	Respondent	Person 2	Person 3	Person 4	Person 5	Person 6
1a. Let's create a list of everyone living or staying at this address, even if they are not related to you. **What is your name?** (**What is the name of the next person living or staying here?**) ❖ Make sure to include the respondent if he/she is staying here.	First name (or initial): _____	First name (or initial): _____	First name (or initial): _____	First name (or initial): _____	First name (or initial): _____	First name (or initial): _____
The following questions are to make sure everyone is included. **1b. Other than the people you have already mentioned, are there any children living or staying here, such as babies, grandchildren, or foster children? These children could be related or unrelated to you.**	Additional Person 1: _____	Additional Person 2: _____	Additional Person 3: _____	Additional Person 4: _____	Additional Person 5: _____	Additional Person 6: _____
1c. Other than the people you have already mentioned, is there anyone else staying here, such as roommates and other people or families who have no other place to stay?	Additional Person 7: _____	Additional Person 8: _____	Additional Person 9: _____	Additional Person 10: _____	Additional Person 11: _____	Additional Person 12: _____
❖ Do not include overnight or weekend guests who have a residence somewhere else.	☐☐No additional persons					

2022 AMERICAN COMMUNITY SURVEY CONTENT TEST

	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
❖ Copy names from 1a, 1b, and 1c. **I have listed…** ❖ Read all names. **1d. Do any of these people live somewhere else, such as a college student or someone in the Armed Forces on deployment?**	_____ ⬜⬜Yes ⬜⬜No	_____ ⬜⬜Yes ⬜⬜No	_____ ⬜⬜Yes ⬜⬜No	_____ ⬜⬜Yes ⬜⬜No	_____ ⬜⬜Yes ⬜⬜No	_____ ⬜⬜Yes ⬜⬜No
❖ MARK "No" for: (1) children in boarding school or summer camp ❖ MARK "Yes" for: (1) children in shared custody who are not currently staying at the sample address, regardless of the length of stay; (2) persons who are away NOW for MORE than two months^	**Additional Person 1:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 2:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 3:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 4:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 5:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 6:** _____ ⬜⬜Yes ⬜⬜No
^ - The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.	**Additional Person 7:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 8:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 9:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 10:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 11:** _____ ⬜⬜Yes ⬜⬜No	**Additional Person 12:** _____ ⬜⬜Yes ⬜⬜No

	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
❖ Copy names from 1a, 1b and 1c, but OMIT anyone with a "Yes" response to 1d. **I have listed…** ❖ Read all remaining names. **1e. Are any of these people staying here for a short time?** ❖ <u>MARK "No" for</u>:	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No
	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
(1) children in shared custody who are currently staying at the sample address, regardless of where they usually stay; (2) commuter workers who stay in some other residence closer to work when their family residence is the sample address.	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No
	Additional Person 7:	Additional Person 8:	Additional Person 9:	Additional Person 10:	Additional Person 11:	Additional Person 12:
❖ <u>MARK "Yes" for</u>: (1) commuter workers who stay at the sample address to be closer to work; (2) persons who have some other residence.	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No	_____ ☐☐Yes ☐☐No

❖ Copy names with a "Yes" response to 1e.
 	
I have listed…
❖ Read names with a "Yes" response to 1e.
 	
1f. Are you/Is \<Name\> **staying here for MORE than two months^?**
 	
MARK "Yes":
    (1) persons who are staying MORE than two months^
    (2) children in shared custody who are currently staying at the sample address, regardless of where they usually stay
    (3) commuter workers who stay at the sample address to be closer to work
 	
    ^ - The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.
	Respondent:
	
	_____
	
	☐☐Yes
	☐☐No
		Person 2:
		
		_____
		
		☐☐Yes
		☐☐No
			Person 3:
			
			_____
			
			☐☐Yes
			☐☐No
				Person 4:
				
				_____
				
				☐☐Yes
				☐☐No
					Person 5:
					
					_____
					
					☐☐Yes
					☐☐No
						Person 6:
						
						_____
						
						☐☐Yes
						☐☐No

	Additional Person 1: _____ ☐☐Yes ☐☐No	Additional Person 2: _____ ☐☐Yes ☐☐No	Additional Person 3: _____ ☐☐Yes ☐☐No	Additional Person 4: _____ ☐☐Yes ☐☐No	Additional Person 5: _____ ☐☐Yes ☐☐No	Additional Person 6: _____ ☐☐Yes ☐☐No
	Additional Person 7: _____ ☐☐Yes ☐☐No	Additional Person 8: _____ ☐☐Yes ☐☐No	Additional Person 9: _____ ☐☐Yes ☐☐No	Additional Person 10: _____ ☐☐Yes ☐☐No	Additional Person 11: _____ ☐☐Yes ☐☐No	Additional Person 12: _____ ☐☐Yes ☐☐No

