct housing unit to be interviewed but there is a difference between the listed address and the actual address. Enter the actual housing unit address and continue the interview.  Record the street address here.  Open response | | | | | | |
| NEXT | CCITY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| CCITY *ConfirmCity* | | | | | | |
| ASK | If CONFIRM=2 | | | | | |
| Interviewer Task: Record the city here.  Open response | | | | | | |
| NEXT | CSTATE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CSTATE *ConfirmState* | | | | | | |
| ASK | If CONFIRM=2 | | | | | |
| Interviewer Task: Record the state here.  Open response | | | | | | |
| NEXT | CZIP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CZIP *ConfirmZipCode* | | | | | | |
| ASK | If CONFIRM=2 | | | | | |
| Interviewer Task: Record the zip code here.  Open response | | | | | | |
| NEXT | INTHUQ | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| INTHUQ *INTTypeOfHome* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: Record your observation of the housing unit type.  2 Single-family detached house (a house detached from any other house)  3 Single-family attached house (a house attached to one or more houses)  4 Apartment building with 2 - 4 units  5 Apartment building 5 or more units  1 Mobile home | | | | | | |
| NEXT | If INTHUQ in(4,5): APTFLOOR  If INTHUQ=3: SFAEND  Else: PRIMRES | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| APTFLOOR (New) *APTFLOOR* | | | | | | |
| ASK | If INTHUQ in(4,5) | | | | | |
| Interviewer Task: Record what floor this apartment is on. If this is a basement apartment, enter "0."  0 - 99 | | | | | | |
| NEXT | APTINOUT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| APTINOUT (New) *APTINOUT* | | | | | | |
| ASK | If INTHUQ in(4,5) | | | | | |
| Interviewer Task: Record whether the main entrance to this apartment opens to an enclosed hallway, or to the outside.  1 Enclosed hallway  2 Outside | | | | | | |
| NEXT | PRIMRES | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SFAEND (New) *SFAEND* | | | | | | |
| ASK | If INTHUQ=3 | | | | | |
| Interviewer Task: Record whether this single-family attached home is an end unit.  1 Yes  0 No | | | | | | |
| NEXT | PRIMRES | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PRIMRES *PRIMRES* | | | | | | |
| ASK | All respondents | | | | | |
| I’d like to start with some general questions about your home.  Your primary residence is the home where you live for most of the year. Is this your primary residence?  1 Yes  0 No | | | | | | |
| NEXT | If PRIMRES=0: PRIMRESA  If PRIMRES=1: CNFRMHUQ | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PRIMRESA *PRIMRESA* | | | | | | |
| ASK | If PRIMRES=0 | | | | | |
| Is this the primary residence for anyone else who currently lives in this home?  1 Yes  0 No | | | | | | |
| NEXT | If PRIMRESA=1: Complete interview with primary resident when they are available  If PRIMRESA=0: This housing unit is out of scope. Excuse yourself and terminate the interview. | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CNFRMHUQ *ConfirmHUQ* | | | | | | |
| ASK | If PRIMRES=1 | | | | | |
| My observation is that this residence is a [FILL: INTHUQ]. Do you agree with my observation?  1 Yes  0 No | | | | | | |
| NEXT | If CNFRMHUQ=0: ALTHUQ  If CNFRMHUQ=1: KOWNRENT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| ALTHUQ *HHolderDescription* | | | | | | |
| ASK | If CNFRMHUQ=0 | | | | | |
| Which of the following do you believe best describes this home? Is it a…  2 Single-family detached house,  3 Single-family attached house,  4 an Apartment building with 2 - 4 units,  5 an Apartment building 5 or more units, or  1 a Mobile home? | | | | | | |
| NEXT | REVHUQ | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| REVHUQ *ReviseHUQ* | | | | | | |
| ASK | If CNFRMHUQ=0 | | | | | |
| Interviewer Task: If you agree with the householder’s description, record "Use householder’s description" below, and use the alternative as the type of housing unit throughout the remainder of the interview.  If you disagree with the householder’s description, record "Use RECS definition" below and tell the householder that: Although you have described this home as a [FILL: ALTHUQ], the definitions given to me by the Department of Energy describe this home as a [FILL:INTHUQ]. I have recorded your description, but in order to be consistent, I will need to refer to this home as a [FILL: INTHUQ] for the rest of the survey.  1 Use householder's definition  2 Use RECS definition | | | | | | |
| NEXT | KOWNRENT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TYPEHUQ *TypeOfHome* | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| KOWNRENT *OwnOrRent* | | | | | | |
| ASK | All respondents | | | | | |
| Is this [If TYPEHUQ=1,2,3: home] [If TYPEHUQ=4,5: apartment]…  1 Owned or being bought by someone in your household,  2 Rented, or  3 Occupied without payment of rent? | | | | | | |
| NEXT | KOWNCOND | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KOWNCOND *CondoOrCoop* | | | | | | |
| ASK | All respondents | | | | | |
| Is this home part of a condominium or cooperative?  1 Yes  0 No | | | | | | |
| NEXT | If KOWNCOND=1: CONDCOOP  Else: YEARMADE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CONDCOOP *WhichCondoOrCoop* | | | | | | |
| ASK | If KOWNCOND=1 | | | | | |
| Which is it, a condominium or cooperative?  1 Condominium  2 Cooperative | | | | | | |
| NEXT | YEARMADE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| YEARMADE (Changed from 2009) *YearBuilt* | | | | | | |
| ASK | All respondents | | | | | |
| In what year was this structure built? Your best estimate is fine.  1600 - 2015 | | | | | | |
| NEXT | If YEARMADE in(-8,-9): YEARMADERANGE  Else: OCCUPYY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| YEARMADERANGE (Changed from 2009) *YearBuiltEst* | | | | | | |
| ASK | If YEARMADE in(-8,-9) | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Although you do not know the exact year this structure was built, it is helpful to have an estimate. About when was this structure built?  1 Before 1950  2 1950 to 1959  3 1960 to 1969  4 1970 to 1979  5 1980 to 1989  6 1990 to 1999  7 2000 to 2009  8 2010 to 2015 | | | | | | |
| NEXT | OCCUPYY | | | | | |
| Derived | | Yes | **Show Card** | Yes | **CARI** | Yes |

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| OCCUPYY (Changed from 2009) *YearMovedIn* | | | | | | |
| ASK | All respondents | | | | | |
| In what year did your household move in? Your best estimate is fine.  1600 - 2015 | | | | | | |
| NEXT | If OCCUPYY in(-8,-9): OCCUPYYRANGE  Else if OCCUPYY in(2014,2015): OCCUPYM  Else: VACANT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OCCUPYYRANGE (Changed from 2009) *YearMovedInEst* | | | | | | |
| ASK | If OCCUPYY in(-8,-9) | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Although you do not know the exact year your household moved in, it is helpful to have an estimate. About when did your household move in?  1 Before 1950  2 1950 to 1959  3 1960 to 1969  4 1970 to 1979  5 1980 to 1989  6 1990 to 1999  7 2000 to 2009  8 2010 to 2015 | | | | | | |
| NEXT | VACANT | | | | | |
| Derived | | Yes | **Show Card** | Yes | **CARI** |  |

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| OCCUPYM (Changed from 2009) *MonthMovedIn* | | | | | | |
| ASK | If OCCUPYY in(2014,2015) | | | | | |
| In what month of that year did your household move in?  1 January  2 February  3 March  4 April  5 May  6 June  7 July  8 August  9 September  10 October  11 November  12 December | | | | | | |
| NEXT | VACANT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| VACANT (New) *VACANT* | | | | | | |
| ASK | All respondents | | | | | |
| During the last year, was your home vacant for one or more months?  1 Yes  0 No | | | | | | |
| NEXT | If TYPEHUQ=4: CONVERSION  If TYPEHUQ=5: NUMFLRS  If TYPEHUQ=1: TYPEHUQ4  If TYPEHUQ in(2,3): CELLAR, CRAWL, CONCRETE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CONVERSION (Changed from 2009) *OriginallyApt* | | | | | | |
| ASK | If TYPEHUQ=4 | | | | | |
| Was your building originally designed and built as an apartment building or was it converted into an apartment building?  1 Built as an apartment building  2 Converted into an apartment building | | | | | | |
| NEXT | NUMAPTS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LOOKLIKE *MoreLikeApt* | | | | | | |
| ASK |  | | | | | |
| Deleted | | | | | | |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMFLRS *NumberOfFloors* | | | | | | |
| ASK | If TYPEHUQ=5 | | | | | |
| How many floors are in this apartment building?  1 - 95 | | | | | | |
| NEXT | NUMAPTS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMAPTS (Changed from 2009) *NumberOfAptUnits* | | | | | | |
| ASK | If TYPEHUQ in(4,5) | | | | | |
| Approximately how many apartment units are in this building?  2 - 995 | | | | | | |
| NEXT | STUDIO | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TYPEHUQ4 *AddtnsToMobileHome* | | | | | | |
| ASK | If TYPEHUQ=1 | | | | | |
| Does your mobile home have any permanently attached structures, such as a room or porch that is enclosed from the wind and rain, that weren't part of the mobile home when it was first manufactured?  1 Yes  0 No | | | | | | |
| NEXT | BEDROOMS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CELLAR, CRAWL, CONCRETE *Basement, CrawlSpace, ConcreteSlab* | | | | | | |
| ASK | If TYPEHUQ in(2,3) | | | | | |
| Now think about the foundation of your home. Is any part of your home over a…  Mark all that apply.  Basement, (CELLAR)  Crawl space, or (CRAWL)  Concrete slab? (CONCRETE) | | | | | | |
| NEXT | If CELLAR=1: BASEFIN  Else: ATTIC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| BASEFIN (Changed from 2009) *FinishedBsmnt* | | | | | | |
| ASK | If CELLAR=1 | | | | | |
| For this survey, a “finished” basement has finishing materials on the floor, ceiling, and walls. Is all, some, or none of your basement finished?  1 All  2 Some  3 None | | | | | | |
| NEXT | ATTIC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ATTIC *HaveAnAttic* | | | | | | |
| ASK | If TYPEHUQ in(2,3) | | | | | |
| An attic is an area directly below the roof, accessible by stairs, with space for you to stand upright and easily move about. Does your home have an attic?  1 Yes  0 No | | | | | | |
| NEXT | If ATTIC=1: ATTICFIN  Else: STORIES | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ATTICFIN (Changed from 2009) *AtticFinished* | | | | | | |
| ASK | If ATTIC=1 | | | | | |
| For this survey, a “finished” attic has finishing materials on the floor, ceiling, and walls. Is all, some, or none of your attic finished?  1 All  2 Some  3 None | | | | | | |
| NEXT | STORIES | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| STUDIO *StudioApt* | | | | | | |
| ASK | If TYPEHUQ in(4,5) | | | | | |
| Is your apartment a one-room efficiency or studio apartment?  1 Yes  0 No | | | | | | |
| NEXT | If STUDIO=1: NCOMBATH  Else: ONEFLRAPT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ONEFLRAPT *FloorsinApt* | | | | | | |
| ASK | If STUDIO=0 | | | | | |
| Is the living space of your entire apartment unit on a single level?  1 Yes  0 No | | | | | | |
| NEXT | If ONEFLRAPT=0: NAPTFLRS  Else: BEDROOMS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| NAPTFLRS *LevelInApt* | | | | | | |
| ASK | If ONEFLRAPT=0 | | | | | |
| How many levels does your apartment unit have?  2 - 9 | | | | | | |
| NEXT | BEDROOMS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| STORIES *NumOfStories* | | | | | | |
| ASK | If TYPEHUQ in(2,3) | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Not including basements or attics, how many stories does your home have?  10 One story  20 Two stories  31 Three stories  32 Four or more stories  40 Split-level  50 Some other type | | | | | | |
| NEXT | If STORIES=50: STORIESFU  Else: BEDROOMS | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| STORIESFU *NumOfStoriesFU* | | | | | | |
| ASK | If STORIES=50 | | | | | |
| Could you describe the building?  Open response | | | | | | |
| NEXT | BEDROOMS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| BEDROOMS (Changed from 2009) *NumBedRooms* | | | | | | |
| ASK | If STUDIO ne 1 | | | | | |
| How many bedrooms do you have in your home? [If BASEFIN in(1,2) or ATTICFIN in(1,2): Include bedrooms in finished attics or finished basements.]  0 - 20 | | | | | | |
| NEXT | NCOMBATH | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| NCOMBATH (Changed from 2009) *NumFullBaths* | | | | | | |
| ASK | All respondents | | | | | |
| A full bathroom is one that has a sink with running water, a toilet, and either a bathtub or shower. How many full bathrooms do you have in your home? [If BASEFIN in(1,2) or ATTICFIN in(1,2): Include bathrooms in finished attics or finished basements.]  0 - 9 | | | | | | |
| NEXT | NHAFBATH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NHAFBATH (Changed from 2009) *NumHalfBaths* | | | | | | |
| ASK | All respondents | | | | | |
| A half-bathroom is one that has either a toilet or a bathtub or a shower. How many half bathrooms do you have? [If BASEFIN in(1,2) or ATTICFIN in(1,2): Include bathrooms in finished attics or finished basements.]  0 - 9 | | | | | | |
| NEXT | OTHROOMS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OTHROOMS *NumOtherRooms* | | | | | | |
| ASK | If STUDIO ne 1 | | | | | |
| Now think about other rooms in your home besides bedrooms and bathrooms. Not including unfinished areas, hallways, and closets, how many other rooms are there in your home?  1 - 20 | | | | | | |
| NEXT | If TYPEHUQ in(1,2,3): PRKGPLC1  If TYPEHUQ in(4,5): WALLTYPE | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| PRKGPLC1 *PlaceToPark* | | | | | | |
| ASK | If TYPEHUQ in(1,2,3) | | | | | |
| Does your home have a garage that is attached to or part of your home?  1 Yes  0 No | | | | | | |
| NEXT | If PRKGPLC1=1: SIZEOFGARAGE  Else: PRKGPLC2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SIZEOFGARAGE *SizeOfGarage* | | | | | | |
| ASK | If PRKGPLC1=1 | | | | | |
| What is the size of that attached garage? Is it a…  1 One-car garage,  2 Two-car garage, or  3 Three-or-more-car garage? | | | | | | |
| NEXT | GARGLOC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| GARGLOC *LocationOfGarage* | | | | | | |
| ASK | If PRKGPLC1=1 | | | | | |
| Is the garage attached to or part of the [If CELLAR=1: basement,] first floor, or some other floor of the home?  1 Part of basement  2 Part of first floor  3 Some other floor | | | | | | |
| NEXT | WALLTYPE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PRKGPLC2 *DetachedGarage* | | | | | | |
| ASK | If PRKGPLC1=0 | | | | | |
| Does your home have a detached garage or covered carport?  1 Yes  0 No | | | | | | |
| NEXT | If PRKGPLC2=1: SIZEOFDETACH  Else: WALLTYPE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SIZEOFDETACH *DetachedGarageSize* | | | | | | |
| ASK | If PRKGPLC2=1 | | | | | |
| Which does your home have? Is it a…  1 One-car garage,  2 Two-car garage, or  3 Three-or-more-car garage, or  4 Carport? | | | | | | |
| NEXT | WALLTYPE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WALLTYPE (Changed from 2009) *OutsideWall* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What is the major outside wall material for this housing unit?  1 Brick  2 Wood  3 Siding  4 Stucco  5 Shingle (composition)  6 Stone  7 Concrete or concrete block  9 Other | | | | | | |
| NEXT | If WALLTYPE=9: WALLTYPEFU  Else if TYPEHUQ in(1,2,3,4): ROOFTYPE  Else: HIGHCEIL | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| WALLTYPEFU *OutsideWallFU* | | | | | | |
| ASK | If WALLTYPE=9 | | | | | |
| Could you tell me what that other material is?  Open response | | | | | | |
| NEXT | If TYPEHUQ in(1,2,3,4): ROOFTYPE  Else: HIGHCEIL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ROOFTYPE (Changed from 2009) *RoofType* | | | | | | |
| ASK | If TYPEHUQ in(1,2,3,4) | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What is the major roofing material on this housing unit?  1 Ceramic or clay tiles  2 Wood shingles/shakes  3 Metal  4 Slate or synthetic shake  5 Shingles (composition or asphalt)  7 Concrete tiles  9 Other | | | | | | |
| NEXT | If ROOFTYPE=9: ROOFTYPEFU  Else if TYPEHUQ=1: SLDDRS  Else: HIGHCEIL | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| ROOFTYPEFU *RoofTypeFU* | | | | | | |
| ASK | If ROOFTYPE=9 | | | | | |
| Could you tell me what that other material is?  Open response | | | | | | |
| NEXT | If TYPEHUQ=1: SLDDRS  Else: HIGHCEIL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HIGHCEIL *AnyHighCeilings* | | | | | | |
| ASK | If TYPEHUQ in(2,3,4,5) | | | | | |
| Most ceilings are about 8 feet high which is about a foot higher than a standard door. Are any of the ceilings in your home unusually high?  1 Yes  0 No | | | | | | |
| NEXT | If HIGHCEIL ne 0: CATHCEIL  Else: SLDDRS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CATHCEIL *AnyCathedralCeilings* | | | | | | |
| ASK | If HIGHCEIL ne 0 | | | | | |
| Cathedral ceilings are usually in rooms on the main floor and go all the way up to the roof. Are any of the ceilings in your home cathedral ceilings?  1 Yes  0 No | | | | | | |
| NEXT | SLDDRS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SLDDRS (Changed from 2009) *SldingGlassDoors* | | | | | | |
| ASK | All respondents | | | | | |
| Does your home have any sliding glass doors?  1 Yes  0 No | | | | | | |
| NEXT | If SLDDRS=1: DOOR1SUM  Else: WINDOWS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| DOOR1SUM *NumSldingDoors* | | | | | | |
| ASK | If SLDDRS=1 | | | | | |
| How many sliding glass doors does your home have? Count each pair of sliding glass doors as one door.  0 - 10 | | | | | | |
| NEXT | WINDOWS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WINDOWS (Changed from 2009) *NumOfWindows* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. About how many windows does your home have?  10 1 to 2  20 3 to 5  30 6 to 9  41 10 to 15  42 16 to 19  50 20 to 29  60 30 or more | | | | | | |
| NEXT | TYPEGLASS | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| TYPEGLASS *TypeOfWindowGlass* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which picture best describes the type of glass in most of the windows in your home? Do not consider storm windows.  1 Single-pane glass  2 Double-pane glass  3 Triple-pane glass | | | | | | |
| NEXT | WINFRAME | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| WINFRAME (New) *WINFRAME* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What frame material is used for most of the windows in your home?  1 Wood  2 Metal (aluminum)  3 Vinyl  4 Composite  5 Fiberglass  9 Some other material | | | | | | |
| NEXT | NEWGLASS | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| NEWGLASS *ReplaceGlass* | | | | | | |
| ASK | All respondents | | | | | |
| How many of the windows in your home have been replaced since your household moved in? Is it…  1 All of the windows,  2 Some of the windows, or  3 None of the windows? | | | | | | |
| NEXT | ADQINSUL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ADQINSUL *HowWellInsulated* | | | | | | |
| ASK | All respondents | | | | | |
| Regarding the insulation in your home, overall, would you say that your home is...  1 Well insulated,  2 Adequately insulated, or  3 Poorly insulated?  4 No insulation (if volunteered) | | | | | | |
| NEXT | DRAFTY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| DRAFTY (Changed from 2009) *HowDrafty* | | | | | | |
| ASK | All respondents | | | | | |
| How often do you or other members of your household find your home too drafty? Would you say it is…  1 All the time,  2 Most of the time,  3 Some of the time, or  4 Never? | | | | | | |
| NEXT | INSTLINS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| INSTLINS *Insulation* | | | | | | |
| ASK | All respondents | | | | | |
| Insulation is often added to the attic, ceiling, walls, crawl space, ducts, or pipes. Has any insulation been added to your home/apartment since your household moved in?  1 Yes  0 No | | | | | | |
| NEXT | INSTLWS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| INSTLWS *Caulking* | | | | | | |
| ASK | All respondents | | | | | |
| Caulking and weather stripping is often done to seal windows, doors, and ducts. Has any portion of your home/apartment been caulked or weather stripped in order to seal air leaks since your household moved in?  1 Yes  0 No | | | | | | |
| NEXT | If TYPEHUQ in(2,3): ADDITION  Else: UGASHERE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ADDITION (New) *ADDITION* | | | | | | |
| ASK | If TYPEHUQ in(2,3) | | | | | |
| To the best of your knowledge, have any rooms or spaces been added to your home since it was originally constructed?  1 Yes  0 No | | | | | | |
| NEXT | UGASHERE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| UGASHERE (New) *UGASHERE* | | | | | | |
| ASK | All respondents | | | | | |
| Is natural gas from underground pipes available in this neighborhood?  1 Yes  0 No | | | | | | |
| NEXT | Section B | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| IVCOMMAFILTER *IVCOMMAFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the housing unit characteristics section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMAFILTER=1: IVCOMMA  Else: Section B | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| IVCOMMA *IVerCommentsA* | | | | | | |
| ASK | If IVCOMMAFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the characteristics of this housing unit that might provide clarification to the respondent’s answers. Comments are not required but are encouraged to describe unique housing unit or household characteristics. Use this space to help explain extraordinary or abnormal responses.  Open response | | | | | | |
| NEXT | Section B | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION B: KITCHEN APPLIANCES**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| STOVEN *StoveOven* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card 6 in front of the respondent.  Please look at Card 6. This first picture shows a stove or range, which has both a cooktop and an oven. How many stoves do you have in your home?  0 - 10 | | | | | | |
| NEXT | If STOVEN>0: STOVENFUEL  Else: STOVE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| STOVENFUEL (Changed from 2009) *ComboStoveOven, ComboStoveOvenA* | | | | | | |
| ASK | If STOVEN>0 | | | | | |
| What fuel does your [most-used] stove or range use? Is it…  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas),  13 Dual fuel, or  21 Some other fuel? | | | | | | |
| NEXT | If STOVENFUEL=3: DUALOVEN  Else if STOVENFUEL=21: STOVENFUELFU  Else: OVENUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| DUALOVEN (New) *DualOvenFuel* | | | | | | |
| ASK | If STOVENFUEL=3 | | | | | |
| What fuel does the oven part of your dual fuel stove or range use?  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas),  21 Some other fuel? | | | | | | |
| NEXT | DUALCOOKT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| DUALCOOKT (New) *DualCooktopFuel* | | | | | | |
| ASK | If STOVENFUEL=3 | | | | | |
| What fuel does the cooktop part of your dual fuel stove or range use?  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas),  21 Some other fuel? | | | | | | |
| NEXT | OVENUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| STOVENFUELFU *ComboStoveOvenFU* | | | | | | |
| ASK | If STOVENFUEL=21 | | | | | |
| Could you tell me what that other type of fuel is?  Open response | | | | | | |
| NEXT | OVENUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| OVENUSE (Changed from 2009) *FreqOvenUse, FreqOvenUseA* | | | | | | |
| ASK | If STOVEN>0 | | | | | |
| In a typical week, about how many times is the oven part of your [most-used] stove/range used? If it's not used, you can answer "0".  Open response | | | | | | |
| NEXT | COOKTUSE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| COOKTUSE (New) *FreqCooktopUse, FreqCooktopUseA* | | | | | | |
| ASK | If STOVEN>0 | | | | | |
| In a typical week, about how many times is the cooktop part of your [most-used] stove/range used? If it's not used, you can answer "0".  Open response | | | | | | |
| NEXT | OVENCLN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| OVENCLN *SelfCleanOven, SelfCleanOvenA* | | | | | | |
| ASK | If STOVEN>0 | | | | | |
| Does the oven part of your [most-used] stove or range have a self-cleaning feature?  1 Yes  0 No | | | | | | |
| NEXT | STOVE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| STOVE (Changed from 2009) *Stove* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card 6 in front of the respondent.  Please look at Card 6. The second picture shows a separate cooktop without an oven. How many separate cooktops without an oven do you have in your home?  0 - 10 | | | | | | |
| NEXT | If STOVE>0: STOVEFUEL  Else: OVEN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| STOVEFUEL *APPComboStoveFuel, APPComboStoveFuelA* | | | | | | |
| ASK | If STOVE>0 | | | | | |
| What fuel does your [most-used] separate cooktop use? Is it…  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas), or  21 Some other fuel? | | | | | | |
| NEXT | If STOVEFUEL=21: STOVEFUELFU  Else: SEPCOOKTUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| STOVEFUELFU *APPComboStoveFuelFU* | | | | | | |
| ASK | If STOVEFUEL=21 | | | | | |
| Could you tell me what that other type of fuel is?  Open response | | | | | | |
| NEXT | SEPCOOKTUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SEPCOOKTUSE (New) *FreqSeparateCooktopUse, FreqSeparateCooktopUseA* | | | | | | |
| ASK | If STOVE>0 | | | | | |
| In a typical week, about how many times is your [most-used] separate cooktop used? If it's not used, you can answer "0"  Open response | | | | | | |
| NEXT | OVEN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| OVEN *MoreThanOneOven* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card 6 in front of the respondent.  Please look at Card 6. The third picture shows a separate wall oven. How many separate wall ovens do you have in your home?  0 - 10 | | | | | | |
| NEXT | If OVEN>0: OVENFUEL  Else: MICRO | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| OVENFUEL *OvenFuel, OvenFuelA* | | | | | | |
| ASK | If OVEN>0 | | | | | |
| What fuel does your [most-used] separate wall oven use? Is it….  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas), or  21 Some other fuel? | | | | | | |
| NEXT | If OVENFUEL=21: OVENFUELFU  Else: SEPOVENUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OVENFUELFU *OvenFuelFU* | | | | | | |
| ASK | If OVENFUEL=21 | | | | | |
| Could you tell me what that other type of fuel is?  Open response | | | | | | |
| NEXT | SEPOVENUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SEPOVENUSE (New) *FreqSeparateOvenUse, FreqSeparateOvenUseA* | | | | | | |
| ASK | If OVEN>0 | | | | | |
| In a typical week, about how many times is your [most-used] separate wall oven used? If it's not used, you can answer "0"  Open response | | | | | | |
| NEXT | SEPOVENCLN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SEPOVENCLN (New) *SelfCleanWallOven, SelfCleanWallOvenA* | | | | | | |
| ASK | If OVEN>0 | | | | | |
| Does your [most-used] separate wall oven have a self-cleaning feature?  1 Yes  0 No | | | | | | |
| NEXT | MICRO | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| MICRO *MicroOven* | | | | | | |
| ASK | All respondents | | | | | |
| How many microwaves do you have?  0 - 10 | | | | | | |
| NEXT | If MICRO>0: AMTMICRO  Else: OUTGRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| AMTMICRO (Changed from 2009) *MicroOvenUse* | | | | | | |
| ASK | If MICRO=1 | | | | | |
| In a typical week, about how many times is your microwave used? If it's not used, you can answer "0"  Open response | | | | | | |
| NEXT | DEFROST | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| DEFROST *MicroDefrost* | | | | | | |
| ASK | If MICRO=1 | | | | | |
| Does your household use the microwave for defrosting?  1 Yes  0 No | | | | | | |
| NEXT | If STOVEN>0 or STOVE>1: RANGEHOOD  Else: OUTGRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RANGEHOOD (New) *RangeHood* | | | | | | |
| ASK | If STOVEN>0 or STOVE>1 | | | | | |
| Does your household have a range hood or fan over your stove or cooktop?  1 Yes  0 No | | | | | | |
| NEXT | If RANGEHOOD=1: HOODVENT  Else: OUTGRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HOODVENT (New) *RangeHoodVent* | | | | | | |
| ASK | If RANGEHOOD=1 | | | | | |
| Is your range hood or fan vented to the outside?  1 Yes  0 No | | | | | | |
| NEXT | OUTGRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OUTGRILL *OutDoorGrill* | | | | | | |
| ASK | All respondents | | | | | |
| Does your household use an outdoor grill?  1 Yes  0 No | | | | | | |
| NEXT | If OUTGRILL=1: OUTGRILLFUEL  Else: TOPGRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OUTGRILLFUEL (Changed from 2009) *OutDrGrilFuel* | | | | | | |
| ASK | If OUTGRILL=1 | | | | | |
| What fuel does your outdoor grill use? Is it…  1 Natural gas from underground pipes,  2 Propane (bottled gas),  23 Charcoal, or  21 Some other fuel? | | | | | | |
| NEXT | If OUTGRILLFUEL=21: OUTGRILLFUELFU  Else: TOPGRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OUTGRILLFUELFU *OutDrGrilFuelFU* | | | | | | |
| ASK | If OUTGRILLFUEL=21 | | | | | |
| Could you tell me what that other type of fuel is?  Open response | | | | | | |
| NEXT | TOPGRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TOPGRILL *StoveTopGrill* | | | | | | |
| ASK | All respondents | | | | | |
| Does your household use a built-in indoor grill?  1 Yes  0 No | | | | | | |
| NEXT | If TOPGRILL=1: STGRILA  Else: NUMMEAL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| STGRILA *APPGrillFuel* | | | | | | |
| ASK | If TOPGRILL=1 | | | | | |
| What fuel does your built-in indoor grill use? Is it…  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas), or  21 Some other fuel? | | | | | | |
| NEXT | If STGRILA=21: STGILAFU  Else: NUMMEAL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| STGRILAFU *APPGrillFuelFU* | | | | | | |
| ASK | If STGRILA=21 | | | | | |
| Could you tell me what that other type of fuel is?  Open response | | | | | | |
| NEXT | NUMMEAL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMMEAL *APPNumMealsCooked* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card 7 in front of the respondent.  Please look at Card 7. Which of the categories shown best describes how often hot meals are usually cooked in your home?  1 Three or more times a day  2 Two times a day  3 Once a day  4 A few times each week  5 About once a week  6 Less than once a week  0 Doesn't cook/Never cooks (if volunteered) | | | | | | |
| NEXT | TOAST, TOASTOVN, COFFEE, CROCKPOT, FOODPROC, RICECOOK, MIXER, BREAD, BLENDER, WAFFLE, APPOTHER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TOAST, TOASTOVN, COFFEE, CROCKPOT, *TOAST, TOASTOVN, COFFEE, CROCKPOT,*FOODPROC, RICECOOK, MIXER, BREAD, *FOODPROC, RICECOOK, MIXER, BREAD,*BLENDER, WAFFLE, APPOTHER (New) *BLENDER, WAFFLE, APPOTHER* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of these small kitchen appliances are used at least once a week in your home?  Mark all that apply.  Toaster (TOAST)  Toaster oven (TOASTOVN)  Coffee maker (COFFEE)  Crock pot or slow cooker (CROCKPOT)  Food processor (FOODPROC)  Rice cooker (RICECOOK)  Stand mixer (MIXER)  Bread maker (BREAD)  Blender or juicer (BLENDER)  Waffle maker (WAFFLE)  Other (APPOTHER) | | | | | | |
| NEXT | If APPOTHER=1: SMALLAPPFU  Else: NUMFRIG | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SMALLAPPFU (New) *SmallAppliancesFU* | | | | | | |
| ASK | If APPOTHER=1 | | | | | |
| Could you tell me what other type of small kitchen appliances are used at least once a week in your home?  Open response | | | | | | |
| NEXT | NUMFRIG | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMFRIG (Changed from 2009) *NumOfFrig* | | | | | | |
| ASK | All respondents | | | | | |
| How many refrigerators are plugged-in and turned on in your home? Include refrigerators in basements or garages, even if they are only used occasionally, and also include compact refrigerators and wine chillers.  0 - 10 | | | | | | |
| NEXT | If NUMFRIG>0: SIZERFR1  Else: SEPFREEZ | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SIZRFRI1 (Changed from 2009) *SizeOfFrig1* | | | | | | |
| ASK | If NUMFRIG>0 | | | | | |
| Place show card 10 in front of the respondent.  Please look at Card 10. How would you describe the size of [if NUMFRIG=1: your refrigerator?] [if NUMFRIG>1: the refrigerator used the most?]  1 Half-size or compact  2 Small (17.5 cubic feet or less)  3 Medium (17.6 to 22.5 cubic feet)  4 Large (22.6 to 29.5 cubic feet)  5 Very large (bigger than 29.5 cubic feet) | | | | | | |
| NEXT | If SIZRFRI1=1: REFRIGT1  Else: TYPERFR1 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TYPERFR1 (Changed from 2009) *TypeOfFrig1* | | | | | | |
| ASK | If SIZRFRI1>1 | | | | | |
| Place show card 9 in front of the respondent.  Please look at Card 9. Which of the pictures best describes this refrigerator?  1 One door  21 Two doors, freezer next to the refrigerator  22 Two doors, freezer above the refrigerator  23 Two doors, freezer below the refrigerator  5 Three or more doors  4 Some other kind | | | | | | |
| NEXT | REFRIGT1 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| REFRIGT1 (Changed from 2009) *DfrostFrig1* | | | | | | |
| ASK | If NUMFRIG>0 | | | | | |
| What type of defrosting does this refrigerator have? Is it…  1 Manual  2 Automatic  3 No working freezer section (if volunteered) | | | | | | |
| NEXT | ICE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| ICE (Changed from 2009) *IceThruDoor1* | | | | | | |
| ASK | If NUMFRIG>0 | | | | | |
| Does this refrigerator have through-the-door ice service?  1 Yes  0 No | | | | | | |
| NEXT | AGERFRI1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGERFRI1 *AgeOfFrig1* | | | | | | |
| ASK | If NUMFRIG>0 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is this refrigerator? Your best estimate is fine.  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | If NUMFRIG>1: SIZERFR2  Else: SEPFREEZ | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SIZRFRI2 (Changed from 2009) *SizeOfFrig2* | | | | | | |
| ASK | If NUMFRIG>1 | | | | | |
| Place show card 10 in front of the respondent.  Please look at Card 10. How would you describe the size of your second refrigerator?  1 Half-size or compact  2 Small (17.5 cubic feet or less)  3 Medium (17.6 to 22.5 cubic feet)  4 Large (22.6 to 29.5 cubic feet)  5 Very large (bigger than 29.5 cubic feet) | | | | | | |
| NEXT | If SIZRFRI2=1: REFRIGT2  Else: TYPERFR2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TYPERFR2 (Changed from 2009) *TypeOfFrig2* | | | | | | |
| ASK | If SIZRFRI2>1 | | | | | |
| Place show card 9 in front of the respondent.  Please look at Card 9. Which of the pictures best describes this refrigerator?  1 One door  21 Two doors, freezer next to the refrigerator  22 Two doors, freezer above the refrigerator  23 Two doors, freezer below the refrigerator  5 Three or more doors  4 Some other kind | | | | | | |
| NEXT | REFRIGT2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| REFRIGT2 (Changed from 2009) *DfrostFrig2* | | | | | | |
| ASK | If NUMFRIG>1 | | | | | |
| What type of defrosting does this refrigerator have? Is it…  1 Manual  2 Automatic  3 No working freezer section (if volunteered) | | | | | | |
| NEXT | MONRFRI2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| MONRFRI2 (Changed from 2009) *MnthsFrig2On* | | | | | | |
| ASK | If NUMFRIG>1 | | | | | |
| In the last year, how many months was this refrigerator plugged in and turned on?  0-12 | | | | | | |
| NEXT | AGERFRI2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGERFRI2 *AgeOfFrig2* | | | | | | |
| ASK | If NUMFRIG>1 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is this refrigerator? Your best estimate is fine.  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | LOCRFRI2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| LOCRFRI2 (New) *LocationOfFrig2* | | | | | | |
| ASK | If NUMFRIG>1 | | | | | |
| Where is your second most used refrigerator located? Is it the…  1 Basement  2 Garage  3 Outside  4 Main floor of house  9 Other | | | | | | |
| NEXT | If LOCRFRI2=9: LOCRFRI2FU  Else if NUMFRIG>2: SIZRFRI3  Else: SEPFREEZ | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| LOCRFRI2FU *LocationOfFrig2FU* | | | | | | |
| ASK | If LOCRFRI2=9 | | | | | |
| Could you tell me what that other location is?  Open response | | | | | | |
| NEXT | If NUMFRIG>2: SIZERFR3  Else: SEPFREEZ | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SIZRFRI3 (Changed from 2009) *SizeOfFrig3* | | | | | | |
| ASK | If NUMFRIG>2 | | | | | |
| Place show card 10 in front of the respondent.  Please look at Card 10. How would you describe the size of your third refrigerator?  1 Half-size or compact  2 Small (17.5 cubic feet or less)  3 Medium (17.6 to 22.5 cubic feet)  4 Large (22.6 to 29.5 cubic feet)  5 Very large (bigger than 29.5 cubic feet) | | | | | | |
| NEXT | If SIZRFRI3=1: REFRIGT3  Else: TYPERFR3 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TYPERFR3 (Changed from 2009) *TypeOfFrig3* | | | | | | |
| ASK | If SIZRFRI3>1 | | | | | |
| Place show card 9 in front of the respondent.  Please look at Card 9. Which of the pictures best describes this refrigerator?  1 One door  21 Two doors, freezer next to the refrigerator  22 Two doors, freezer above the refrigerator  23 Two doors, freezer below the refrigerator  5 Three or more doors  4 Some other kind | | | | | | |
| NEXT | REFRIGT3 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| REFRIGT3 (Changed from 2009) *DfrostFrig3* | | | | | | |
| ASK | If NUMFRIG>2 | | | | | |
| What type of defrosting does this refrigerator have? Is it…  1 Manual  2 Automatic  3 No working freezer section (if volunteered) | | | | | | |
| NEXT | MONRFRI3 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| MONRFRI3 (Changed from 2009) *MnthsFrig3On* | | | | | | |
| ASK | If NUMFRIG>2 | | | | | |
| In the last year, how many months was this refrigerator plugged in and turned on?  0-12 | | | | | | |
| NEXT | AGERFRI3 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGERFRI3 *AgeOfFrig3* | | | | | | |
| ASK | If NUMFRIG>2 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is this refrigerator? Your best estimate is fine.  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | SEPFREEZ | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SEPFREEZ *UseSepFreezer* | | | | | | |
| ASK | All respondents | | | | | |
| Does your household use a separate freezer that is not part of a refrigerator?  1 Yes  0 No | | | | | | |
| NEXT | If SEPFREEZ=1: NUMFREEZ  Else: DISHWASH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMFREEZ *NumSepFreezer* | | | | | | |
| ASK | If SEPFREEZ=1 | | | | | |
| How many separate freezers are used in your home?  0 - 10 | | | | | | |
| NEXT | UPRTFRZR | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| UPRTFRZR *TypeSepFreezer* | | | | | | |
| ASK | If SEPFREEZ=1 | | | | | |
| Place show card 14 in front of the respondent.  Please look at Card 14. Now I would like to ask some questions about the separate freezer that is used the most. What model freezer is this? Is it…  1 An upright or  2 A chest? | | | | | | |
| NEXT | SIZFREEZ | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SIZFREEZ *SizeSepFreezer* | | | | | | |
| ASK | If SEPFREEZ=1 | | | | | |
| Place show card 10 in front of the respondent.  Please look at Card 10. How would you describe the size of this freezer?  1 Small (17.5 cubic feet or less)  2 Medium (17.6 to 22.5 cubic feet)  3 Large (22.6 to 29.5 cubic feet)  4 Very large (bigger than 29.5 cubic feet) | | | | | | |
| NEXT | FREEZER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| FREEZER *DfrstFreezer* | | | | | | |
| ASK | If SEPFREEZ=1 | | | | | |
| What type of defrosting does this freezer have? Is it…  1 Manual  2 Automatic | | | | | | |
| NEXT | AGEFRZR | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGEFRZR *AgeOfFreezer* | | | | | | |
| ASK | If SEPFREEZ=1 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is this freezer?  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | If NUMFREEZ>1: UPRTFRZR2  Else: DISHWASH | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| UPRTFRZR2 *TypeSepFreezer2* | | | | | | |
| ASK | If NUMFREEZ>1 | | | | | |
| Now I would like to ask you the same questions about the second most used freezer. What model freezer is this? Is it…  1 An upright or  2 A chest? | | | | | | |
| NEXT | SIZFREEZ2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SIZFREEZ2 *SizeSepFreezer2* | | | | | | |
| ASK | If NUMFREEZ>1 | | | | | |
| Place show card 10 in front of the respondent.  Please look at Card 10. How would you describe the size of this freezer?  1 Small (17.5 cubic feet or less)  2 Medium (17.6 to 22.5 cubic feet)  3 Large (22.6 to 29.5 cubic feet)  4 Very large (bigger than 29.5 cubic feet) | | | | | | |
| NEXT | FREEZER2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| FREEZER2 *DfrstFreezer2* | | | | | | |
| ASK | If NUMFREEZ>1 | | | | | |
| What type of defrosting does this freezer have? Is it…  1 Manual  2 Automatic | | | | | | |
| NEXT | AGEFRZR2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGEFRZR2 *AgeOfFreezer2* | | | | | | |
| ASK | If NUMFREEZ>1 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is this freezer?  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | DISHWASH | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| DISHWASH (Changed from 2009) *UseDishWasher* | | | | | | |
| ASK | All respondents | | | | | |
| Does your household have a dishwasher?  1 Yes  0 No | | | | | | |
| NEXT | If DISHWASH=1: DWASHUSE  Else: IVCOMMBFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| DWASHUSE (Changed from 2009) *DishWashFreq* | | | | | | |
| ASK | If DISHWASH=1 | | | | | |
| In a typical week, about how many times is your dishwasher used? If it's not used, you can answer "0"  Open response | | | | | | |
| NEXT | AGEDW | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| AGEDW *AgeOfDishwash* | | | | | | |
| ASK | If DISHWASH=1 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is your dishwasher? Your best estimate is fine.  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | DWCYCLE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| DWCYCLE (New) *DishwashCycle* | | | | | | |
| ASK | If DISHWASH=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which cycle is used most of the time when running your dishwasher?  1 Normal or default cycle without heated dry  2 Normal or default cycle with heated dry  3 Heavy or “pots and pans” cycle  4 Light or delicate cycle  5 Energy saver  0 Dishwasher not used | | | | | | |
| NEXT | IVCOMMBFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| IVCOMMBFILTER *IVCOMMBFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the kitchen appliances section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMBFILTER=1: IVCOMMB  Else: Section C | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| IVCOMMB *IVerCommentsB* | | | | | | |
| ASK | If IVCOMMBFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the kitchen appliances in this housing unit that might provide clarification to the respondent’s answers. Comments are not required but are encouraged to describe unique housing unit or household characteristics. Use this space to help explain extraordinary or abnormal responses.  Open response | | | | | | |
| NEXT | Section C | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION C: HOME APPLIANCES AND ELECTRONICS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| CWASHER (Changed from 2009) *ClothesWasher, ClothesWasherA* | | | | | | |
| ASK | All respondents | | | | | |
| Does your household have a clothes washer? [Do not include community clothes washers that are located in the basement or laundry room of your apartment building.]  1 Yes  0 No | | | | | | |
| NEXT | If CWASHER=1: TOPFRONT  Else: DRYER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TOPFRONT *TopOrFrontLoading* | | | | | | |
| ASK | If CWASHER=1 | | | | | |
| Is your washing machine one that you load from the top or one that you load from the front?  1 Top loading  2 Front loading | | | | | | |
| NEXT | WASHLOAD | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| WASHLOAD (Changed from 2009) *NumLoadsWashed* | | | | | | |
| ASK | If CWASHER=1 | | | | | |
| In a typical week, about how many times is your clothes washer used? If it's not used, you can answer "0"  Open response | | | | | | |
| NEXT | WASHTEMP | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| WASHTEMP *WashWaterTemp* | | | | | | |
| ASK | If CWASHER=1 | | | | | |
| What water temperature setting is typically used for the wash cycle of your clothes washer? Is it hot, warm, or cold water?  1 Hot  2 Warm  3 Cold | | | | | | |
| NEXT | RNSETEMP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| RNSETEMP *RinseWaterTemp* | | | | | | |
| ASK | If CWASHER=1 | | | | | |
| What water temperature setting is typically used for the rinse cycle of your clothes washer? Is it hot, warm, or cold water?  1 Hot  2 Warm  3 Cold | | | | | | |