❖ Generate the final roster using the first 1-6 names remaining in the order they were mentioned.
    - Copy names from 1a, 1b, and 1c.
    - OMIT anyone with a "Yes" response to 1d.
    - OMIT anyone with a "No" response to 1f.
	Respondent:
	
	_____
		Person 2:
		
		_____
			Person 3:
			
			_____
				Person 4:
				
				_____
					Person 5:
					
					_____
						Person 6:
						
						_____

❖ Ask as topic-based, that is, ask question for each person before moving to next question. ❖ Use flash card for relationships. **2a. Of the people you named, who owns or rents this place?** ❖ Fill in response as Householder. When listing non-householders as Persons 2-6, maintain order established in final roster. **2b.** *Using this list on my screen,* **how is** <NAME>/are you **related to** <FILL "YOU" IF RESPONDENT IS HOUSEHOLDER / HOUSEHOLDER NAME>**?** Opposite-sex husband/wife/spouse Opposite-sex unmarried partner Same-sex husband/wife/spouse Same-sex unmarried partner Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law Son-in-law or daughter-in-law Other relative Roommate or housemate Foster child Other nonrelative	**Householder:** _____	**Person 2:** _____ ☐☐Opposite-sex husband/wife/ spouse ☐☐Opposite-sex unmarried partner ☐☐Same-sex husband/wife/ spouse ☐☐Same-sex unmarried partner ☐☐Biological Son/Daughter ☐☐Adopted Son/Daughter ☐ Stepson/ Stepdaughter ☐☐Brother/Sister ☐☐Father/Mother ☐☐Grandchild ☐☐Parent-in-law ☐☐Son/daughter-law ☐☐Other relative ☐☐Roommate/ Housemate ☐☐Foster child ☐☐Other nonrelative	**Person 3:** _____ ☐☐Opposite-sex husband/wife/ spouse ☐☐Opposite-sex unmarried partner ☐☐Same-sex husband/wife/ spouse ☐☐Same-sex unmarried partner ☐☐Biological Son/Daughter ☐☐Adopted Son/Daughter ☐ Stepson/ Stepdaughter ☐☐Brother/Sister ☐☐Father/Mother ☐☐Grandchild ☐☐Parent-in-law ☐☐Son/daughter-law ☐☐Other relative ☐☐Roommate/ Housemate ☐☐Foster child ☐☐Other nonrelative	**Person 4:** _____ ☐☐Opposite-sex husband/wife/ spouse ☐☐Opposite-sex unmarried partner ☐☐Same-sex husband/wife/ spouse ☐☐Same-sex unmarried partner ☐☐Biological Son/Daughter ☐☐Adopted Son/Daughter ☐ Stepson/ Stepdaughter ☐☐Brother/Sister ☐☐Father/Mother ☐☐Grandchild ☐☐Parent-in-law ☐☐Son/daughter-law ☐☐Other relative ☐☐Roommate/ Housemate ☐☐Foster child ☐☐Other nonrelative	**Person 5:** _____ ☐☐Opposite-sex husband/wife/ spouse ☐☐Opposite-sex unmarried partner ☐☐Same-sex husband/wife/ spouse ☐☐Same-sex unmarried partner ☐☐Biological Son/Daughter ☐☐Adopted Son/Daughter ☐ Stepson/ Stepdaughter ☐☐Brother/Sister ☐☐Father/Mother ☐☐Grandchild ☐☐Parent-in-law ☐☐Son/daughter-law ☐☐Other relative ☐☐Roommate/ Housemate ☐☐Foster child ☐☐Other nonrelative	**Person 6:** _____ ☐☐Opposite-sex husband/wife/ spouse ☐☐Opposite-sex unmarried partner ☐☐Same-sex husband/wife/ spouse ☐☐Same-sex unmarried partner ☐☐Biological Son/Daughter ☐☐Adopted Son/Daughter ☐ Stepson/ Stepdaughter ☐☐Brother/Sister ☐☐Father/Mother ☐☐Grandchild ☐☐Parent-in-law ☐☐Son/daughter-law ☐☐Other relative ☐☐Roommate/ Housemate ☐☐Foster child ☐☐Other nonrelative

❖ UNRELATED HOUSEHOLD CHECK:

❖ IS ENTIRE HOUSEHOLD UNRELATED (relationships for ALL household members are " Roomer/Boarder"," Housemate/Roommate"," Foster child", or " Other non-relative") ?
    Yes
    No