| NEXT | AGECWASH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGECWASH *AgeofClothesWasher* | | | | | | |
| ASK | If CWASHER=1 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is your clothes washer? Your best estimate is fine.  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  4 10 to 14 years old  5 15 to 19 years old  6 20 years or older  7 As old as the home (if volunteered) | | | | | | |
| NEXT | DRYER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| DRYER (Changed from 2009) *ClothesDryer, ClothesDryerA* | | | | | | |
| ASK | All respondents | | | | | |
| Does your household have a clothes dryer? [Do not include community clothes dryers that are located in the basement or laundry room of your apartment building.]  1 Yes  0 No | | | | | | |
| NEXT | If DRYER=1: DRYRFUEL  Else: TVCOLOR | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| DRYRFUEL *DryerFuel* | | | | | | |
| ASK | If DRYER=1 | | | | | |
| What fuel does your clothes dryer use? Is it…  1 Electricity,  2 Natural gas from underground pipes, or  3 Propane (bottled gas)? | | | | | | |
| NEXT | DRYRUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| DRYRUSE (Changed from 2009) *FreqDryerUsed* | | | | | | |
| ASK | If DRYER=1 | | | | | |
| In a typical week, about how many times is your clothes dryer used? If it's not used, you can answer "0"  Open response | | | | | | |
| NEXT | AGECDRYER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| AGECDRYER *AgeofClothesDryer* | | | | | | |
| ASK | If DRYER=1 | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. About how old is your clothes dryer? Your best estimate is fine.  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  4 10 to 14 years old  5 15 to 19 years old  6 20 years or older  7 As old as the home (if volunteered) | | | | | | |
| NEXT | TVCOLOR | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVCOLOR *ColorTVs* | | | | | | |
| ASK | All respondents | | | | | |
| How many televisions are used in your home?  0-15 | | | | | | |
| NEXT | If TVCOLOR>0: TVSIZE1  Else: DESKTOP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVSIZE1 (Changed from 2009) *SizeOfTV, SizeOfTVA* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| What is the size of your [most-used] television? Is it…  1 27 inches or less  2 28 to 39 inches  3 40 to 59 inches  4 60 inches or more | | | | | | |
| NEXT | TVTYPE1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVTYPE1 (Changed from 2009) *TelevisonType, TelevisionTypeA* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Place show card 19 in front of the respondent.  Please look at Card 19. What type of display does your [most-used] television have?  1 Standard Tube  2 Flat Screen LCD  3 Flat Screen Plasma  4 Projection  5 Flat Screen LED | | | | | | |
| NEXT | TVONWD1 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVONWD1 (Changed from 2009) *TimeTVOnWeekdays* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Place show card 21 in front of the respondent.  Please look at Card 21. Thinking about this television’s use on weekdays, how many hours is this television turned on each day? Include the time it is on even if no one is actually watching it.  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | TVONWE1 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVONWE1 (Changed from 2009) *TimeTVOnWeekends* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Thinking about this television’s use on weekends, how many hours is this television turned on each day? Include the time it is on even if no one is actually watching it.  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | If TVCOLOR>1: TVSIZE2  Else: CABLESAT | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVSIZE2 (Changed from 2009) *SizeOfTVB* | | | | | | |
| ASK | If TVCOLOR>1 | | | | | |
| What is the size of your second most used television? Is it…  1 27 inches or less  2 28 to 39 inches  3 40 to 59 inches  4 60 inches or more | | | | | | |
| NEXT | TVTYPE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TVTYPE2 *TelevisionTypeB* | | | | | | |
| ASK | If TVCOLOR>1 | | | | | |
| Place show card 19 in front of the respondent.  Please look at Card 19. What type of display does the second most used television have?  1 Standard Tube  2 Flat Screen LCD  3 Flat Screen Plasma  4 Projection  5 Flat Screen LED | | | | | | |
| NEXT | TVONWD2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVONWD2 (Changed from 2009) *TimeTVOnWeekdaysB* | | | | | | |
| ASK | If TVCOLOR>1 | | | | | |
| Place show card 21 in front of the respondent.  Please look at Card 21. Thinking about this television’s use on weekdays, how many hours is this television turned on each day? Include the time it is on even if no one is actually watching it.  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | TVONWE2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVONWE2 (Changed from 2009) *TimeTVOnWeekendsB* | | | | | | |
| ASK | If TVCOLOR>1 | | | | | |
| Thinking about this television’s use on weekends, how many hours is this television turned on each day? Include the time it is on even if no one is actually watching it.  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | If TVCOLOR>2: TVSIZE3  Else: CABLESAT | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TVSIZE3 (Changed from 2009) *SizeOfTVD* | | | | | | |
| ASK | If TVCOLOR>2 | | | | | |
| What is the size of your third most used television? Is it…  1 27 inches or less  2 28 to 39 inches  3 40 to 59 inches  4 60 inches or more | | | | | | |
| NEXT | TVTYPE3 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TVTYPE3 *TelevisionTypeD* | | | | | | |
| ASK | If TVCOLOR>2 | | | | | |
| Place show card 19 in front of the respondent.  Please look at Card 19. What type of display does the third most used television have?  1 Standard Tube  2 Flat Screen LCD  3 Flat Screen Plasma  4 Projection  5 Flat Screen LED | | | | | | |
| NEXT | TVONWD3 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| TVONWD3 (Changed from 2009) *TimeTVOnWeekdaysC* | | | | | | |
| ASK | If TVCOLOR>2 | | | | | |
| Place show card 21 in front of the respondent.  Please look at Card 21. Thinking about this television’s use on weekdays, how many hours is this television turned on each day? Include the time it is on even if no one is actually watching it.  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | TVONWE3 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TVONWE3 (Changed from 2009) *TimeTVOnWeekendsC* | | | | | | |
| ASK | If TVCOLOR>2 | | | | | |
| Thinking about this television’s use on weekends, how many hours is this television turned on each day? Include the time it is on even if no one is actually watching it.  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | CABLESAT | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| CABLESAT (New) *CABLESAT* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. How many of each of the following are used in your home?  Cable or satellite box without DVR  0-10 | | | | | | |
| NEXT | COMBODVR | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| COMBODVR (New) *COMBODVR* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Cable or satellite box with DVR  0-10 | | | | | | |
| NEXT | SEPDVR | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| SEPDVR (New) *SEPDVR* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Separate DVR (for example, TIVO)  0-10 | | | | | | |
| NEXT | PLAYSTA | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| PLAYSTA (New) *PLAYSTA* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Video game console  0-10 | | | | | | |
| NEXT | DVD | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| DVD (New) *DVD* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| DVD or Blu-ray player  0-10 | | | | | | |
| NEXT | VCR | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| VCR (New) *VCR* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| VCR  0-10 | | | | | | |
| NEXT | INTSTREAM | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| INTSTREAM (New) *INTSTREAM* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Internet streaming device (for example: Apple TV, Google Chromecast, Slingbox, or Roku)  0-10 | | | | | | |
| NEXT | TVAUDIOSYS | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| TVAUDIOSYS (New) *TVAUDIOSYS* | | | | | | |
| ASK | If TVCOLOR>0 | | | | | |
| Home theater or audio system  0-10 | | | | | | |
| NEXT | If PLAYSTA1=1: VGUSAGE  Else: DESKTOP | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| VGUSAGE (New) *VideoGameUsage* | | | | | | |
| ASK | If PLAYSTA=1 | | | | | |
| Place show card 21 in front of the respondent.  Please look at Card 21. How many hours a day are spent playing video games?  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | DESKTOP | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| DESKTOP (New) *NumOfPCs* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. How many of each of the following are used in your home?  Desktop computers  0-15 | | | | | | |
| NEXT | NUMLAPTOP | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMLAPTOP (New) *NumOfLaptops* | | | | | | |
| ASK | All respondents | | | | | |
| Laptop computers  0-15 | | | | | | |
| NEXT | NUMTABLET | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMTABLET (New) *NumOfTablets* | | | | | | |
| ASK | All respondents | | | | | |
| Tablet computers or e-readers (for example: iPad or Kindle)  0-15 | | | | | | |
| NEXT | ELPERIPH | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| ELPERIPH (Changed from 2009) *PCPrinter* | | | | | | |
| ASK | All respondents | | | | | |
| Printers, scanners, fax machines, or copiers  0-15 | | | | | | |
| NEXT | NUMSMPHONE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMSMPHONE (New) *NumOfSmartphones* | | | | | | |
| ASK | All respondents | | | | | |
| "Smart” phones (for example, iPhone or Android)  0-15 | | | | | | |
| NEXT | CELLPHONE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| CELLPHONE (New) *NumOfCellphones* | | | | | | |
| ASK | All respondents | | | | | |
| Other cellular phones  0-15 | | | | | | |
| NEXT | If NUMLAPTOP+NUMTABLET+NUMPC>0: PCTYPE1  Else if NUMSMPHONE>0: INTERNET  Else: AQUARIUM, WELLPUMP, SWAMPCOL, DIPSTICK, SECURITY, SPRINKLER, MEDICALDEV | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| PCTYPE1 (Changed from 2009) *PC1Type, PC1TypeA* | | | | | | |
| ASK | If NUMLAPTOP+NUMTABLET+NUMPC>0 | | | | | |
| Thinking about your [most-used] computer, is it a desktop, a laptop, or a tablet?  1 Desktop model  2 Laptop  3 Tablet | | | | | | |
| NEXT | TIMEON1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TIMEON1 (Changed from 2009) *UsePC, MostUsePC* | | | | | | |
| ASK | If NUMLAPTOP+NUMTABLET+NUMPC>0 | | | | | |
| Place show card 21 in front of the respondent.  Please look at Card 21. Thinking about your [most used] computer, how many hours each day is it used?  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | If NUMPC+NUMLAPTOP+NUMTABLET>1: PCTYPE2  Else: INTERNET | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| PCTYPE2 (Changed from 2009) *PC1TypeB* | | | | | | |
| ASK | If NUMLAPTOP+NUMTABLET+NUMPC>1 | | | | | |
| Thinking about your second most used computer, is it a desktop, a laptop, or a tablet?  1 Desktop model  2 Laptop  3 Tablet | | | | | | |
| NEXT | TIMEON2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TIMEON2 (Changed from 2009) *MostUsePC2* | | | | | | |
| ASK | If NUMLAPTOP+NUMTABLET+NUMPC>1 | | | | | |
| Place show card 21 in front of the respondent.  Please look at Card 21. Thinking about your second most used, how many hours each day is it used?  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | If NUMLAPTOP+NUMTABLET+NUMPC>2: PCTYPE3  Else: INTERNET | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| PCTYPE3 (Changed from 2009) *PC1TypeC* | | | | | | |
| ASK | If NUMLAPTOP+NUMTABLET+NUMPC>2 | | | | | |
| Thinking about your third most used computer, is it a desktop, a laptop, or a tablet?  1 Desktop model  2 Laptop  3 Tablet | | | | | | |
| NEXT | TIMEON3 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TIMEON3 (Changed from 2009) *MostUsePC3* | | | | | | |
| ASK | If NUMLAPTOP+NUMTABLET+NUMPC>2 | | | | | |
| Place show card 21 in front of the respondent.  Please look at Card 21. Thinking about your third most used computer, how many hours each day is it used?  1 Less than 1 hour  2 1 to 3 hours  3 4 to 6 hours  4 7 to 10 hours  5 More than 10 hours | | | | | | |
| NEXT | INTERNET | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| INTERNET (Changed from 2009) *InternetAccess* | | | | | | |
| ASK | If NUMPC+NUMLAPTOP+NUMTABLET+NUMSMPHONE>0 | | | | | |
| Please look at Card X. In your home, do you or any member of your household access the Internet?  1 Yes  0 No | | | | | | |
| NEXT | If INTERNET=1: INDIALUP, INDSL, INCABLE, INFIOS, INMOBILE, INSATEL  Else: AQUARIUM, WELLPUMP, SWAMPCOL, DIPSTICK, SECURITY, SPRINKLER, MEDICALDEV | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| INWIRELESS (Changed from 2009) *HaveWireRouter* | | | | | | |
| ASK | If INTERNET=1 | | | | | |
| Is a wireless router used in your home for accessing the Internet?  1 Yes  0 No | | | | | | |
| NEXT | AQUARIUM, WELLPUMP, SWAMPCOL, DIPSTICK, SECURITY, SPRINKLER, MEDICALDEV | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AQUARIUM, WELLPUMP, SWAMPCOL, *Aquarium, WellWaterPump, SwampCooler,*DIPSTICK, SECURITY, SPRINKLER, *EngineHeaters, SecuritySystem, SprinklerSystem,*MEDICALDEV (New) (Changed from 2009) *MedicalDevice* | | | | | | |
| ASK | All respondents | | | | | |
| Are any of the following used in your home?  Read responses and mark all that apply.  Large heated aquariums of 20 gallons or more (AQUARIUM)  [If TYPEHUQ in(1,2,3): Electric pump for well water] (WELLPUMP)  [If SCFLAG=1 (only respondents in certain states): Evaporative or swamp cooler] (SWAMPCOL)  [If DSFLAG=1 (only respondents in certain states): Automobile block heaters, dip-stick engine heaters, or battery blankets] (DIPSTICK)  Home security system (SECURITY)  [If TYPEHUQ in(1,2,3): Outdoor sprinkler system] (SPRINKLER)  Medical devices, such as ventilators, nebulizers, or CPAP machines (MEDICALDEV) | | | | | | |
| NEXT | VACUUM, FLASH, TOOTH, RAZOR, DRILL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| VACUUM, FLASH, TOOTH, RAZOR, DRILL (New) *VACUUM, FLASH, TOOTH, RAZOR, DRILL* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of these types of electric rechargeable devices are typically plugged in in your home?  Mark all that apply.  Handheld vacuum (VACUUM)  Flashlight (FLASH)  Electric toothbrush (TOOTH)  Electric razor (RAZOR)  Drill or other power tool (DRILL) | | | | | | |
| NEXT | IVCOMMCFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| IVCOMMCFILTER *IVCOMMCFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the household appliances and electronics section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMCFILTER=1: IVCOMMC  Else: Section D | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| IVCOMMC *IVerCommentsC* | | | | | | |
| ASK | If IVCOMMCFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the other appliances in this housing unit that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section D | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION D: SPACE HEATING**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| HEATHOME *HeatingHome* | | | | | | |
| ASK | All respondents | | | | | |
| Is your home heated during the winter?  1 Yes  0 No | | | | | | |
| NEXT | If TYPEHUQ in (4,5) and HEATHOME=1: APTHEAT  If TYPEHUQ in (1,2,3) and HEATHOME=1: EQUIPM  If HEATHOME=0: DNTHEAT  Else: MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| DNTHEAT *DontHeatHome* | | | | | | |
| ASK | If HEATHOME=0 | | | | | |
| You have just told me that you don’t heat your home during the winter. Just to clarify, is it that you have heating equipment but don’t use it, or does your home just not have any heating equipment?  1 Have equipment, but don't use it  2 Don't have equipment | | | | | | |
| NEXT | If DNTHEAT=1: EQUIPNOHEAT  Else: MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| EQUIPNOHEAT (Changed from 2009) *APPMainHeatingEquipB* | | | | | | |
| ASK | If DNTHEAT=1 | | | | | |
| Place show card X in front of the respondent.  Even though you don’t heat your home, we are still interested to know the type of equipment you have. Please look at Card X. What type of heating equipment do you have?  3 Central furnace  4 Heat pump  2 Steam/hot water system with radiators or pipes  5 Built-in electric units installed in walls, ceilings, baseboards, or floors  6 Built-in floor/wall pipeless furnace  7 Heating stove burning wood  10 Portable electric heaters  11 Portable kerosene heaters  9 Fireplace  21 Some other equipment | | | | | | |
| NEXT | If EQUIPNOHEAT=21: EQUIPNOHEATFU  Else: FUELNOHEAT | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| EQUIPNOHEATFU *D2a1FollowUp* | | | | | | |
| ASK | If EQUIPNONEAT=21 | | | | | |
| Could you tell me what that other heating equipment is?  Open response | | | | | | |
| NEXT | FUELNOHEAT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FUELNOHEAT *ReAskMainHeatFuel* | | | | | | |
| ASK | If HEATHOME=0 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What is the main fuel used for this heating equipment?  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  8 Solar  9 District steam  21 Some other fuel | | | | | | |
| NEXT | If FUELNOHEAT=21: FUELNOHEATFU  Else: MOISTURE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| FUELNOHEATFU *D2a2FollowUp* | | | | | | |
| ASK | If FUELNONEAT=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT | MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| APTHEAT (New) *APTHEAT* | | | | | | |
| ASK | If TYPEHUQ in (4,5) and HEATHOME=1 | | | | | |
| Is the main heating equipment for your apartment inside your home or is it in another part of this building?  1 Main heating equipment inside my apartment  2 In another part of the building | | | | | | |
| NEXT | EQUIPM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| EQUIPM (Changed from 2009) *MainHeatingEquip* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| Place show card X in front of the respondent.  Let’s start with the main source of heating in your home. Please look at Card X. Please tell me which type of heating equipment provides most of the heat for your home.  3 Central furnace  4 Heat pump  2 Steam/hot water system with radiators or pipes  5 Built-in electric units installed in walls, ceilings, baseboards, or floors  6 Built-in floor/wall pipeless furnace  7 Heating stove burning wood  10 Portable electric heaters  11 Portable kerosene heaters  9 Fireplace  12 Cooking stove or oven  21 Some other equipment | | | | | | |
| NEXT | If EQUIPM=21: EQUIPMFU  If EQUIPM in(3,4): NUMEQUIPM  If EQUIPM =10: NUMPORTELHEAT1  Else: FUELHEAT | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| EQUIPMFU *D3FollowUp* | | | | | | |
| ASK | If EQUIPM=21 | | | | | |
| Could you tell me what that other heating equipment is?  Open response | | | | | | |
| NEXT | FUELHEAT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMEQUIPM (New) *NUMEQUIPM* | | | | | | |
| ASK | If EQUIPM in(3,4) | | | | | |
| Do you have more than one [EQUIPM]?  1 Yes  0 No | | | | | | |
| NEXT | If EQUIPM =4: HPTYPE1  Else: FUELHEAT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMPORTELHEAT1 (New) *NUMPORTELHEAT1* | | | | | | |
| ASK | If EQUIPM=10 | | | | | |
| How many portable electric heaters does your household use?  1-99 | | | | | | |
| NEXT | MAINTHT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FUELHEAT (Changed from 2009) *MainHeatingFuel* | | | | | | |
| ASK | If HEATHOME=1 and EQUIPM ne 4, 5, 7, 10, 11 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What is the main fuel used for heating your home? That is, which fuel is the one that provides the most heat for your home?  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  8 Solar  9 District steam  21 Some other fuel | | | | | | |
| NEXT | If FUELHEAT=21: FUELHEATFU  Else: MAINTHT | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| FUELHEATFU *D4FollowUp* | | | | | | |
| ASK | If FUELHEAT=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT | MAINTHT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HPTYPE1 (New) *HPTYPE1* | | | | | | |
| ASK | If EQUIPM=4 | | | | | |
| What type of heat pump do you have? Is it…  1 Electric air source  2 Geothermal or ground source  3 Natural gas | | | | | | |
| NEXT | HPBACKUP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| HPBACKUP (New) *HPBACKUP* | | | | | | |
| ASK | If EQUIPM=4 | | | | | |
| During the winter, how often does your heat pump switch to back-up or auxiliary heat? Is it…  0 Never  1 A few times  2 Some of the time  3 About all winter | | | | | | |
| NEXT | MAINTHT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MAINTHT (Changed from 2009) *HeatMaint* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| In the last year, has any routine maintenance been performed on your household’s heating equipment? This includes replacing or cleaning the air filter.  1 Yes  0 No | | | | | | |
| NEXT | EQUIPAGE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| EQUIPAGE (Changed from 2009) *AgeMainHeatEquip* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. Approximately how old is your household's main heating equipment?  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years old  6 As old as the home (if volunteered) | | | | | | |
| NEXT | THERMAIN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| THERMAIN (Changed from 2009) *HaveThermostat* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. Do you have a thermostat that controls your main heating equipment?  1 Yes  0 No | | | | | | |
| NEXT | If THERMAIN=1: OTHTHERM  Else: EQUIPMUSE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| OTHTHERM *Have2orMoreTherms* | | | | | | |
| ASK | If THERMAIN=1 | | | | | |
| Do you have more than one thermostat that controls your heating?  1 Yes  0 No | | | | | | |
| NEXT | If OTHTHERM=1: NUMTHERM  Else: PROTHERM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMTHERM *NumberOfOtherTherms* | | | | | | |
| ASK | If OTHTHERM=1 | | | | | |
| How many total thermostats do you have in your home?  Open response | | | | | | |
| NEXT | PROTHERM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PROTHERM *IsThermostatSetBack* | | | | | | |
| ASK | If THERMAIN=1 | | | | | |
| Some thermostats can be programmed so that different temperatures are automatically maintained at different times of the day. Is the thermostat that controls your main heating equipment programmable?  1 Yes  0 No | | | | | | |
| NEXT | EQUIPMUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| EQUIPMUSE (New) *EQUIPMUSE* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which best describes how your household controls your main heating equipment most of the time?  1 Set one temperature and leave it there most of the time  2 Manually adjust the temperature at night or when no one is at home  3 Program the thermostat to automatically adjust the temperature during the day and night at certain times  4 Turn equipment on or off as needed  5 Our household does not have control over the equipment  9 Other | | | | | | |
| NEXT | If EQUIPMUSE=9: EQUIPMUSEFU;  Else TEMPHOME | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| EQUIPMUSEFU (New) *EQUIPMUSEFU* | | | | | | |
| ASK | If EQUIPMUSE=9 | | | | | |
| Could you describe how your household uses your main heating heating equipment?  Open response | | | | | | |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TEMPHOME (Changed from 2009) *TempSetWhenHomeMult* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| The next questions are about the temperature inside your home during the winter. If you have a thermostat, think about where your household sets the temperature for your main heating equipment. If you don't have a thermostat, your best guess about the temperature is fine.  During the winter, what is the typical temperature when someone is home during the day?  Open response | | | | | | |
| NEXT | TEMPGONE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| TEMPGONE (Changed from 2009) *TempSetWhenOut* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| What is the typical temperature when no one is inside your home during the day?  Open response | | | | | | |
| NEXT | TEMPNITE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TEMPNITE (Changed from 2009) *TempSetWhenAsleep* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| What is the typical temperature inside your home at night?  Open response | | | | | | |
| NEXT | HEATOTH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HEATOTH *HeatOthers* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| Does the main heating equipment for your home also heat any other apartments, condos, households, businesses, or farm buildings?  1 Yes  0 No | | | | | | |
| NEXT | EQUIPAUX | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| EQUIPAUX *TypeSecHeatEquip1-7* | | | | | | |
| ASK | If HEATHOME=1 | | | | | |
| Place show card XX in front of the respondent.  You told me that [EQUIPM] is the main source of heat in your home. Please look at Card XX. Does your household use any other types of heating equipment listed on Card XX?  No other equipment (NOOTHEQU)  Central furnace (WARMAIR)  Heat pump (REVERSE)  Steam/Hot water system with radiators or pipes (STEAMR)  Built-in electric units installed in walls, ceilings, baseboards, or floors (PERMELEC)  Built-in floor/wall pipeless furnace (PIPELESS)  Built-in room heater burning gas, oil, or kerosene (ROOMHEAT)  Heating stove burning wood (WOODKILN)  Portable electric heaters (CARRYEL)  Portable kerosene heaters (CARRYKER)  Fireplace (CHIMNEY)  Cooking stove or oven RANGE  Some other equipment DIFEQUIP  If No other equipment: EQUIPAUX=0  Else EQUIPAUX=1 | | | | | | |
| NEXT | If EQUIPAUX=1: see skip logic for indivudal secondary fuel variables  If EQUIPAUX=0 and CELLAR=1: BASEHEAT;  If EQUIPAUX=0 and CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If EQUIPAUX=0 and CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If EQUIPAUX=0 and CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: MOISTURE | | | | | |
| Derived | | Yes | **Show Card** | Yes | **CARI** | Yes |

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| REVERSE *REVERSE* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Central Furnace | | | | | | |
| NEXT | FURNFUEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WARMAIR *WARMAIR* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Heat Pump | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| STEAMR *STEAMR* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Steam/Hot Water system | | | | | | |
| NEXT | RADFUEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| PERMELEC *PERMELEC* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Buit in Electric Units | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PIPELESS *PIPELESS* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Built in floor/wall pipeless furnace | | | | | | |
| NEXT | PIPEFUEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ROOMHEAT *ROOMHEAT* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Built in room heaters | | | | | | |
| NEXT | RHMHTFUEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WOODKILN *WOODKILN* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Heating Stove | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CARRYEL *CARRYEL* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is Portable electric heaters | | | | | | |
| NEXT | NUMPORTELHEAT2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CARRYKER *CARRYKER* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is portable kerosene heaters | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| CHIMNEY *CHIMNEY* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is fireplace | | | | | | |
| NEXT | FPFUEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RANGE *RANGE* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is stove/oven/range | | | | | | |
| NEXT | RNGFUEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| DIFEQUIP *DIFEQUIP* | | | | | | |
| ASK |  | | | | | |
| Secondary heat is some other equipment | | | | | | |
| NEXT | AUXEQPFU | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| AUXEQPFU *D7FollowUp* | | | | | | |
| ASK | If DIFEQUIP=1 | | | | | |
| Could you tell me what that other heating equipment is?  Open response | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FURNFUEL *APPWrmAirFurnFuel, WrmAirFurnFuel* | | | | | | |
| ASK | If WARMAIR=1 | | | | | |
| What fuel does the central furnace use? Is it…  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  8 Solar  9 District steam  21 Some other fuel | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FURNFUELFU *D5a1FollowUp* | | | | | | |
| ASK | If FURNFUEL=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RADFUEL *APPHotH2OFuel, HotH2OFuel* | | | | | | |
| ASK | If STEAMR=1 | | | | | |
| What fuel does the steam/hot water system use? Is it…  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  8 Solar  9 District steam  21 Some other fuel | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RADFUELFU *APPHotH2OFollowUp* | | | | | | |
| ASK | If RADFUEL=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PIPEFUEL *APPPipelessHtrFuel, PipelessHtrFuel* | | | | | | |
| ASK | If PIPELESS=1 | | | | | |
| What fuel does the pipeless furnace use? Is it…  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  8 Solar  9 District steam  21 Some other fuel | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PIPEFUELFU *D5a2FollowUp* | | | | | | |
| ASK | If PIPEFUEL=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| RMHTFUEL *RoomHeaterFuel* | | | | | | |
| ASK | If ROOMHEAT=1 | | | | | |
| What fuel does the room heater use? Is it…  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FPFUEL *APPFirePlaceFuel, FirePlaceFuel* | | | | | | |
| ASK | If CHIMNEY=1 | | | | | |
| What fuel does the fireplace use? Is it…  1 Natural gas from underground pipes  2 Propane (bottled gas)  7 Wood  21 Some other fuel | | | | | | |
| NEXT | If FPFUEL=1: NGFPFLUE  If FPFUEL ne 1 and CELLAR=1: BASEHEAT;  If FPFUEL ne 1 and CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If FPFUEL ne 1 and CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If FPFUEL ne 1 and CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FPFUELFU *D5a5FollowUp* | | | | | | |
| ASK | If FPFUEL=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGFPFLUE (Changed from 2009) *GasFirePlaceFlue* | | | | | | |
| ASK | If FPFUEL=1 | | | | | |
| Does this fireplace have a flue to the outside or is it entirely self-contained?  1 Flue to the outside  2 Flueless (self contained) | | | | | | |
| NEXT | USNGFP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| USENGFP (Changed from 2009) *FreqNatGasFirePlUsed* | | | | | | |
| ASK | If FPFUEL=1 | | | | | |
| During the winter how frequently does your household use the gas fireplace? Is it…  1 Most days  2 About once a week  3 Fewer than 4 times each month | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RNGFUEL *APPCookingEquipFuel, CookingEquipFuel* | | | | | | |
| ASK | If RANGE=1 | | | | | |
| What fuel does the cooking stove use? Is it…  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  21 Some other fuel | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RNGFUELFU *D5a6FollowUp* | | | | | | |
| ASK | If RNGFUEL=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT |  | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMPORTELHEAT2 (New) *NUMPORTELHEAT2* | | | | | | |
| ASK | If CARRYEL=1 | | | | | |
| How many portable electric heaters does your household use?  1-99 | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: EQMAMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| EQMAMT (Changed from 2009) *HowMuchHeat* | | | | | | |
| ASK | If EQUIPAUX=1 | | | | | |
| You’ve told me that your household uses more than one type of equipment to heat your home. How much of your home's heat is provided by [FILL: MainHeatingEquip]. Would you say...  1 Almost all  2 About three-fourths  3 Closer to half of all your heat | | | | | | |
| NEXT | If CELLAR=1: BASEHEAT;  If CELLAR ne 1 and ATTIC=1: ATTCHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If CELLAR ne 1 and ATTIC ne 1 and PRKGPLC1 ne 1: MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| BASEHEAT (Changed from 2009) *BASEHEAT* | | | | | | |
| ASK | If HEATHOME=1 and CELLAR=1 | | | | | |
| Is any part of your basement heated using the heating equipment you've told me about?  1 Yes  0 No | | | | | | |
| NEXT | If BASEHEAT=1: BASEHT2;  If BASEHEAT ne 1 and ATTIC=1: ATTCHEAT;  If BASEHEAT ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If BASEHEAT ne 1 and ATTIC ne and PRKGPLC1 ne 1: MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| BASEHT2 (Changed from 2009) *APPHowWarmBsmnt* | | | | | | |
| ASK | If BASEHEAT=1 | | | | | |
| About how much of your basement is heated? Is it…  1 All  2 About half  3 Some | | | | | | |
| NEXT | If ATTIC=1: ATTCHEAT;  If ATTIC ne 1 and PRKGPLC1=1: GARGHEAT;  If ATTIC ne 1 and PRKGPLC1 ne 1: MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ATTCHEAT (Changed from 2009) *ATTCHEAT* | | | | | | |
| ASK | If HEATHOME=1 and ATTIC=1 | | | | | |
| Is any part of your attic heated using the heating equipment you've told me about?  1 Yes  0 No | | | | | | |
| NEXT | If ATTCHEAT=1: ATTCHT2;  Else if ATTCHEAT= 0 and PRKGPLC1=1: GARGHEAT;  If ATTCHEAT=0 and PRKGPLC1 ne 1: MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ATTCHT2 (Changed from 2009) *APPHowWarmAttic* | | | | | | |
| ASK | If ATTCHEAT=1 | | | | | |
| About how much of your attic is heated? Is it…  1 All  2 About half  3 Some | | | | | | |
| NEXT | If PRKGPLC1=1: GARGHEAT;  Else MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| GARGHEAT (Changed from 2009) *HowWarmGarage* | | | | | | |
| ASK | If HEATHOME=1 and PRKGPLC1=1 | | | | | |
| Is your garage heated using the heating equipment you've told me about?  1 Yes  0 No | | | | | | |
| NEXT | MOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MOISTURE *Humidifier* | | | | | | |
| ASK | All respondents | | | | | |
| Humidifiers add moisture to the air and are often used in the winter. Is a humidifier used in your home?  1 Yes  0 No | | | | | | |
| NEXT | If MOISTURE=1: HUMIDTYPE  Else: IVCOMMDFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HUMIDTYPE (New) *HumidifierType* | | | | | | |
| ASK | If MOISTURE=1 | | | | | |
| Is your humidifier a portable humidifier or a whole home humidifier?  1 Portable  2 Whole home | | | | | | |
| NEXT | USEMOISTURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| USEMOISTURE (Changed from 2009) *HumidifierUse* | | | | | | |
| ASK | If MOISTURE=1 | | | | | |
| In the last year, how many months was the humidifier used? Was it…  1 less than 1 month,  2 1 to 3 months,  3 4 to 6 months,  4 7 to 9 months,  5 10 to 11 months, but not all year, or  6 Turned on all year long? | | | | | | |
| NEXT | IVCOMMDFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMDFILTER *IVCOMMDFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the space heating section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMDFILTER=1: IVCOMMD;  Else: Section E | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMD *IVerCommentsD* | | | | | | |
| ASK | If IVCOMMDFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the space heating equipment in this housing unit and its’ usage that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section E | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION E: AIR CONDITIONING**

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| AIRCOND *AirConditioning* | | | | | | |
| ASK | All respondents | | | | | |
| Is any air conditioning equipment used in your home?  1 Yes  0 No | | | | | | |
| NEXT | If AIRCOND=1: COOLTYPE;  If AIRCOND=0: DNTAC;  Else: NUMCFAN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| DNTAC (Changed from 2009) *NotAirCond* | | | | | | |
| ASK | If AIRCOND=0 | | | | | |
| Just to clarify, do you have air conditioning equipment but don’t use it, or does your home not have any air conditioning equipment?  1 Have equipment, but don’t use it  2 Don’t have any air conditioning equipment | | | | | | |
| NEXT | If DNTAC=1: COOLTYPENOAC;  Else: NUMCFAN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| COOLTYPENOAC (Changed from 2009) *TypeOfACEquip* | | | | | | |
| ASK | If DNTAC=1 | | | | | |
| Place show card XX in front of the respondent.  We are still interested to know about the air conditioning equipment in your home. Please look at Card XX. What type of air conditioning equipment does your home have? Is it…  1 Central air conditioning system  2 Individual window/wall or portable units  3 Both a central system and individual units | | | | | | |
| NEXT | NUMCFAN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| COOLTYPE (Changed from 2009) *TypeOfAirCoolEquip* | | | | | | |
| ASK | If AIRCOND=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. What type of air conditioning equipment does your home have? Is it…  1 Central air conditioning system  2 Individual window/wall or portable units  3 Both a central system and individual units | | | | | | |
| NEXT | If COOLTYPE in(1,3): NUMCENAC  If COOLTYPE=2: NUMBERAC  Else: NUMCFAN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| NUMCENAC (New) *NUMCENAC* | | | | | | |
| ASK | If COOLTYPE in(1,3) | | | | | |
| Do you have more than one central air conditioning unit?  1 Yes  0 No | | | | | | |
| NEXT | CENACHP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CENACHP *HeatPumpCenAC* | | | | | | |
| ASK | If COOLTYPE in(1,3) | | | | | |
| Is your central air conditioning system a heat pump?  1 Yes  0 No | | | | | | |
| NEXT | If CENACHP=1 and EQUIPM ne 4: HPTYPE2;  Else: ACOTHERS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HPTYPE2 (New) *HPTYPE2* | | | | | | |
| ASK | If CENACHP=1 and EQUIPM ne 4 | | | | | |
| What type of heat pump do you have? Is it…  1 Electric air source  2 Geothermal or ground source  3 Natural gas | | | | | | |
| NEXT | HPDUCTS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HPDUCTS (New) *HaveDuctWork* | | | | | | |
| ASK | If CENACHP=1 | | | | | |
| Does your heat pump deliver cold air through ducts and vents or is it a ductless system?  1 Ducts and vents  2 Ductless | | | | | | |
| NEXT | ACOTHERS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ACOTHERS *CoolOthers* | | | | | | |
| ASK | If COOLTYPE in(1,3) | | | | | |
| Does the central air conditioning equipment that cools your home also cool any other apartments, condos, households, businesses, or farm buildings?  1 Yes  0 No | | | | | | |
| NEXT | MAINTAC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MAINTAC (Changed from 2009) *CACMaint* | | | | | | |
| ASK | If COOLTYPE in(1,3) | | | | | |
| In the last year, has any routine maintenance been performed on your household’s central air conditioning equipment? This includes replacing or cleaning the air filter.  1 Yes  0 No | | | | | | |
| NEXT | AGECENAC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| AGECENAC *AgeOfCenACEquip* | | | | | | |
| ASK | If COOLTYPE in(1,3) | | | | | |
| Place show card 11 in front of the respondent.  Please look at Card 11. Approximately, how old is your central air conditioning equipment?  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | THERMAINAC | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| THERMAINAC *HaveACThermostat* | | | | | | |
| ASK | If COOLTYPE in(1,3) | | | | | |
| Place show card 27 in front of the respondent.  Please look at Card 27. Do you have a thermostat that controls your central air conditioning equipment?  1 Yes  0 No | | | | | | |
| NEXT | If THERMAINAC=1: PROTHERM;  Else: USECENAC | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| PROTHERMAC *IsACThermostatSetBack* | | | | | | |
| ASK | If THERMAINAC=1 | | | | | |
| Some thermostats can be programmed so that different temperatures are automatically maintained at different times of the day. Is the thermostat that controls your central air conditioning equipment programmable?  1 Yes  0 No | | | | | | |
| NEXT | USCENAC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| USECENAC (Changed from 2009) *AmtCenACUsed* | | | | | | |
| ASK | If COOLTYPE in(1,3) | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which best describes how your household controls your central air conditioning equipment most of the time?  1 Set one temperature and leave it there most of the time  2 Manually adjust the temperature at night or when no one is at home  3 Program the thermostat to automatically adjust the temperature during the day and night at certain times  4 Turn equipment on or off as needed  5 Our household does not have control over the equipment  9 Other | | | | | | |
| NEXT | If USECENAC=9: USECENACFU;  If USECENAC ne 9 and COOLTYPE=3: NUMBERAC;  If USECENAC ne 9 and COOLTYPE=1: TEMPHOMEAC | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| USECENACFU *USECENACFU* | | | | | | |
| ASK | If USECENAC=9 | | | | | |
| Could you describe how your household uses your central air conditioning equipment?  Open response | | | | | | |
| NEXT | If COOLTYPE = 3: NUMBERAC;  If COOLTYPE=1: TEMPHOMEAC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMBERAC (Changed from 2009) *NumOfWindowACs* | | | | | | |
| ASK | If COOLTYPE in(2,3) | | | | | |
| How many individual window/wall or portable air conditioning units do you use in your home?  1-15 | | | | | | |
| NEXT | WWTYPE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WWTYPE *WWTYPE, WWTYPEA* | | | | | | |
| ASK | If COOLTYPE in(2,3) | | | | | |
| Is the [most-used] individual air-conditioning unit installed in a window, installed in a wall, or is it a portable unit?  1 Window  2 Wall  3 Portable | | | | | | |
| NEXT | WWACAGE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WWACAGE *AgeOfWindowAC, AgeOfWindowACA* | | | | | | |
| ASK | If COOLTYPE in(2,3) | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. Approximately, how old is the [most-used] individual air conditioning unit in your home?  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | THERMAINWW | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| THERMAINWW (New) *HaveACThermostat* | | | | | | |
| ASK | If COOLTYPE in(2,3) | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. Do you have a thermostat that controls your most used individual air conditioning unit?  1 Yes  0 No | | | | | | |
| NEXT | If THERMAINWW=1: PROTHERM;  Else: USEWW | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| PROTHERMWW (New) *IsACThermostatSetBack* | | | | | | |
| ASK | If THERMAINWW=1 | | | | | |
| Some thermostats can be programmed so that different temperatures are automatically maintained at different times of the day. Is the thermostat that controls your most used individual unit programmable?  1 Yes  0 No | | | | | | |
| NEXT | USEWW | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| USEWWAC (Changed from 2009) *AmtWindowACUsed* | | | | | | |
| ASK | If COOLTYPE in(2,3) | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which best describes how your household controls your most used individual unit most of the time?  1 Set one temperature and leave it there most of the time  2 Manually adjust the temperature at night or when no one is at home  3 Program the thermostat to automatically adjust the temperature during the day and night at certain times  4 Turn equipment on or off as needed  5 Our household does not have control over the equipment  9 Other | | | | | | |
| NEXT | If USEWWAC=9: USEWWACFU  Else: TEMPHOMEAC | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| USEWWACFU *USEWWACFU* | | | | | | |
| ASK | If USEWWAC=9 | | | | | |
| Could you describe how your household uses your most used individual unit?  Open response | | | | | | |
| NEXT | TEMPHOMEAC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TEMPHOMEAC (Changed from 2009) *TempSetWhenHomeMult* | | | | | | |
| ASK | If AIRCOND=1 | | | | | |
| The next questions are about the temperature inside your home during the summer. If you have a thermostat, think about where your household sets the temperature for your air conditioning equipment. If you do not have a thermostat, your best guess about the temperature is fine.  During the summer, what is the typical temperature when someone is home during the day?  Open response | | | | | | |
| NEXT | TEMPGONEAC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TEMPGONEAC (Changed from 2009) *TempSetWhenOut* | | | | | | |
| ASK | If AIRCOND=1 | | | | | |
| What is the typical temperature when no one is inside your home during the day?  Open response | | | | | | |
| NEXT | TEMPNITEAC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TEMPNITEAC (Changed from 2009) *TempSetWhenAsleep* | | | | | | |
| ASK | If AIRCOND=1 | | | | | |
| What is the typical temperature inside your home at night?  Open response | | | | | | |
| NEXT | BASECOOL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| BASECOOL (Changed from 2009) *BASECOOL* | | | | | | |
| ASK | If AIRCOND=1 and CELLAR=1 | | | | | |
| Is any part of your basement cooled using the air conditioning equipment you told me about?  1 Yes  0 No | | | | | | |
| NEXT | If BASECOOL=1: BASECL2;  If BASECOOL ne 1 and ATTIC=1: ATTCCOOL;  If BASECOOL ne 1 and ATTIC ne 1 and PRKGPLC1=1: GARGCOOL;  If BASECOOL=0 and ATTIC ne and PRKGPLC1 ne 1: NUMCFAN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| BASECL2 (Changed from 2009) *APPHowCoolBsmnt* | | | | | | |
| ASK | If BASECOOL=1 | | | | | |
| About how much of your basement is cooled? Is it…  1 All  2 About half  3 Some | | | | | | |
| NEXT | If ATTIC=1: ATTCCOOL;  If ATTIC ne 1 and PRKGPLC1=1: GARGCOOL;  If ATTIC ne 1 and PRKGPLC1 ne 1: NUMCFAN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ATTCCOOL (Changed from 2009) *ATTCCOOL* | | | | | | |
| ASK | If AIRCOND=1 and ATTIC=1 | | | | | |
| Is any part of your attic cooled using the air conditioning equipment you told me about?  1 Yes  0 No | | | | | | |
| NEXT | If ATTCCOOL=1: ATTCCL2;  if ATTCCOOL ne 1 and PRKGPLC1=1: GARGHEAT;  If ATTCHEAT ne 1 and PRKGPLC1 ne 1: NUMCFAN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ATTCCL2 (Changed from 2009) *APPHowCoolAttic* | | | | | | |
| ASK | If ATTCCOOL=1 | | | | | |
| About how much of your attic is cooled? Is it…  1 All  2 About half  3 Some | | | | | | |
| NEXT | If PRKGPLC1=1: GARGCOOL;  Else NUMCFAN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| GARGCOOL (Changed from 2009) *HowCoolGarage* | | | | | | |
| ASK | If AIRCOND=1 and PRKGPLC1=1 | | | | | |
| Is your garage cooled using the air conditioning equipment you told me about?  1 Yes  0 No | | | | | | |
| NEXT | NUMCFAN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMCFAN (Changed from 2009) *NumCeilingFansUsed* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. How many of each type of fan does your household use?  Ceiling fans  0 – 15 | | | | | | |
| NEXT | NUMFLOORFAN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMFLOORFAN (NEW)  *NUMFLOORFAN* | | | | | | |
| ASK | All respondents | | | | | |
| Floor or window fans  0 – 15  Whole house fan (NUMWHOLEFAN)  Attic fan (NUMATTICFAN) | | | | | | |
| NEXT | NUMWHOLEFAN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| NUMWHOLEFAN (New) *NUMWHOLEFAN* | | | | | | |
| ASK | All respondents | | | | | |
| Whole house fans  0 – 15 | | | | | | |
| NEXT | NUMATTICFAN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| NUMATTICFAN (New) *NUMATTICFAN* | | | | | | |
| ASK | All respondents | | | | | |
| Attic fans  0 – 15 | | | | | | |
| NEXT | If NUMCFAN>0: USECFAN  Else: NOTMOIST | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| USECFAN (Changed from 2009) *MostUsedFanUsage, MostUsedFanUsageA* | | | | | | |
| ASK | If NUMCFAN>0 | | | | | |
| Thinking about the ceiling fan [that you use the most], how often is this fan used during the summer? Is it…  1 Turned on only a few days or nights when really needed  2 Turned on quite a bit  3 Turned on just about all summer  4 Not used at all | | | | | | |
| NEXT | NOTMOIST | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NOTMOIST *Dehumidifier* | | | | | | |
| ASK | All respondents | | | | | |
| Dehumidifiers remove moisture from the air and are often used in the summer. Is a dehumidifier used in your home?  1 Yes  0 No | | | | | | |
| NEXT | If NOTMOIST=1: MOISTTYPE  Else: TREESHAD | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MOISTTYPE (New) *DehumidifierType* | | | | | | |
| ASK | If NOTMOIST=1 | | | | | |
| Is your dehumidifier a portable dehumidifier or a whole home dehumidifier?  1 Portable  2 Whole home | | | | | | |
| NEXT | USENOTMOIST | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| USENOTMOIST (Changed from 2009) *DehumidifierUse* | | | | | | |
| ASK | If NOTMOIST=1 | | | | | |
| In the last year, how many months was the dehumidifier used? Was it…  1 less than 1 month,  2 1 to 3 months,  3 4 to 6 months,  4 7 to 9 months,  5 10 to 11 months, but not all year, or  6 Turned on all year long? | | | | | | |
| NEXT | TREESHAD | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TREESHAD *ShadeTree* | | | | | | |
| ASK | All respondents | | | | | |
| Do any large trees shade your home from the afternoon summer sun?  1 Yes  0 No | | | | | | |
| NEXT | IVCOMMEFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMEFILTER (Changed from 2009) *IVCOMMEFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the air conditioning section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMEFILTER=1: IVCOMME;  Else: Section F | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMME (Changed from 2009) *IVCOMME* | | | | | | |
| ASK | If IVCOMMEFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the air conditioning equipment in this housing unit and its’ usage that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section F | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION F: WATER HEATING**

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| --- | --- | --- | --- | --- | --- | --- |
| H2OHEATAPT (New) *H2OHEATAPT* | | | | | | |
| ASK | If TYPEHUQ in(4,5) | | | | | |
| Do you have a water heater in your apartment or is the water heater located somewhere else in this building?  1 In apartment  2 Somewhere else in building | | | | | | |
| NEXT | If H2OHEATAPT=1: FUELH2O;  Else: IVCOMMFFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| FUELH2O (Changed from 2009) *APPMainWaterHeatingFuel, APPMainWaterHeatingFuelA* | | | | | | |
| ASK | If TYPEHUQ in (1,2,3) or H2OHEATAPT=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. What fuel does your main water heater use?  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  8 Solar  21 Some other fuel | | | | | | |
| NEXT | If FUELH2O=21:FUELH2OFU;  Else: WHEATSIZ | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| FUELH2OFU *E3FollowUp* | | | | | | |
| ASK | If FUELH2O=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT | If H2OTYPE2=1: WHEATSIZ2;  If H2OTYPE2=2: WHEATAGE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WHEATSIZ (Changed from 2009) *APPSizeOfWaterHeater* | | | | | | |
| ASK | If TYPEHUQ in (1,2,3) or H2OHEATAPT=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. What is the approximate size of the main water heater?  1 Small storage tank (30 gallons or less)  2 Medium storage tank (31 to 49 gallons)  3 Large storage tank (50 gallons or more)  4 Tankless or on-demand | | | | | | |
| NEXT | WHEATAGE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| --- | --- | --- | --- | --- | --- | --- |
| WHEATAGE (Changed from 2009) *AgeHotH2OEquip* | | | | | | |
| ASK | If TYPEHUQ in (1,2,3) or H2OHEATAPT=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. Approximately how old is the main water heater?  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | If WHEATSIZ in (1,2,3): WHEATBKT;  Else: MORETHAN1H2O | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| WHEATBKT *WHBlanket* | | | | | | |
| ASK | If WHEATSIZ in (1,2,3) | | | | | |
| Has the main water heater in your home been insulated using a water heater blanket?  1 Yes  0 No | | | | | | |
| NEXT | MORETHAN1H2O | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MORETHAN1H2O (New) *MORETHAN1H2O* | | | | | | |
| ASK | If TYPEHUQ in (1,2,3) or H2OHEATAPT=1 | | | | | |
| Do you have more than one water heater?  1 Yes  0 No | | | | | | |
| NEXT | If MORETHAN1H2O=1: FUELH2O2;  Else: IVCOMMFFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FUELH2O2 (Changed from 2009) *APPOtherH2OFuel* | | | | | | |
| ASK | If MORETHAN1H2O=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. Which fuel does your second water heater use?  5 Electricity  1 Natural gas from underground pipes  2 Propane (bottled gas)  3 Fuel oil  4 Kerosene  7 Wood  8 Solar  21 Some other fuel | | | | | | |
| NEXT | If FUELH2O2=21:FUELH2O2FU;  Else: WHEATSIZ2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| FUELH2O2FU *E3aFollowUp* | | | | | | |
| ASK | If FUELH2O2=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT | If H2OTYPE2=1: WHEATSIZ2;  If H2OTYPE2=2: WHEATAGE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WHEATSIZ2 (Changed from 2009) *APPSizeOfWaterHeater2* | | | | | | |
| ASK | If MORETHAN1H2O=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. What is the approximate size of the second water heater?  1 Small storage tank (30 gallons or less)  2 Medium storage tank (31 to 49 gallons)  3 Large storage tank (50 gallons or more)  4 Tankless or on-demand | | | | | | |
| NEXT | WHEATAGE2 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| WHEATAGE2 (Changed from 2009) *AgeOfWaterHeater2* | | | | | | |
| ASK | If MORETHAN1H2O=1 | | | | | |
| Place show card XX in front of the respondent.  Please look at Card XX. Approximately how old is the second water heater?  1 Less than 2 years old  2 2 to 4 years old  3 5 to 9 years old  41 10 to 14 years old  42 15 to 19 years old  5 20 years or older  6 As old as the home (if volunteered) | | | | | | |
| NEXT | If WHEATSIZ2 in (1,2,3): WHEATBKT2;  Else: IVCOMMFFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| IVCOMMFFILTER (Changed from 2009) *IVCOMMFFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the water heating section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMFFILTER=1: IVCOMMF  Else: Section G | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMF (Changed from 2009) *IVCOMMF* | | | | | | |
| ASK | If IVCOMMFFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the water heating equipment in this housing unit and its’ usage that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section G | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION G: MISCELLANEOUS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| SWIMPOOL (Changed from 2009) *SwimmingPool* | | | | | | |
| ASK | If TYPEHUQ in(1,2,3) | | | | | |
| Does your home have its own swimming pool?  1 Yes  0 No | | | | | | |
| NEXT | If SWIMPOOL=1: MONPOOL  Else: RECBATH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MONPOOL (New) *MONPOOL* | | | | | | |
| ASK | If SWIMPOOL=1 | | | | | |
| In the last year, how many months was your swimming pool in use?  0 - 12 | | | | | | |
| NEXT | POOL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| POOL *HeatedPool* | | | | | | |
| ASK | If SWIMPOOL=1 | | | | | |
| Is it a heated pool?  1 Yes  0 No | | | | | | |
| NEXT | If POOL=1: FUELPOOL  Else: RECBATH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FUELPOOL (Changed from 2009) *APPPoolFuel* | | | | | | |
| ASK | If POOL=1 | | | | | |
| What fuel is used to heat the water in your swimming pool? Is it…  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas),  3 Fuel oil,  4 Kerosene,  8 Solar, or  21 Some other fuel? | | | | | | |
| NEXT | If FUELPOOL=21: FUELPOOLFU  Else: RECBATH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FUELPOOLFU *G2a1FollowUp* | | | | | | |
| ASK | If FUELPOOL=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT | RECBATH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RECBATH (Changed from 2009) *HotTub* | | | | | | |
| ASK | All respondents | | | | | |
| Does your home have its own heated hot tub, spa, or Jacuzzi, other than a bathtub?  1 Yes  0 No | | | | | | |
| NEXT | If RECBATH=1: MONTUB  Else: LGTINNUM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MONTUB (New) *MONTUB* | | | | | | |
| ASK | If RECBATH=1 | | | | | |
| In the last year, how many months was your hot tub, spa, or Jacuzzi in use?  0 - 12 | | | | | | |
| NEXT | FUELTUB | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FUELTUB (Changed from 2009) *APPHotTubFuel* | | | | | | |
| ASK | If RECBATH=1 | | | | | |
| What fuel is used to heat the water in your hot tub, spa, or Jacuzzi? Is it…  5 Electricity,  1 Natural gas from underground pipes,  2 Propane (bottled gas),  3 Fuel oil,  4 Kerosene,  8 Solar, or  21 Some other fuel? | | | | | | |
| NEXT | If FUELTUB=21: FUELTUBFU  Else: LGTINNUM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FUELTUBFU *G3aFollowUp* | | | | | | |
| ASK | If FUELTUB=21 | | | | | |
| Could you tell me what that other fuel is?  Open response | | | | | | |
| NEXT | LGTINNUM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LGTINNUM (New) *LGTINNUM* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. About how many light bulbs are installed inside your home? Include light bulbs in ceiling fixtures and fans, table and floor lamps, as well as those used infrequently, such as in hallways, closets, and garages. For fixtures with multiple bulbs, count each bulb separately.  1 Fewer than 20 light bulbs  2 20 to 39 light bulbs  3 40 to 59 light bulbs  4 60 to 79 light bulbs  5 80 or more light bulbs | | | | | | |
| NEXT | LGTINCAN | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| LGTINCAN (New) *LGTINCAN* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the light bulbs inside your home are incandescent bulbs?  1 All  2 Most  3 About half  4 Some  5 None | | | | | | |
| NEXT | LGTINCFL | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| LGTINCFL (New) *LGTINCFL* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the light bulbs inside your home are CFL bulbs?  1 All  2 Most  3 About half  4 Some  5 None | | | | | | |
| NEXT | LGTINLED | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| LGTINLED (New) *LGTINLED* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the light bulbs inside your home are LED bulbs?  1 All  2 Most  3 About half  4 Some  5 None | | | | | | |
| NEXT | LGTINCNTL | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| LGTINCNTL (New) *LGTINCNTL* | | | | | | |
| ASK | All respondents | | | | | |
| Are any of the light bulbs inside your home controlled by timers or dimmer switches?  1 Yes  0 No | | | | | | |
| NEXT | LGTIN4 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LGTIN4 (New) *LGTIN4* | | | | | | |
| ASK | All respondents | | | | | |
| How many of the light bulbs inside your home are used at least 4 hours per day?  0 - 99 | | | | | | |
| NEXT | If TYPEHUQ in(1,2,3): LGTOUTNUM  Else: AUDIT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LGTOUTNUM (New) *LGTOUTNUM* | | | | | | |
| ASK | If TYPEHUQ in(1,2,3) | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. About how many light bulbs are installed outside your home?  0 None  1 1 to 4 bulbs  2 5 to 9 bulbs  3 10 or more bulbs | | | | | | |
| NEXT | If LGTOUTNUM in(1,2,3): LGTOUTNITE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| LGTOUTNITE (New) *LGTOUTNITE* | | | | | | |
| ASK | If LGTOUTNUM in(1,2,3) | | | | | |
| How many of the light bulbs outside your home are typically left on all night?  0 - 99 | | | | | | |
| NEXT | If LGTOUTNITE>0: LGTOUTCAN, LGTOUTCFL, LGTOUTLED, LGTOUTNG | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| LGTOUTCAN, LGTOUTCFL, LGTOUTLED, *LGTOUTCAN, LGTOUTCFL, LGTOUTLED,*LGTOUTNG (New) *LGTOUTNG* | | | | | | |
| ASK | If LGTOUTNITE>0 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of these types of lights bulbs are typically left on all night outside your home?  Mark all that apply.  Incandescent bulbs (LGTOUTCAN)  CFL bulbs (LGTOUTCFL)  LED bulbs (LGTOUTLED)  Natural gas lights (LGTOUTNG) | | | | | | |
| NEXT | LGTOUTCNTL | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| LGTOUTCNTL *LGTOUTCNTL* | | | | | | |
| ASK | If LGTOUTNUM in(1,2,3) | | | | | |
| Are any of the light bulbs outside your home controlled by motion detectors or light sensors?  1 Yes  0 No | | | | | | |
| NEXT | AUDIT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| AUDIT *Audit* | | | | | | |
| ASK | All respondents | | | | | |
| A home energy audit is when a trained professional examines how energy is used in all parts of a home. After examining a home, the energy auditor will provide a list of ways to reduce energy use and save money on energy bills. Has your home had an energy audit?  1 Yes  0 No | | | | | | |
| NEXT | If AUDIT=1: AUDITCHG  Else if KOWNRENT=1: EELIGHTS, EETHERM, FREEAUDIT, REBATEAPP, RECYCAPP, SUBLOAN, TAXCREDITAPP, TAXCREDITWIN, WEATHERIZATION, BENOTHER  Else: ENERGYASST | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| AUDITCHG (New) *AUDITCHG* | | | | | | |
| ASK | If AUDIT=1 | | | | | |
| Did your household make any of the changes suggested by the energy auditor?  1 Yes  0 No | | | | | | |
| NEXT | If KOWNRENT=1: EELIGHTS, EETHERM, FREEAUDIT, REBATEAPP, RECYCAPP, SUBLOAN, TAXCREDITAPP, TAXCREDITWIN, WEATHERIZATION, BENOTHER  Else: ENERGYASST | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| EELIGHTS, EETHERM, FREEAUDIT, *EELIGHTS, EETHERM, FREEAUDIT,*REBATEAPP, RECYCAPP, SUBLOAN, *REBATEAPP, RECYCAPP, SUBLOAN,*TAXCREDITAPP, TAXCREDITWIN, *TAXCREDITAPP, TAXCREDITWIN,*WEATHERIZATION, BENOTHER (New) *WEATHERIZATION, BENOTHER* | | | | | | |
| ASK | If KOWNRENT=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Has your household received any energy-related benefits or assistance for this home?  Mark all that apply.  Free or subsidized energy-efficient light bulbs (EELIGHTS)  Free or subsidized programmable thermostat (EETHERM)  Free or subsidized home energy audit (FREEAUDIT)  Utility or energy supplier rebate for new appliance or equipment (REBATEAPP)  Recycling of old appliance or equipment (for example, a refrigerator) (RECYCAPP)  Subsidized loan for new appliance or equipment (SUBLOAN)  Tax credit for new appliance or equipment (TAXCREDITAPP)  Tax credit for new windows or insulation (TAXCREDITWIN)  Weatherization assistance program (WEATHERIZATION)  Some other benefit (BENOTHER) | | | | | | |
| NEXT | If BENOTHER=1: BENOTHERFU  Else: ENERGYASST | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| BENOTHERFU (New) *BENOTHERFU* | | | | | | |
| ASK | If BENOTHER=1 | | | | | |
| Could you tell me what that other benefit was?  Open response | | | | | | |
| NEXT | ENERGYASST | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ENERGYASST (New) *ENERGYASST* | | | | | | |
| ASK | All respondents | | | | | |
| Has your household participated in a home energy assistance program that helps pay energy bills or fix broken equipment?  1 Yes  0 No | | | | | | |
| NEXT | If ENERGYASST=1: ENERGYASST11, ENERGYASST12, ENERGYASST13, ENERGYASST14, ENERGYASST15, ENERGYASSTOTH;  Else: ESWIN, ESFRIG, ESFREEZE, ESDISHW, ESCWASH, ESDRYER, ESWATER, ESLIGHT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ENERGYASST11, ENERGYASST12, *ENERGYASST11, ENERGYASST12,*ENERGYASST13, ENERGYASST14, *ENERGYASST13, ENERGYASST14,*ENERGYASST15, ENERGYASSTOTH (New) *ENERGYASST15, ENERGYASSTOTH* | | | | | | |
| ASK | If ENERGYASST=1 | | | | | |
| In which of the following years did your household receive home energy assistance?  Mark all that apply.  1 2011  2 2012  3 2013  4 2014  5 2015  6 Some other year(s) | | | | | | |
| NEXT | ESWIN, ESFRIG, ESFREEZE, ESDISHW, ESCWASH, ESDRYER, ESWATER, ESLIGHT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ESWIN, ESFRIG, ESFREEZE, *EnergyStarWindows, EnergyStarFrig, EnergyStarFreezer,*ESDISHW, ESCWASH, *EnergyStarDishwash, EnergyStarClothesWasher,* ESDRYER, ESWATER, *EnergyStarDryer,EnergyStarWaterHeater,*ESLIGHT (New) (Changed from 2009) *EnergyStarLighting* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of these products in your home are ENERGY STAR qualified?  Mark all that apply.  Windows  Refrigerator  Freezer  Dishwasher  Clothes washer  Clothes dryer  Water heater  Light bulbs | | | | | | |
| NEXT | If THERMAIN=1 or THERMAINAC=1: SMARTTHERM  Else if TYPEHUQ in(1,2,3,4): OUTLET  Else: ALTFUELPEV, ALTFUELHYB, ALTFUELE85 | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| SMARTTHERM (New) *SMARTTHERM* | | | | | | |
| ASK | If THERMAIN=1 or THERMAINAC=1 | | | | | |
| Does your home have a “smart” or Internet-connected thermostat?  1 Yes  0 No | | | | | | |
| NEXT | If TYPEHUQ in(1,2,3,4): OUTLET  Else: ALTFUELPEV, ALTFUELHYB, ALTFUELE85 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OUTLET *CarOutlet* | | | | | | |
| ASK | If TYPEHUQ in(1,2,3,4) | | | | | |
| Do you or any member of your household park a car within about 20 feet of an electric outlet? Only outlets in garages, carports, or the exterior of the home are to be considered.  1 Yes  0 No | | | | | | |
| NEXT | ALTFUELPEV, ALTFUELHYB, ALTFUELE85 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ALTFUELPEV, ALTFUELHYB, ALTFUELE85 (New) *ALTFUELPEV, ALTFUELHYB, ALTFUELE85* | | | | | | |
| ASK | All respondents | | | | | |
| Do you or any member of your household own or lease any of the following alternative fuel vehicles?  Mark all that apply.  Plug-in electric vehicle or PEV (ALTFUELPEV)  Gas-electric hybrid (ALTFUELHYB)  E85 or "flex-fuel" vehicle (ALTFUELE85) | | | | | | |
| NEXT | If ALTFUELE85=1: E85USE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| E85USE (New) *E85USE* | | | | | | |
| ASK | If ALTFUELE85=1 | | | | | |
| When buying fuel for the E85 vehicle, how often is E85 purchased, as compared with normal gasoline? Is it…  1 All of the time  2 Most of the time  3 About half the time  4 Some of the time  5 Never | | | | | | |
| NEXT | IVCOMMGFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELOTHER | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| UGOTH | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| LPOTHER | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| FOOTHER | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| KROTHER | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| SOLOTHER | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| WDOTHUSE | | | | | | |
| ASK |  | | | | | |
| Derived | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| IVCOMMGFILTER *IVCOMMGFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the miscellaneous section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMGFILTER=1: IVCOMMG  Else: Section H | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMG *IVerCommentsG* | | | | | | |
| ASK | If IVCOMMGFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the miscellaneous characteristics of this housing unit that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section H | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION H: FUELS USED**

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| --- | --- | --- | --- | --- | --- | --- |
| BACKUP (New) *BACKUP* | | | | | | |
| ASK | All respondents | | | | | |
| Does your household have a back-up generator that can be used for generating electricity in case of a power outage or emergency?  1 Yes  0 No | | | | | | |
| NEXT | ONSITETYPE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ONSITETYPE (Changed from 2009) *RenewableType* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Not including back-up generators, does your home have any of these on-site systems that generates electricity?  0 No on-site generation system  1 Solar or photovoltaic system  2 Small wind turbine  3 Combined heat and power system  9 Some other on-site generation system | | | | | | |
| NEXT | If ONSITETYPE=9: ONSITETYPEFU  If ONSITETYPE in(1,2,3): ONSITEGRID  Else: OTHFUELUSE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| ONSITETYPEFU *H2aFollowUp* | | | | | | |
| ASK | If ONSITETYPE=9 | | | | | |
| Could you tell me what that other on-site system is?  Open response | | | | | | |
| NEXT | ONSITEGRID | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ONSITEGRID *GridConnect* | | | | | | |
| ASK | If ONSITETYPE in(1,2,3,9) | | | | | |
| Is your on-site system connected to the grid?  1 Yes  0 No | | | | | | |
| NEXT | ONSITEGENCAP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ONSITEGENCAP (New) *ONSITEGENCAP* | | | | | | |
| ASK | If ONSITETYPE in(1,2,3,9) | | | | | |
| "Capacity" is how much electricity a system can generate at one time. It is typically measured in kW (kilowatts). What is the capacity of your on-site system?  Open response | | | | | | |
| NEXT | OTHFUELUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OTHFUELUSE *INTRO* | | | | | | |
| ASK | All respondents | | | | | |
| You have mentioned using [CAPI WILL LIST THE FUELS IDENTIFIED AS USED BY THE HOUSEHOLD]. Do you use [CAPI WILL LIST THE FUELS WHICH HAVE NOT BEEN IDENTIFIED AS USED BY THE HOUSEHOLD] as a fuel for any purpose in your home?  1 Yes  0 No | | | | | | |
| NEXT | If OTHFUELUSE=1: USEEL, USENG, USELP, USEFO, USEKERO, USEWOOD, USESOLAR  Else if USEEL=1: ELPAY  Else if USENG=1: NGPAY  Else if USEFO=1: FOPAY  Else if USELP=1: LPGPAY  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| USEEL, USENG, USELP, USEFO, *WhichOnes1, WhichOnes2, WhichOnes3, WhichOnes4,*USEKERO, USEWOOD, USESOLAR *WhichOnes5, WhichOnes6, WhichOnes7* | | | | | | |
| ASK | If OTHFUELUSE=1 | | | | | |
| Which of these other fuels do you also use? Is it…  Mark all that apply.  Electricity, (USEEL)  Natural gas, (USENG)  Propane (bottled gas), (USELP)  Fuel oil, (USEFO)  Kerosene, (USEKERO)  Wood, or (USEWOOD)  Solar? (USESOLAR) | | | | | | |
| NEXT | OTHFUELUSE | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| OTHFUELFU (New) *OTHFUELFU* | | | | | | |
| ASK | If OTHFUELUSE=1 | | | | | |
| Could you tell me how [CAPI WILL LIST THE FUELS FROM OTHFUELUSE] is used in your home?  Open response | | | | | | |
| NEXT | If USEEL=1: ELPAY  Else if USENG=1: NGPAY  Else if USEFO=1: FOPAY  Else if USELP=1: LPGPAY  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELPAY (New) *WhoPaysElec* | | | | | | |
| ASK | If USEEL=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of the following describes who is responsible for paying for the electricity used in this home?  1 Household is responsible for paying for all electricity used in this home  2 All electricity used in this home is included in the rent or condo fee  3 Some is paid by the household, some is included in the rent or condo fee  9 Paid for some other way | | | | | | |
| NEXT | If ELPAY=3: PELHEAT, PELHOTWA, PELAC, PELCOOK, PELLIGHT  Else if USENG=1: NGPAY  Else if USEFO=1: FOPAY  Else if USELP=1: LPGPAY  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** | Yes |

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| PELHEAT, PELHOTWA, *WhoPaysElecHeat, WhoPaysElecHotH2O,*PELAC, PELCOOK, *WhoPaysElecAirCond, WhoPaysElecCooking,*PELLIGHT (Changed from 2009) *WhoPaysElecLighting* | | | | | | |
| ASK | If ELPAY=3 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. For which electricity uses are the costs included in your rent or condo fee?  Mark all that apply.  Heating (PELHEAT)  Water heating (PELHOTWA)  Air conditioning (PELAC)  Cooking (PELCOOK)  Lighting and appliances (PELLIGHT) | | | | | | |
| NEXT | If USENG=1: NGPAY  Else if USEFO=1: FOPAY  Else if USELP=1: LPGPAY  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| NGPAY (New) *WhoPaysNatGas* | | | | | | |
| ASK | If USENG=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of the following describes who is responsible for paying for the natural gas used in this home?  1 Household is responsible for paying for all natural gas used in this home  2 All natural gas used in this home is included in the rent or condo fee  3 Some is paid by the household, some is included in the rent or condo fee  9 Paid for some other way | | | | | | |
| NEXT | If NGPAY=3: PUGHEAT, PUGHOTWA, PUGCOOK, PUGOTH  Else if USEFO=1: FOPAY  Else if USELP=1: LPGPAY  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| PUGHEAT, PUGHOTWA, *WhoPaysNatGasHeat, WhoPaysNatGasHotH2O,*PUGCOOK, PUGOTH (Changed from 2009) *WhoPaysNatGasCook, WhoPaysNatGasOther* | | | | | | |
| ASK | If NGPAY=3 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. For which electricity uses are the costs included in your rent or condo fee?  Mark all that apply.  Heating (PUGHEAT)  Water heating (PUGHOTWA)  Cooking (PUGCOOK)  Other uses (PUGOTH) | | | | | | |
| NEXT | If USEFO=1: FOPAY  Else if USELP=1: LPGPAY  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| FOPAY (Changed from 2009) *WhoPaysFuelOil* | | | | | | |
| ASK | If USEFO=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of the following describes who is responsible for paying for the fuel oil used in this home?  1 Household is responsible for paying for all fuel oil used in this home  2 All fuel oil used in this home is included in the rent or condo fee  3 Some is paid by the household, some is included in the rent or condo fee  9 Paid for some other way | | | | | | |
| NEXT | If USELP=1: LPGPAY  Else QUANTFO | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| LPGPAY (Changed from 2009) *WhoPaysBttldGas* | | | | | | |
| ASK | If USELP=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which of the following describes who is responsible for paying for the propane (bottled gas) used in this home?  1 Household is responsible for paying for all propane used in this home  2 All propane used in this home is included in the rent or condo fee  3 Some is paid by the household, some is included in the rent or condo fee  9 Paid for some other way | | | | | | |
| NEXT | LPGDELV | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| LPGDELV *BttldGasDelivered* | | | | | | |
| ASK | If USELP=1 | | | | | |
| Is propane (bottled gas) delivered to your home?  1 Yes  0 No | | | | | | |
| NEXT | If LPGDELV=1: NDIFLPCO  Else: LPGCASH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NDIFLPCO (Changed from 2009) *NumBttldGasCos* | | | | | | |
| ASK | If LPGDELV=1 | | | | | |
| How many different companies delivered propane (bottled gas) to your home in the last year?  0 - 10 | | | | | | |
| NEXT | If NLPDELNC>0: NLPDELNC  Else: LPGCASH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NLPDELNC (Changed from 2009) *NumBttldGasDels* | | | | | | |
| ASK | If NLPDELNC>0 | | | | | |
| About how many deliveries did your household get in the last year?  0 - 25 | | | | | | |
| NEXT | LPGCASH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGCASH (New) *LPGCASH* | | | | | | |
| ASK | If USELP=1 | | | | | |
| In the last year, did your household buy propane (bottled gas) and bring it home?  1 Yes  0 No | | | | | | |
| NEXT | If LPGCASH=1: NLPGCASH  Else if USEFO=1: QUANTFO  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NLPGCASH (New) *NLPGCASH* | | | | | | |
| ASK | If LPGCASH=1 | | | | | |
| In the last year, about how many times did your household buy propane and bring it home?  1 - 99 | | | | | | |
| NEXT | LPGTANKLB | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGTANKLB (New) *NLPGALNC* | | | | | | |
| ASK | If LPGCASH=1 | | | | | |
| Thinking about the typical propane tank your household uses, how many pounds does it hold? Most cylinder exchange programs use 20 pound tanks.  1 - 99 | | | | | | |
| NEXT | PRICELPG | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PRICELPG (New) *PRICELPG* | | | | | | |
| ASK | If LPGCASH=1 | | | | | |
| About how much did your household spend each time propane was purchased in the last year?  1 - 999 | | | | | | |
| NEXT | If USEFO=1: QUANTFO  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| QUANTFO (Changed from 2009) *GalsFuelOilUsed* | | | | | | |
| ASK | If USEFO=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. About how many gallons of fuel oil did your household use in the last year?  1 Less than 100 gallons  2 100 to 499 gallons  3 500 to 1,000 gallons  4 More than 1,000 gallons | | | | | | |
| NEXT | NDIFFOCO | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| NDIFFOCO (Changed from 2009) *NumFuelOilCos* | | | | | | |
| ASK | If USEFO=1 | | | | | |
| How many different companies delivered fuel oil to your home in the last year?  0 - 10 | | | | | | |
| NEXT | If NDIFFOCO>0: NFODELNC  Else if USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NFODELNC (Changed from 2009) *NumFuelOilDels* | | | | | | |
| ASK | If NDIFFOCO>0 | | | | | |
| About how many deliveries did your household get in the last year?  0 - 25 | | | | | | |
| NEXT | If USEKERO=1: KERODEL  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KERODEL *KeroseneDelivered* | | | | | | |
| ASK | If USEKERO=1 | | | | | |
| Is kerosene delivered to your home?  1 Yes  0 No | | | | | | |
| NEXT | If KERODEL=1: NDIFKRCO  Else: KEROCASH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NDIFKRCO (Changed from 2009) *NumKeroseneCos* | | | | | | |
| ASK | If KERODEL=1 | | | | | |
| How many different companies delivered kerosene to your home in the last year?  0 - 10 | | | | | | |
| NEXT | If NDIFKRCO>0: NKRDEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NKRDEL (Changed from 2009) *NumKeroseneDels* | | | | | | |
| ASK | If NDIFKRCO>0 | | | | | |
| About how many deliveries did your household get in the last year?  0 - 25 | | | | | | |
| NEXT | KEROCASH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROCASH (Changed from 2009) *CashNCarryKero* | | | | | | |
| ASK | If USEKERO=1 | | | | | |
| Did your household buy kerosene in the last year and bring it home, that is, cash and carry?  1 Yes  0 No | | | | | | |
| NEXT | If KEROCASH=1: NOCRCASH  Else if USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NOCRCASH (Changed from 2009) *NumKeroCashBuys* | | | | | | |
| ASK | If KEROCASH=1 | | | | | |
| How many times in the last year did your household buy kerosene and bring it home?  0 - 55 | | | | | | |
| NEXT | If NOCRCASH>1: NKRGALNC | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NKRGALNC *GalsKeroPerBuy* | | | | | | |
| ASK | If KEROCASH=1 | | | | | |
| On average, how many gallons of kerosene did your household buy and bring home each time?  0 - 77 | | | | | | |
| NEXT | PRICEKER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PRICEKER *KeroPricePerGal* | | | | | | |
| ASK | If KEROCASH=1 | | | | | |
| On average, about how much per gallon did your household pay for kerosene?  0.50 - 5.00 | | | | | | |
| NEXT | If USEWOOD=1: WOODLOGS, WDSCRAP, WDPELLET, WDOTHER  Else: IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WOODLOGS, WDSCRAP, *KindWoodBurned1, KindWoodBurned2,*WDPELLET, WDOTHER *KindWoodBurned3, KindWoodBurned4* | | | | | | |
| ASK | If USEWOOD=1 | | | | | |
| You mentioned that you use wood as a fuel in your household. Do you burn…  Mark all that apply.  Wood logs or split wood, (WOODLOGS)  Wood scraps, (WOODSCRAP)  Wood pellets, or (WDPELLET)  Any other kind of wood? (WDOTHER) | | | | | | |
| NEXT | If WDPELLET=1: PELLETAMT  Else if WOODLOGS=1 or WDSCRAP=1 or WDOTHER=1: NUMCORDS  Else: WOODPUR | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PELLETAMT (New) *PELLETAMT* | | | | | | |
| ASK | If WDPELLET=1 | | | | | |
| In the last year, about how many 40-pound bags of wood pellets did your household burn? A ton (which may also be called a pallet) equals fifty 40-pound bags.  0 - 9999 | | | | | | |
| NEXT | If WOODLOGS=1 or WDSCRAP=1 or WDOTHER=1: NUMCORDS  Else: WOODPUR | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NUMCORDS (Changed from 2009) *NumCordsUsed* | | | | | | |
| ASK | If WOODLOGS=1 or WDSCRAP=1 or WDOTHER=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. In the last year, about how many cords of wood did your household burn?  1 Half a cord or less  2 About one cord  3 About two cords  4 Three to five cords  5 More than five cords | | | | | | |
| NEXT | If NUMCORDS=5: WDAMOUNT  Else: WOODPUR | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| WDAMOUNT (Changed from 2009) *AmtWoodBurned* | | | | | | |
| ASK | If NUMCORDS=5 | | | | | |
| In the last year, about how many cords of wood did your household burn?  5.00 - 100.00 | | | | | | |
| NEXT | WOODPUR | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WOODPUR (New) *WOODPUR* | | | | | | |
| ASK | If USEWOOD=1 | | | | | |
| Was the wood used by your household in the last year…  1 Purchased by your household,  2 Obtained free of charge, or  3 A combination of purchased and obtained free of charge? | | | | | | |
| NEXT | If WOODPUR in(1,3): WOODCOST | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WOODCOST (New) *WOODCOST* | | | | | | |
| ASK | If WOODPUR in(1,3) | | | | | |
| About how much did your household spend on wood in the last year?  0 - 99999 | | | | | | |
| NEXT | IVCOMMHFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMHFILTER *IVCOMMHFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the fuels used section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMHFILTER=1: IVCOMMH  Else: Section I | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMHFILTER *IVerCommentsH* | | | | | | |
| ASK | If IVCOMMHFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the fuels used by this housing unit that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section I | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION I: HOUSING UNIT MEASUREMENT**

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| SQFTEST (Changed from 2009) *SquareFootage* | | | | | | |
| ASK | All respondents | | | | | |
| To understand the usage of energy in your home, we need to know about its size and shape. About how many square feet is your home? Your best estimate will do.  100 - 50,000 | | | | | | |
| NEXT | If CELLAR=1 or ATTIC=1 or PRKGPLC1=1: SQFTINCB, SQFTINCA, SQFTINCG  Else: SHAPE1FLRA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| SQFTINCB, SQFTINCA, SQFTINCG (New) *SQFTINCB, SQFTINCA, SQFTINCG* | | | | | | |
| ASK | If CELLAR=1 or ATTIC=1 or PRKGPLC1=1 | | | | | |
| Which of the following areas are included in your estimate of [FILL: SQFTEST] square feet? Your…  [If CELLAR=1: Basement] (SQFTINCB)  [If ATTIC=1: Attic] (SQFTINCA)  [If PRKGPLC1=1: Attached garage] (SQFTINCG) | | | | | | |
| NEXT | SHAPE1FLRA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SHAPE1FLRA (Changed from 2009) *ShapeOf1stFloor* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Thinking about the main or first floor of your home, let’s work together to find which of these best describes the shape [If GARGLOC=2: including the garage].  1 Square or Rectangle  2 T-shaped (2 Squares or Rectangles)  3 L-shaped (2 Squares or Rectangles  4 Some other shape | | | | | | |
| NEXT | If STORIES in(20,31,32) or NAPTFLRS>1: SHAPE2FLR  Else if ATTICFIN in(1,2) or ATTCHEAT=1: SHAPEATTIC  Else if CELLAR=1: SHAPEBASE  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| SHAPE2FLR *Footprint2ndFloorShape* | | | | | | |
| ASK | If STORIES in(20,31,32) or NAPTFLRS>1 | | | | | |
| Is the shape of the second floor of this home the same as the first floor?  1 Yes  0 No | | | | | | |
| NEXT | If SHAPE2FLR=1: SIZE2FLR  Else: SHAPE2FLRA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SIZE2FLR *Footprint2ndFloorSize* | | | | | | |
| ASK | If SHAPE2FLR=1 | | | | | |
| Is the size of the second floor of this home the same as the first floor?  1 Yes  0 No | | | | | | |
| NEXT | If STORIES in(31,32) or NAPTFLRS>2: SHAPE3FLR  Else if ATTICFIN in(1,2) or ATTCHEAT=1: SHAPEATTIC  Else if CELLAR=1: SHAPEBASE  Else if GARGLOC=2 and SIZE2FLR=1: OVERGARG  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SHAPE2FLRA (Changed from 2009) *ShapeOf2ndFloor* | | | | | | |
| ASK | If (STORIES in(20,31,32) or NAPTFLRS>1) and SHAPE2FLR ne 1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Thinking about the second floor of your home, which best describes the shape?  1 Square or Rectangle  2 T-shaped (2 Squares or Rectangles)  3 L-shaped (2 Squares or Rectangles  4 Some other shape | | | | | | |
| NEXT | If STORIES in(31,32) or NAPTFLRS>2: SHAPE3FLR  Else if ATTICFIN in(1,2) or ATTCHEAT=1: SHAPEATTIC  Else if CELLAR=1: SHAPEBASE  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| SHAPE3FLR *Footprint3rdFloorShape* | | | | | | |
| ASK | If STORIES in(31,32) or NAPTFLRS>2 | | | | | |
| Is the shape of the third floor of this home the same as the second floor?  1 Yes  0 No | | | | | | |
| NEXT | If SHAPE3FLR=1: SIZE3FLR  Else: SHAPE3FLRA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SIZE3FLR *Footprint3rdFloorSize* | | | | | | |
| ASK | If SHAPE3FLR=1 | | | | | |
| Is the size of the third floor of this home the same as the second floor?  1 Yes  0 No | | | | | | |
| NEXT | If ATTICFIN in(1,2) or ATTCHEAT=1: SHAPEATTIC  Else if CELLAR=1: SHAPEBASE  Else if GARGLOC=2 and SIZE2FLR=1: OVERGARG  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SHAPE3FLRA (Changed from 2009) *ShapeOf3rdFloor* | | | | | | |
| ASK | If (STORIES in(31,32) or NAPTFLRS>2) and SHAPE3FLR ne 1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Thinking about the third floor of your home, which best describes the shape?  1 Square or Rectangle  2 T-shaped (2 Squares or Rectangles)  3 L-shaped (2 Squares or Rectangles  4 Some other shape | | | | | | |
| NEXT | If ATTICFIN in(1,2) or ATTCHEAT=1: SHAPEATTIC  Else if CELLAR=1: SHAPEBASE  Else if GARGLOC=2 and SIZE2FLR=1: OVERGARG  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| SHAPEATTIC (Changed from 2009) *FootprintAtticShape* | | | | | | |
| ASK | If ATTICFIN in(1,2) or ATTCHEAT=1 | | | | | |
| Is the shape of the attic of this home the same as the floor under it?  1 Yes  0 No | | | | | | |
| NEXT | If SHAPEATTIC=1: SIZEATTIC  Else: SHAPEATTICA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SIZEATTIC *FootprintAtticSize* | | | | | | |
| ASK | If SHAPEATTIC=1 | | | | | |
| Is the size of the attic of this home the same as the floor under it?  1 Yes  0 No | | | | | | |
| NEXT | If CELLAR=1: SHAPEBASE  Else if (GARGLOC=2 and STORIES=10 and SIZEATTIC=1) or (GARGLOC=2 and SIZE2FLR=1): OVERGARG  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SHAPEATTICA (Changed from 2009) *ShapeOfAttic* | | | | | | |
| ASK | If ATTICFIN in(1,2) or ATTCHEAT=1 and SHAPEATTIC ne 1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Thinking about the attic of your home, which best describes the shape?  1 Square or Rectangle  2 T-shaped (2 Squares or Rectangles)  3 L-shaped (2 Squares or Rectangles  4 Some other shape | | | | | | |
| NEXT | If CELLAR=1: SHAPEBASE  Else if GARGLOC=2 and SIZE2FLR=1: OVERGARG  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| SHAPEBASE (Changed from 2009) *FootprintBasementShape* | | | | | | |
| ASK | If CELLAR=1 | | | | | |
| Is the shape of the basement of this home the same as the floor directly above it?  1 Yes  0 No | | | | | | |
| NEXT | If SHAPEBASE=1: SIZEBASE  Else: SHAPEBASEA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| SIZEBASE *FootprintBasementSize* | | | | | | |
| ASK | If SHAPEBASE=1 | | | | | |
| Is the size of the basement of this home the same as the floor directly above it?  1 Yes  0 No | | | | | | |
| NEXT | If (GARGLOC=1 and SIZEBASE=1) or (GARGLOC=2 and STORIES=10 and SIZEATTIC=1) or (GARGLOC=2 and SIZE2FLR=1): OVERGARG  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| SHAPEBASEA (Changed from 2009) *ShapeOfBasement* | | | | | | |
| ASK | If CELLAR=1 and SHAPEBASE ne 1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Thinking about the basement of your home, which best describes the shape [If LocationOfGarage=1: including the garage]?  1 Square or Rectangle  2 T-shaped (2 Squares or Rectangles)  3 L-shaped (2 Squares or Rectangles  4 Some other shape | | | | | | |
| NEXT | If (GARGLOC=2 and STORIES=10 and SIZEATTIC=1) or (GARGLOC=2 and SIZE2FLR=1): OVERGARG  Else: MEASURE | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| OVERGARG (New) *OVERGARG* | | | | | | |
| ASK | If (GARGLOC=1 and SIZEBASE=1) or (GARGLOC=2 and STORIES=10 and SIZEATTIC=1) or (GARGLOC=2 and SIZE2FLR=1) | | | | | |
| I've recorded that your [if GARGLOC=1 and SIZEBASE=1: first floor] [if GARGLOC=2 and STORIES=10 and SIZEATTIC=1: attic] [if GARGLOC=2 and SIZE2FLR=1: second floor] is the same shape and size as your [if GARGLOC=1 and SIZEBASE=1: basement] [if GARGLOC=2: first floor], which includes your garage. Is there a room over your garage?  1 Yes  0 No | | | | | | |
| NEXT | MEASURE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MEASURE *PermissionToMeasure* | | | | | | |
| ASK | All respondents | | | | | |
| [If SQFTEST=DK,RF: In order to best understand the usage of energy in your home; If SQFTEST>0: Even though you have given me your best estimate,] we need to know its exact size in square feet. With your permission, I would like to measure your home.  1 Yes  0 No | | | | | | |
| NEXT | TOTSQFT\_EN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TOTSQFT\_EN | | | | | | |
| ASK | If MEASURE=1 | | | | | |
| Interviewer Task: Use the measurement worksheet to record the measurements of each level of this home.  100 - 50,000 | | | | | | |
| NEXT | IVCOMMIFILTER | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| IVCOMMIFILTER *IVCOMMIFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the housing unit measurement section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMIFILTER=1: IVCOMMI  Else: Section J | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMI *IVerCommentsI* | | | | | | |
| ASK | If IVCOMMIFILTER=1 | | | | | |
| Interviewer Task: Record any information here about this household’s measurements that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section J | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION J: FUEL BILLS**

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| ELBILLTOSCAN (Changed from 2009) *HaveElecBilltoScan* | | | | | | |
| ASK | If ELPAY in(1,3) | | | | | |
| Do you have a recent electric bill that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If ELBILLTOSCAN=0: ELWHYNOT  Else: ELSUPPNAME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELWHYNOT (Changed from 2009) *WhyNotHaveElecBill* | | | | | | |
| ASK | If ELBILLTOSCAN=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | ELSUPPNAME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELSUPPNAME (Changed from 2009) *ElecSupplierName* | | | | | | |
| ASK | If ELPAY in(1,3) | | | | | |
| What is the name of your household's electricity supplier?  Interviewer attempts to find the response in a look-up table of known electricity suppliers. If supplier is not found, the interviewer records an open response. | | | | | | |
| NEXT | If electricity supplier was found in look-up table: ELLOOKUPCNFRM  Else if ELBILLTOSCAN=1 and electricity supplier was not found in look-up table: ELSUPPSTREET  Else if NGPAY in(1,3): NGBILLTOSCAN  Else if LPGPAY in(1,3): LPGBILLTOSCAN  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELSUPPSTREET *ElecSupplierAddress* | | | | | | |
| ASK | If ELBILLTOSCAN=1 and electricity supplier was not found in look-up table | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | ELSUPPCITY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELSUPPCITY *ElecSupplierCity* | | | | | | |
| ASK | If ELBILLTOSCAN=1 and electricity supplier was not found in look-up table | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | ELSUPPSTATE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELSUPPSTATE *ElecSupplierState* | | | | | | |
| ASK | If ELBILLTOSCAN=1 and electricity supplier was not found in look-up table | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | ELSUPPZIP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELSUPPZIP *ElecSupplierZIP* | | | | | | |
| ASK | If ELBILLTOSCAN=1 and electricity supplier was not found in look-up table | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | ELSUPPAREACODE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELSUPPAREACODE *ELSuppAreaCode* | | | | | | |
| ASK | If ELBILLTOSCAN=1 and electricity supplier was not found in look-up table | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | ELSUPPTELNUMBER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELSUPPTELNUMBER *ELSuppTelNumber* | | | | | | |
| ASK | If ELBILLTOSCAN=1 and electricity supplier was not found in look-up table | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | If NGPAY in(1,3): NGBILLTOSCAN  Else if LPGPAY in(1,3): LPGBILLTOSCAN  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELLOOKUPCNFRM *ConfElecSupp* | | | | | | |
| ASK | If electricity supplier was found in look-up table | | | | | |
| Just to verify, I have selected that your electricity supplier is [SUPPLIER]. Is that correct?  1 Yes  0 No | | | | | | |
| NEXT | If ELLOOKUPCNFRM=0: ELSUPPNAME  Else if NGPAY in(1,3): NGBILLTOSCAN  Else if LPGPAY in(1,3): LPGBILLTOSCAN  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGBILLTOSCAN (Changed from 2009) *HaveNGBilltoScan* | | | | | | |
| ASK | If NGPAY in(1,3) | | | | | |
| Do you have a recent natural gas bill that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If NGBILLTOSCAN=0: NGWHYNOT  Else: NGSUPPNAME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGWHYNOT (Changed from 2009) *WhyNotHaveNGBill* | | | | | | |
| ASK | If NGBILLTOSCAN=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | NGSUPPNAME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGSUPPNAME (Changed from 2009) *NGSupplierName* | | | | | | |
| ASK | If NGPAY in(1,3) | | | | | |
| What is the name of your household's natural gas supplier?  Interviewer attempts to find the response in a look-up table of known natural gas suppliers. If supplier is not found, the interviewer records an open response. | | | | | | |
| NEXT | If natural gas supplier was found in look-up table: NGLOOKUPCNFRM  Else if NGBILLTOSCAN=1 and natural gas supplier was not found in look-up table: NGSUPPSTREET  Else if LPGPAY in(1,3): LPGBILLTOSCAN  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGSUPPSTREET *NGSupplierAddress* | | | | | | |
| ASK | If NGBILLTOSCAN=1 and natural gas supplier was not found in look-up table | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | NGSUPPCITY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGSUPPCITY *NGSupplierCity* | | | | | | |
| ASK | If NGBILLTOSCAN=1 and natural gas supplier was not found in look-up table | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | NGSUPPSTATE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGSUPPSTATE *NGSupplierState* | | | | | | |
| ASK | If NGBILLTOSCAN=1 and natural gas supplier was not found in look-up table | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | NGSUPPZIP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGSUPPZIP *NGSupplierZIP* | | | | | | |
| ASK | If NGBILLTOSCAN=1 and natural gas supplier was not found in look-up table | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | NGSUPPAREACODE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGSUPPAREACODE *NGSuppAreaCode* | | | | | | |
| ASK | If NGBILLTOSCAN=1 and natural gas supplier was not found in look-up table | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | NGSUPPTELNUMBER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGSUPPTELNUMBER *NGSuppTelNumber* | | | | | | |
| ASK | If NGBILLTOSCAN=1 and natural gas supplier was not found in look-up table | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | If LPGPAY in(1,3): LPGBILLTOSCAN  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NGLOOKUPCNFRM *ConfNGSupp* | | | | | | |
| ASK | If natural gas supplier was found in look-up table | | | | | |
| Just to verify, I have selected that your natural gas supplier is [SUPPLIER]. Is that correct?  1 Yes  0 No | | | | | | |
| NEXT | If NGLOOKUPCNFRM=0: NGSUPPNAME  Else if LPGPAY in(1,3): LPGBILLTOSCAN  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGBILLTOSCAN (Changed from 2009) *HaveLPGBilltoScan* | | | | | | |
| ASK | If LPGPAY in(1,3) and LPGDELV=1 | | | | | |
| Do you have a recent bill from your [If NDIFLPCO>1: most-used] propane (bottled gas) supplier that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If LPGBILLTOSCAN=0: LPGWHYNOT  Else if LPGDELV=1: LPGSUPPNAME1  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGWHYNOT (Changed from 2009) *WhyNotHaveLPGBill* | | | | | | |
| ASK | If LPGBILLTOSCAN=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | If LPGDELV=1: LPGSUPPNAME1  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPNAME1 *LPGSupplierName1* | | | | | | |
| ASK | If LPGPAY in(1,3) and LPGDELV=1 | | | | | |
| What is the name of your household's [if NDIFLPCO>1: most used] propane (bottled gas) supplier?  Open response | | | | | | |
| NEXT | If LPGBILLTOSCAN=1: LPGSUPPSTREET1  Else if NDIFLPCO>1: LPGBILLTOSCAN2  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPSTREET1 *LPGSupplierAddress1* | | | | | | |
| ASK | If LPGBILLTOSCAN=1 and LPGDELV=1 | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPCITY1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPCITY1 *LPGSupplierCity1* | | | | | | |
| ASK | If LPGBILLTOSCAN=1 and LPGDELV=1 | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPSTATE1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPSTATE1 *LPGSupplierState1* | | | | | | |
| ASK | If LPGBILLTOSCAN=1 and LPGDELV=1 | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPZIP1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPZIP1 *LPGSupplierZIP1* | | | | | | |
| ASK | If LPGBILLTOSCAN=1 and LPGDELV=1 | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPAREACODE1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPAREACODE1 *LPGSuppAreaCode1A* | | | | | | |
| ASK | If LPGBILLTOSCAN=1 and LPGDELV=1 | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | LPGSUPPTELNUMBER1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPTELNUMBER1 *LPGSuppTelNumber1A* | | | | | | |
| ASK | If LPGBILLTOSCAN=1 and LPGDELV=1 | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | If NDIFLPCO>1: LPGBILLTOSCAN2  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGBILLTOSCAN2 *HaveLPGBilltoScan2* | | | | | | |
| ASK | If NDIFLPCO>1 | | | | | |
| Earlier you told me that [FILL: NDIFLPCO] different companies delivered propane (bottled gas) to your home in the past 12 months. Do you have a recent bill from [If NDIFLPCO=2: your other; If NDIFLPCO>2: the second most-used] propane (bottled gas) supplier that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If LPGBILLTOSCAN2=0: LPGWHYNOT2  Else: LPGSUPPNAME2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGWHYNOT2 (Changed from 2009) *WhyNotHaveLPGBill2* | | | | | | |
| ASK | If LPGBILLTOSCAN2=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | LPGSUPPNAME2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPNAME2 *LPGSupplierName2* | | | | | | |
| ASK | If NDIFLPCO>1 | | | | | |
| What is the name of your household's [If NDIFLPCO=2: other; If NDIFLPCO>2: second most used] propane (bottled gas) supplier?  Open response | | | | | | |
| NEXT | If LPGBILLTOSCAN2=1: LPGSUPPSTREET2  Else if FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPSTREET2 *LPGSupplierAddress2* | | | | | | |
| ASK | If LPGBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPCITY2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPCITY2 *LPGSupplierCity2* | | | | | | |
| ASK | If LPGBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPSTATE2 | | | | | |
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| LPGSUPPSTATE2 *LPGSupplierState2* | | | | | | |
| ASK | If LPGBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPZIP2 | | | | | |
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| LPGSUPPZIP2 *LPGSupplierZIP2* | | | | | | |
| ASK | If LPGBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | LPGSUPPAREACODE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LPGSUPPAREACODE2 *LPGSuppAreaCode2A* | | | | | | |
| ASK | If LPGBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | LPGSUPPTELNUMBER2 | | | | | |
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| LPGSUPPTELNUMBER2 *LPGSuppTelNumber2A* | | | | | | |
| ASK | If LPGBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | If FOPAY in(1,3): FOBILLTOSCAN  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOBILLTOSCAN *HaveFOBilltoScan* | | | | | | |
| ASK | If FOPAY in(1,3) | | | | | |
| Do you have a recent bill from your [If NDIFFOCO>1: most-used] fuel oil supplier that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If FOBILLTOSCAN=0: FOWHYNOT  Else: FOSUPPNAME1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOWHYNOT (Changed from 2009) *WhyNotHaveFOBill* | | | | | | |
| ASK | If FOBILLTOSCAN=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | FOSUPPNAME1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPNAME1 *FOSupplierName1* | | | | | | |
| ASK | If FOPAY in(1,3) | | | | | |
| What is the name of your household's [if NDIFFOCO>1: most used] fuel oil supplier?  Open response | | | | | | |
| NEXT | If FOBILLTOSCAN=1: FOSUPPSTREET1  Else if NDIFFOCO>1: FOBILLTOSCAN2  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPSTREET1 *FOSupplierAddress1* | | | | | | |
| ASK | If FOBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPCITY1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPCITY1 *FOSupplierCity1* | | | | | | |
| ASK | If FOBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPSTATE1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPSTATE1 *FOSupplierState1* | | | | | | |
| ASK | If FOBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPZIP1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPZIP1 *FOSupplierZIP1* | | | | | | |
| ASK | If FOBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPAREACODE1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPAREACODE1 *FOSuppAreaCode1A* | | | | | | |
| ASK | If FOBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | FOSUPPTELNUMBER1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPTELNUMBER1 *FOSuppTelNumber1A* | | | | | | |
| ASK | If FOBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | If NDIFFOCO>1: FOBILLTOSCAN2  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOBILLTOSCAN2 *HaveFOBilltoScan2* | | | | | | |
| ASK | If FOPAY in(1,3) and NDIFFOCO>1 | | | | | |
| Earlier you told me that [FILL: NDIFFOCO] different companies delivered fuel oil to your home in the past 12 months. Do you have a recent bill from [If NDIFFOCO=2: your other; If NDIFFOCO>2: the second most-used] fuel oil supplier that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If FOBILLTOSCAN2=0: FOWHYNOT2  Else: FOSUPPNAME2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOWHYNOT2 (Changed from 2009) *WhyNotHaveFOBill2* | | | | | | |
| ASK | If FOBILLTOSCAN2=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | FOSUPPNAME2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPNAME2 *FOSupplierName2* | | | | | | |
| ASK | If FOPAY in(1,3) and NDIFFOCO>1 | | | | | |
| What is the name of your household's [If NDIFFOCO=2: other; If NDIFFOCO>2: second most used] fuel oil supplier?  Open response | | | | | | |
| NEXT | If FOBILLTOSCAN2=1: FOSUPPSTREET2  Else if KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPSTREET2 *FOSupplierAddress2* | | | | | | |
| ASK | If FOBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPCITY2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPCITY2 *FOSupplierCity2* | | | | | | |
| ASK | If FOBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPSTATE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPSTATE2 *FOSupplierState2* | | | | | | |
| ASK | If FOBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPZIP2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPZIP2 *FOSupplierZIP2* | | | | | | |
| ASK | If FOBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | FOSUPPAREACODE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPAREACODE2 *FOSuppAreaCode2A* | | | | | | |
| ASK | If FOBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | FOSUPPTELNUMBER2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FOSUPPTELNUMBER2 *FOSuppTelNumber2A* | | | | | | |
| ASK | If FOBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | If KERODEL=1: KEROBILLTOSCAN  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROBILLTOSCAN *HaveKeroBilltoScan* | | | | | | |
| ASK | If KERODEL=1 | | | | | |
| Do you have a recent bill from your household’s [If NDIFKRCO>1: most-used] kerosene supplier that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If KEROBILLTOSCAN=0: KEROWHYNOT  Else: KEROSUPPNAME1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROWHYNOT (Changed from 2009) *WhyNotHaveKeroBill* | | | | | | |
| ASK | If KEROBILLTOSCAN=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | KEROSUPPNAME1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPNAME1 *KeroSupplierName1* | | | | | | |
| ASK | If KERODEL=1 | | | | | |
| What is the name of your household's [if NDIFKRCO>1: most used] kerosene supplier?  Open response | | | | | | |
| NEXT | If KEROBILLTOSCAN=1: KEROSUPPSTREET1  Else if NDIFKRCO>1: KEROBILLTOSCAN2  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPSTREET1 *KeroSupplierAddress1* | | | | | | |
| ASK | If KEROBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPCITY1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| KEROSUPPCITY1 *KeroSupplierCity1* | | | | | | |
| ASK | If KEROBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPSTATE1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPSTATE1 *KeroSupplierState1* | | | | | | |
| ASK | If KEROBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPZIP1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPZIP1 *KeroSupplierZIP1* | | | | | | |
| ASK | If KEROBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPAREACODE1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPAREACODE1 *KEROSuppAreaCode1A* | | | | | | |
| ASK | If KEROBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | KEROSUPPTELNUMBER1 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPTELNUMBER1 *KEROSuppTelNumber1A* | | | | | | |
| ASK | If KEROBILLTOSCAN=1 | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | If NDIFKRCO>1: KEROBILLTOSCAN2  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROBILLTOSCAN2 *HaveKeroBilltoScan2* | | | | | | |
| ASK | If NDIFKRCO>1 | | | | | |
| Earlier you told me that [FILL: NDIFKRCO] different companies delivered kerosene to your home in the past 12 months. Do you have any recent bills from [If NDIFKRCO=2: your other; If NDIFKRCO>2: the second most-used] kerosene supplier that I can scan into my computer?  1 Yes  0 No | | | | | | |
| NEXT | If KEROBILLTOSCAN2=0: KEROWHYNOT2  Else: KEROSUPPNAME2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROWHYNOT2 (Changed from 2009) *WhyNotHaveKeroBill2* | | | | | | |
| ASK | If KEROBILLTOSCAN2=0 | | | | | |
| Please indicate why there is no bill to scan.  1 Respondent only receives this bill electronically  2 Confidentiality/privacy concern  3 Respondent doesn't have this bill now  4 Other | | | | | | |
| NEXT | KEROSUPPNAME2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPNAME2 *KeroSupplierName2* | | | | | | |
| ASK | If NDIFKRCO>1 | | | | | |
| What is the name of your household's [If NDIFKRCO=2: other; If NDIFKRCO>2: second most used] kerosene supplier?  Open response | | | | | | |
| NEXT | If KEROBILLTOSCAN2=1: KEROSUPPSTREET1  Else: KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPSTREET2 *KeroSupplierAddress2* | | | | | | |
| ASK | If KEROBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s street address as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPCITY2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPCITY2 *KeroSupplierCity2* | | | | | | |
| ASK | If KEROBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s city as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPSTATE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPSTATE2 *KeroSupplierState2* | | | | | | |
| ASK | If KEROBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s state as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPZIP2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPZIP2 *KeroSupplierZIP2* | | | | | | |
| ASK | If KEROBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s zip as it appears on the bill here.  Open response | | | | | | |
| NEXT | KEROSUPPAREACODE2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPAREACODE2 *KEROSuppAreaCode2A* | | | | | | |
| ASK | If KEROBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s area code as it appears on the bill here.  001 - 999 | | | | | | |
| NEXT | KEROSUPPTELNUMBER2 | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KEROSUPPTELNUMBER2 *KEROSuppTelNumber2A* | | | | | | |
| ASK | If KEROBILLTOSCAN2=1 | | | | | |
| RECORD the supplier’s telephone number as it appears on the bill here.  1000001 - 9999999 | | | | | | |
| NEXT | KFUELOT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| KFUELOT (Changed from 2009) *OtherPurposes* | | | | | | |
| ASK | If ELPAY in(1,3) or NGPAY in(1,3) or LPGPAY in(1,3) or FOPAY in(1,3) | | | | | |
| Do any of your household energy bills include costs for energy used for non-household purposes, such as farm buildings or machinery, a business or office, or another house or apartment?  1 Yes  0 No | | | | | | |
| NEXT | If KFUELOT=1: FARM, TENANT, BUSINESS, OTHERUSE  Else: SMARTMETER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| FARM, TENANT, *WhichOtherPurposes1, WhichOtherPurposes2,*BUSINESS, OTHERUSE *WhichOtherPurposes3, WhichOtherPurposes4* | | | | | | |
| ASK | If KFUELOT=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. For which of the purposes listed are costs of fuel included in your household fuel bills?  Mark all that apply.  Farm buildings or machinery (FARM)  The house or apartment of another household (TENANT)  A business or office (BUSINESS)  Some use other than your own personal use (OTHERUSE) | | | | | | |
| NEXT | If OTHERUSE=1: OTHUSEPRPSFU  Else: BILLEL, BILLUG, BILLLPG, BILLFOIL, BILLKER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| OTHUSEPRPSFU *WhichFollowUp* | | | | | | |
| ASK | If OTHERUSE=1 | | | | | |
| Could you tell me what that use was?  Open response | | | | | | |
| NEXT | BILLEL, BILLUG, BILLLPG, BILLFOIL, BILLKER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| BILLEL, BILLUG, BILLLPG, *WhichFuels1, WhichFuels2, WhichFuels3,* BILLFOIL, BILLKER (Changed from 2009) *WhichFuels4, WhichFuels5* | | | | | | |
| ASK | If KFUELOT=1 | | | | | |
| Which of your household’s energy bills include costs for energy used for non-household purposes? Is it…  Mark all that apply.  Electricity, (BILLEL)  Natural gas from underground pipes, (BILLUG)  Propane (bottled gas), (BILLLPG)  Fuel oil, or (BILLFOIL)  Kerosene? (BILLKER) | | | | | | |
| NEXT | If BILLEL=1: ELNONHSHLD  Else if BILLUG=1: NGNONHSHLD  Else if BILLLPG=1: LPGNONHSHLD  Else if BILLFOIL=1: FONONHSHLD  Else if BILLKER=1: KERONONHSHLD  Else: SMARTMETER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ELNONHSHLD *HowMuchElec* | | | | | | |
| ASK | If BILLEL=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the electricity bill is for non-household uses?  0 Very little (1-4%)  1 Some (5-33%)  2 About half (34-66%)  3 About three-quarters (67-95%)  4 Most of it (96-99%) | | | | | | |
| NEXT | If BILLUG=1: NGNONHSHLD  Else if BILLLPG=1: LPGNONHSHLD  Else if BILLFOIL=1: FONONHSHLD  Else if BILLKER=1: KERONONHSHLD  Else: SMARTMETER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| NGNONHSHLD *HowMuchNatGas* | | | | | | |
| ASK | If BILLUG=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the natural gas bill is for non-household uses?  0 Very little (1-4%)  1 Some (5-33%)  2 About half (34-66%)  3 About three-quarters (67-95%)  4 Most of it (96-99%) | | | | | | |
| NEXT | If BILLLPG=1: LPGNONHSHLD  Else if BILLFOIL=1: FONONHSHLD  Else if BILLKER=1: KERONONHSHLD  Else: SMARTMETER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| LPGNONHSHLD *HowMuchBttldGas* | | | | | | |
| ASK | If BILLLPG=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the propane bill is for non-household uses?  0 Very little (1-4%)  1 Some (5-33%)  2 About half (34-66%)  3 About three-quarters (67-95%)  4 Most of it (96-99%) | | | | | | |
| NEXT | If BILLFOIL=1: FONONHSHLD  Else if BILLKER=1: KERONONHSHLD  Else: SMARTMETER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| FONONHSHLD *HowMuchFO* | | | | | | |
| ASK | If BILLFOIL=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the fuel oil bill is for non-household uses?  0 Very little (1-4%)  1 Some (5-33%)  2 About half (34-66%)  3 About three-quarters (67-95%)  4 Most of it (96-99%) | | | | | | |
| NEXT | If BILLKER=1: KERONONHSHLD  Else: SMARTMETER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| KERONONHSHLD *HowMuchKero* | | | | | | |
| ASK | If BILLKER=1 | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What portion of the kerosene bill is for non-household uses?  0 Very little (1-4%)  1 Some (5-33%)  2 About half (34-66%)  3 About three-quarters (67-95%)  4 Most of it (96-99%) | | | | | | |
| NEXT | SMARTMETER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| SMARTMETER (New) *SMARTMETER* | | | | | | |
| ASK | All respondents | | | | | |
| Do you have a "smart meter" that records your electricity usage in short time intervals, a standard electricity meter, or don't you know?  1 Yes  0 No | | | | | | |
| NEXT | If SMARTMETER=1: INTDATA  Else if KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3): LLNAME  Else if TYPEHUQ in(1,4,5): COMPLEXN  Else: IVCOMMJFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| INTDATA (New) *INTDATA* | | | | | | |
| ASK | If SMARTMETER=1 | | | | | |
| Does your household have access to hourly or daily electricity usage data recorded by your smart meter?  1 Yes  0 No | | | | | | |
| NEXT | If INTDATA=1: INTDATAACC  Else if KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3): LLNAME  Else if TYPEHUQ in(1,4,5): COMPLEXN  Else: IVCOMMJFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| INTDATAACC (New) *INTDATAACC* | | | | | | |
| ASK | If INTDATA=1 | | | | | |
| Have you or any member of your household ever accessed or viewed this electricity usage data?  1 Yes  0 No | | | | | | |
| NEXT | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3): LLNAME  Else if TYPEHUQ in(1,4,5): COMPLEXN  Else: IVCOMMJFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LLNAME (Changed from 2009) *NameofLandlord* | | | | | | |
| ASK | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3) | | | | | |
| We may need some additional information about the fuel used in this building. May I have the name of the person or company to whom you pay your rent or condo fee?  RECORD the name of the landlord here. If the respondent pays this fee to a company enter the company name in this field.  Open response | | | | | | |
| NEXT | LLSTREET | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| LLSTREET (Changed from 2009) *LLStreet* | | | | | | |
| ASK | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3) | | | | | |
| What is their street address?  RECORD the landlord’s street address here.  Open response | | | | | | |
| NEXT | LLCITY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LLCITY (Changed from 2009) *LLCity* | | | | | | |
| ASK | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3) | | | | | |
| What is their city?  RECORD the landlord’s city here.  Open response | | | | | | |
| NEXT | LLSTATE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LLSTATE (Changed from 2009) *LLState* | | | | | | |
| ASK | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3) | | | | | |
| …and what state are they located in?  RECORD the landlord’s state here.  Open response | | | | | | |
| NEXT | LLZIP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| LLZIP (Changed from 2009) *LLZipCode* | | | | | | |
| ASK | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3) | | | | | |
| …and what is their Zip code?  RECORD the landlord’s Zip code here.  Open response | | | | | | |
| NEXT | LLAREACODE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LLAREACODE (Changed from 2009) *LLAreaCode* | | | | | | |
| ASK | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3) | | | | | |
| What is your landlord’s area code and telephone number?  RECORD the landlord’s telephone number, starting with the area code here.  001 - 999 | | | | | | |
| NEXT | LLTELNUMBER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LLTELNUMBER (Changed from 2009) *LLTelNumber* | | | | | | |
| ASK | If KOWNRENT in(2,3) or ELPAY in(2,3) or NGPAY in(2,3) or LPGPAY in(2,3) or FOPAY in(2,3) | | | | | |
| RECORD the landlord's local telephone number here.  1000001 - 9999999 | | | | | | |
| NEXT | If TYPEHUQ in(1,4,5): COMPLEXN  Else: IVCOMMJFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| COMPLEXN *ComplexHaveName* | | | | | | |
| ASK | If TYPEHUQ in(1,4,5) | | | | | |
| Does the complex or development where you live have a formal name?  1 Yes  0 No | | | | | | |
| NEXT | If COMPLEXN=1: CPLXNAME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CPLXNAME *ComplexName* | | | | | | |
| ASK | If COMPLEXN=1 | | | | | |
| What is the name?  Open response | | | | | | |
| NEXT | IVCOMMJFILTER | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMJFILTER *IVCOMMJFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the fuel bills section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMJFILTER=1: IVCOMMJ  Else: Section K | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMJ *IVerCommentsJ* | | | | | | |
| ASK | If IVCOMMJFILTER=1 | | | | | |
| Interviewer Task: Record any information here about this housing unit’s fuel bills that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section K | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION K: HOUSING UNIT CHARACTERISTICS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| HHSEX (Changed from 2009) *SexOfHH* | | | | | | |
| ASK | All respondents | | | | | |
| Now I have a few questions about the people living in this home.  Please RECORD gender of respondent.  1 Female  2 Male | | | | | | |
| NEXT | HHAGE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HHAGE (Changed from 2009) *AgeOfHH* | | | | | | |
| ASK | All respondents | | | | | |
| How old are you?  For ages over 95, enter 95.  16 - 95 | | | | | | |
| NEXT | EMPLOYHH | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| EMPLOYHH (Changed from 2009) *APPEmploymntStatus* | | | | | | |
| ASK | All respondents | | | | | |
| How would you describe your employment status? Would you say…  1 Employed full-time,  2 Employed part-time, or  0 Not employed/retired? | | | | | | |
| NEXT | SPOUSE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SPOUSE (Changed from 2009) *MaritalStatus* | | | | | | |
| ASK | All respondents | | | | | |
| Are you living with a spouse or partner?  1 Yes  0 No | | | | | | |
| NEXT | SDESCENT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SDESCENT (Changed from 2009) *HispanicDescent* | | | | | | |
| ASK | All respondents | | | | | |
| Are you Hispanic or Latino?  1 Yes  0 No | | | | | | |
| NEXT | RACE\_WHITE, RACE\_BLACK, RACE\_AIAN, RACE\_ASIAN, RACE\_NHPI, RACE\_OTH, RACE\_HISP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RACE\_WHITE, RACE\_BLACK, RACE\_AIAN, RACE\_ASIAN,RACE\_NHPI, RACE\_OTH, RACE\_HISP (Changed from 2009) *RacialOrigin* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Which describes your race? You can select one or more categories.  White (RACE\_WHITE)  Black or African-American (RACE\_BLACK)  American Indian or Alaska Native (RACE\_AIAN)  Asian (RACE\_ASIAN)  Native Hawaiian or Other Pacific Islander (RACE\_NHPI)  Other (if volunteered) (RACE\_OTH)  Hispanic (if volunteered) (RACE\_HISP) | | | | | | |
| NEXT | EDUCATION | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| EDUCATION (Changed from 2009) *Education* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. What is the highest degree or level of school you have completed?  0 No schooling completed  1 Kindergarten to grade 12 (No Diploma)  2 High school diploma or GED  3 Some college, no degree  4 Associate’s degree (for example: AA, AS)  5 Bachelor’s degree (for example: BA, BS)  6 Master’s degree (for example: MA, MS, MBA | | | | | | |
| NEXT | NHSLDMEM | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| NHSLDMEM (Changed from 2009) *NumInHH* | | | | | | |
| ASK | All respondents | | | | | |
| Including yourself, how many people usually live in this home? Do not include anyone who is just visiting, those away in the military, or children who are away at college.  1 - 15 | | | | | | |
| NEXT | If NHSLDMEM>1: AGEHHMEM2  Else: HBUSNESS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| AGEHHMEM2 (Changed from 2009) *AgeofHHMember2* | | | | | | |
| ASK | If NHSLDMEM>1 | | | | | |
| Other than yourself what is the age of the oldest person in this household?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=3: AGEHHMEMY  Else if NHSLDMEM>3: AGEHHMEM3  Else: HBUSNESS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| AGEHHMEM3 *AgeOfHHMember3* | | | | | | |
| ASK | If NHSLDMEM>3 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=4: AGEHHMEMY  Else if NHSLDMEM>4: AGEHHMEM4  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM4 *AgeOfHHMember4* | | | | | | |
| ASK | If NHSLDMEM>4 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=5: AGEHHMEMY  Else if NHSLDMEM>5: AGEHHMEM5  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM5 *AgeOfHHMember5* | | | | | | |
| ASK | If NHSLDMEM>5 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=6: AGEHHMEMY  Else if NHSLDMEM>6: AGEHHMEM6  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM6 *AgeOfHHMember6* | | | | | | |
| ASK | If NHSLDMEM>6 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=7: AGEHHMEMY  Else if NHSLDMEM>7: AGEHHMEM7  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM7 *AgeOfHHMember7* | | | | | | |
| ASK | If NHSLDMEM>7 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=8: AGEHHMEMY  Else if NHSLDMEM>8: AGEHHMEM8  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGEHHMEM8 *AgeOfHHMember8* | | | | | | |
| ASK | If NHSLDMEM>8 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=9: AGEHHMEMY  Else if NHSLDMEM>9: AGEHHMEM9  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM9 *AgeOfHHMember9* | | | | | | |
| ASK | If NHSLDMEM>9 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=10 AGEHHMEMY  Else if NHSLDMEM>10: AGEHHMEM10  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM10 *AgeOfHHMember10* | | | | | | |
| ASK | If NHSLDMEM>10 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=11: AGEHHMEMY  Else if NHSLDMEM>11: AGEHHMEM11  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM11 *AgeOfHHMember11* | | | | | | |
| ASK | If NHSLDMEM>11 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=12: AGEHHMEMY  Else if NHSLDMEM>12: AGEHHMEM12  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM12 *AgeOfHHMember12* | | | | | | |
| ASK | If NHSLDMEM>12 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=13: AGEHHMEMY  Else if NHSLDMEM>13: AGEHHMEM13  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM13 *AgeOfHHMember13* | | | | | | |
| ASK | If NHSLDMEM>13 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=14: AGEHHMEMY  Else if NHSLDMEM>14: AGEHHMEM14  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM14 *AgeOfHHMember14* | | | | | | |
| ASK | If NHSLDMEM>14 | | | | | |
| Of the [NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | If NHSLDMEM=15: AGEHHMEMY  Else: HBUSNESS | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| AGEHHMEM15 | | | | | | |
| ASK |  | | | | | |
| Derived  1 - 95 | | | | | | |
| NEXT |  | | | | | |
| Derived | | Yes | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| AGEHHMEMY (Changed from 2009) *AgeofHHMemberY* | | | | | | |
| ASK | If NHSLDMEM>2 | | | | | |
| What is the age of the youngest person in this household?  For ages over 95, enter 95.  1 - 95 | | | | | | |
| NEXT | HBUSNESS | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HBUSNESS *HomeBaseBusiness* | | | | | | |
| ASK | All respondents | | | | | |
| Does anyone in this household operate a home-based business or service?  1 Yes  0 No | | | | | | |
| NEXT | If HBUSNESS=1: OTHBUS  Else: ATHOME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OTHBUS *J11FollowUp* | | | | | | |
| ASK | If HBUSNESS=1 | | | | | |
| What kind of business or service is this?  Open response | | | | | | |
| NEXT | ATHOME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| ATHOME (Changed from 2009) *AnyStayAtHomes* | | | | | | |
| ASK | All respondents | | | | | |
| In a typical week, how many weekdays is someone at home most or all of the day?  0 - 5 | | | | | | |
| NEXT | TELLWORK | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| TELLWORK *TeleWorking* | | | | | | |
| ASK | All respondents | | | | | |
| Does anyone in this household telecommute or telework at anytime during the week?  1 Yes  0 No | | | | | | |
| NEXT | OTHWORK | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OTHWORK (Changed from 2009) *UnusualActivity* | | | | | | |
| ASK | All respondents | | | | | |
| Is there any other kind of activity occurring in your home that uses a lot more energy than would usually be used in a home?  1 Yes  0 No | | | | | | |
| NEXT | If OTHWORK=1: OTHACT  Else: WORKPAY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| OTHACT *J14FollowUp* | | | | | | |
| ASK | If OTHWORK=1 | | | | | |
| What is that activity?  Open response | | | | | | |
| NEXT | WORKPAY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| WORKPAY (Changed from 2009) *PayForWork* | | | | | | |
| ASK | All respondents | | | | | |
| In the last year, did you or any member of your household receive income from any of the following sources?  Employment income from wages, salaries, commissions, bonuses, and tips from all jobs, as well as self-employment income from a business or farm  1 Yes  0 No | | | | | | |
| NEXT | RETIREPY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RETIREPY *Retirement* | | | | | | |
| ASK | All respondents | | | | | |
| Retirement income from Social Security, Railroad Retirement, pensions or other retirement funds  1 Yes  0 No | | | | | | |
| NEXT | SSINCOME | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| SSINCOME *SSIncome* | | | | | | |
| ASK | All respondents | | | | | |
| Supplemental Security Income (SSI)  1 Yes  0 No | | | | | | |
| NEXT | CASHBEN | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| CASHBEN *CashBenefits* | | | | | | |
| ASK | All respondents | | | | | |
| Welfare payments or cash assistance  1 Yes  0 No | | | | | | |
| NEXT | INVESTMT | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| INVESTMT *Investments* | | | | | | |
| ASK | All respondents | | | | | |
| Income from interest, dividends, rental properties, royalties, estates, or trusts  1 Yes  0 No | | | | | | |
| NEXT | RGLRPAY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| RGLRPAY *RegularPay* | | | | | | |
| ASK | All respondents | | | | | |
| Any other regular sources of income such as Veterans’ (VA) payments, survivor or disability pensions, unemployment compensation, child support, or alimony  1 Yes  0 No | | | | | | |
| NEXT | MONEYPY | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| MONEYPY (Changed from 2009) *HHIncome* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. Including all of the income sources I just asked you about, which category best describes the total combined income of all household members for the last year, before taxes and deduction  1 Less than $10,000  2 $10,000 - $19,999  3 $20,000 - $29,999  4 $30,000 to $39,999  5 $40,000 - $49,999  6 $50,000 to $59,999  7 $60,000 to $69,999  8 $70,000 to $79,999  9 $80,000 to $99,999  10 $100,000 to $119,999  11 $120,000 to $139,999  12 $140,000 or more | | | | | | |
| NEXT | IVCOMMKFILTER | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| IVCOMMKFILTER *IVCOMMKFILTER* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: If you have any comments that might suggest that the data collected in the household characteristics section should be analyzed by central office staff, enter 1. If you have no comments regarding the quality of data entered in this section, enter 2.  1 I have comments regarding the quality of data in this section  2 I do not have comments | | | | | | |
| NEXT | If IVCOMMKFILTER=1: IVCOMMK  Else: Section L | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| IVCOMMK *IVerCommentsK* | | | | | | |
| ASK | If IVCOMMKFILTER=1 | | | | | |
| Interviewer Task: Record any information here about the household characteristics of this housing unit that might provide clarification to the respondent’s answers.  Open response | | | | | | |
| NEXT | Section L | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

**SECTION L: ENERGY INSECURITY and ASSISTANCE (LIHEAP)**

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| SCALEB (Changed from 2009) *EnergySecureA* | | | | | | |
| ASK | All respondents | | | | | |
| In the last year, how many months did your household reduce or forego expenses for basic household necessities, such as medicine or food, in order to pay an energy bill?  1 Almost every month  2 Some months  3 1 or 2 months  0 Never | | | | | | |
| NEXT | SCALEG | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SCALEG (Changed from 2009) *EnergySecureB* | | | | | | |
| ASK | All respondents | | | | | |
| In the last year, how many months did your household keep your home at a temperature that you felt was unsafe or unhealthy?  1 Almost every month  2 Some months  3 1 or 2 months  0 Never | | | | | | |
| NEXT | SCALEE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SCALEE (Changed from 2009) *EnergySecureD1* | | | | | | |
| ASK | All respondents | | | | | |
| In the last year, how many months did your household receive a disconnection notice, shut off notice, or nondelivery notice for an energy bill?  1 Almost every month  2 Some months  3 1 or 2 months  0 Never | | | | | | |
| NEXT | If SCALEE in(1,2,3): PAYHELP;  Else: NOHEATBROKE, NOHEATEL, NOHEATNG, NOHEATBULK | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| PAYHELP (New) *PAYHELP* | | | | | | |
| ASK | If SCALEE in(1,2,3) | | | | | |
| When you received that notice, did your household apply for and receive home energy assistance to help pay your energy bill?  1 Yes  0 No | | | | | | |
| NEXT | NOHEATBROKE, NOHEATEL, NOHEATNG, NOHEATBULK | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NOHEATBROKE, NOHEATEL, NOHEATNG, *NOHEATBROKE, NOHEATEL, NOHEATNG,*NOHEATBULK (New) *NOHEATBULK* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. In the last year, was there ever a time your household was unable to use your main source of heat because any of these events happened?  Mark all that apply.  1 Your heating equipment was broken and you couldn’t afford to pay for the repair or replacement  2 You couldn’t pay for electricity and it was disconnected  3 You couldn’t pay for natural gas and it was disconnected  4 You ran out of fuel oil, propane, kerosene, or wood because you couldn’t afford a delivery  0 None of these happened | | | | | | |
| NEXT | If NOHEATBROKE=1 OR NOHEATEL=1 OR NOHEATNG=1 OR NOHEATBULK=1: NOHEATDAYS;  Else COLDMA | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| NOHEATDAYS (New) *NOHEATDAYS* | | | | | | |
| ASK | If NOHEATBROKE=1 OR NOHEATEL=1 OR NOHEATNG=1 OR NOHEATBULK=1 | | | | | |
| About how many days was your household without heat?  0-366 | | | | | | |
| NEXT | NOHEATHELP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NOHEATHELP (New) *NOHEATHELP* | | | | | | |
| ASK | If NOHEATBROKE=1 OR NOHEATEL=1 OR NOHEATNG=1 OR NOHEATBULK=1 | | | | | |
| When that happened, did your household apply for and receive home energy assistance to help restore your heating?  1 Yes  0 No | | | | | | |
| NEXT | COLDMA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| COLDMA (Changed from 2009) *MedicalAttnCold* | | | | | | |
| ASK | All respondents | | | | | |
| In the last year, did anyone in your household need medical attention because your home was too cold?  1 Yes  0 No | | | | | | |
| NEXT | NOACBROKE, NOACEL | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NOACBROKE, NOACEL (New) *NOACBROKE, NOACEL* | | | | | | |
| ASK | All respondents | | | | | |
| Place show card X in front of the respondent.  Please look at Card X. In the last year, was there ever a time your household was unable to use your air conditioner or other cooling equipment because any of these events happened?  Mark all that apply.  1 Your air conditioning equipment or other cooling equipment was broken and you couldn’t afford to pay for the repair or replacement  2 You couldn’t pay for electricity and it was disconnected  0 None of these happened | | | | | | |
| NEXT | If NOACBROKE=1 or NOACEL=1: NOACDAYS;  Else HOTMA | | | | | |
| Derived | |  | **Show Card** | Yes | **CARI** |  |

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| NOACDAYS (New) *NOACDAYS* | | | | | | |
| ASK | If NOACBROKE=1 or NOACEL=1 | | | | | |
| About how many days was your household without its air conditioner or other cooling equipment?  0-366 | | | | | | |
| NEXT | NOACHELP | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| NOACHELP (New) *NOACHELP* | | | | | | |
| ASK | If NOACBROKE=1 or NOACEL=1 | | | | | |
| When that happened, did your household apply for and receive home energy assistance to help restore your cooling?  1 Yes  0 No | | | | | | |
| NEXT | HOTMA | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| HOTMA (Changed from 2009) *MedicalAttnH* | | | | | | |
| ASK | All respondents | | | | | |
| In the last year, did anyone in your household need medical attention because your home was too hot?  1 Yes  0 No | | | | | | |
| NEXT | SIGNFORM | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| SIGNFORM (Changed from 2009) *SIGNFORM* | | | | | | |
| ASK | All respondents | | | | | |
| This is the last question I have. In addition to the answers you’ve provided in this survey, we would like to find out how much energy your household actually used in the past year. Would you please sign this form that gives permission to your energy suppliers to provide this information to the U.S. Department of Energy?  Interviewer Task: Give the authorization form to the respondent and record whether the respondent signed the form or not.  1 Authorization form signed  0 Authorization form not signed | | | | | | |
| NEXT | LANGUAGE | | | | | |
| Derived | |  | **Show Card** |  | **CARI** | Yes |

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| LANGUAGE (New) *LANGUAGE* | | | | | | |
| ASK | All respondents | | | | | |
| Interviewer Task: Record the language in which this interview was conducted.  1 English  2 Spanish  3 Combination of English and Spanish  4 Other | | | | | | |
| NEXT | If LANGUAGE=4: LANGUAGEFU  Else: End survey | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |

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| LANGUAGEFU (New) *LANGUAGEFU* | | | | | | |
| ASK | If LANGUAGE=4 | | | | | |
| Interviewer Task: Please explain how this interview was conducted.  Open response | | | | | | |
| NEXT | End survey | | | | | |
| Derived | |  | **Show Card** |  | **CARI** |  |