❖ Ask or verify: **3. Are you**/Is \<FILL HOUSEHOLDER\>/Is \<FILL OTHER NAME\> **male or female?**	Householder: _____ ☐ Male ☐ Female	Person 2: _____ ☐ Male ☐ Female	Person 3: _____ ☐ Male ☐ Female	Person 4: _____ ☐ Male ☐ Female	Person 5: _____ ☐ Male ☐ Female	Person 6: _____ ☐ Male ☐ Female
4a. What is your/\<FILL HOUSEHOLDER's\>/\<FILL OTHER NAME's\> **date of birth?** ❖ Enter birth month. ❖ Enter birth day. ❖ Enter birth year (Enter 4 digits - ex: 1964).	Birth Month: _____ Birth Day: _____ Birth Year: _____	Birth Month: _____ Birth Day: _____ Birth Year: _____	Birth Month: _____ Birth Day: _____ Birth Year: _____	Birth Month: _____ Birth Day: _____ Birth Year: _____	Birth Month: _____ Birth Day: _____ Birth Year: _____	Birth Month: _____ Birth Day: _____ Birth Year: _____
4b. Would you say you are/\<Name\> is \<FILL AGE\>**?** (If no: **What is your best estimate of your**/\<NAME's\> **age?**) ❖ Make sure the respondent gives the age in completed years as of today. Do not round the age up if the person was close to having a birthday. If the exact age is not known, an estimate will do. Do not enter age in months. For babies less than 1 year old, enter 0 as the age.	☐ Yes ☐ No: _____	☐ Yes ☐ No: _____	☐ Yes ☐ No: _____	☐ Yes ☐ No: _____	☐ Yes ☐ No: _____	☐ Yes ☐ No: _____

❖ Complete all parts of question 5 (A-C) for each person before moving on to the next person. **5a. Are you/Is \<NAME\> of Hispanic, Latino, or Spanish origin?** ❖ If response is "Yes, of Hispanic, Latino, or Spanish origin," ask Question 5b. If not, check appropriate box and move to next person.	**Householder:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐No, not of Hispanic, Latino, or Spanish origin ☐☐Yes, of Hispanic, Latino, or Spanish origin	**Person 2:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐No, not of Hispanic, Latino, or Spanish origin ☐☐Yes, of Hispanic, Latino, or Spanish origin	**Person 3:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐No, not of Hispanic, Latino, or Spanish origin ☐☐Yes, of Hispanic, Latino, or Spanish origin	**Person 4:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐No, not of Hispanic, Latino, or Spanish origin ☐☐Yes, of Hispanic, Latino, or Spanish origin	**Person 5:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐No, not of Hispanic, Latino, or Spanish origin ☐☐Yes, of Hispanic, Latino, or Spanish origin	**Person 6:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐No, not of Hispanic, Latino, or Spanish origin ☐☐Yes, of Hispanic, Latino, or Spanish origin
5b. Are you/Is \<NAME\> Mexican, Mexican American, or Chicano; Puerto Rican; Cuban; or of some other Hispanic, Latino, or Spanish Origin? ❖ If response is "Yes, another Hispanic, Latino, or Spanish origin," ask Question 5c. Otherwise, check appropriate box and move to next person. **5c. What is that origin or origins? For example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.?** ❖ Enter the group(s) provided by the respondent in the "Yes, another Hispanic, Latino, or Spanish origin" write-in box.	☐☐Yes, Mexican, Mexican American, or Chicano ☐☐Yes, Puerto Rican ☐☐Yes, Cuban ☐☐Yes, another Hispanic, Latino, or Spanish origin(s): _____	☐☐Yes, Mexican, Mexican American, or Chicano ☐☐Yes, Puerto Rican ☐☐Yes, Cuban ☐☐Yes, another Hispanic, Latino, or Spanish origin(s): _____	☐☐Yes, Mexican, Mexican American, or Chicano ☐☐Yes, Puerto Rican ☐☐Yes, Cuban ☐☐Yes, another Hispanic, Latino, or Spanish origin(s): _____	☐☐Yes, Mexican, Mexican American, or Chicano ☐☐Yes, Puerto Rican ☐☐Yes, Cuban ☐☐Yes, another Hispanic, Latino, or Spanish origin(s): _____	☐☐Yes, Mexican, Mexican American, or Chicano ☐☐Yes, Puerto Rican ☐☐Yes, Cuban ☐☐Yes, another Hispanic, Latino, or Spanish origin(s): _____	☐☐Yes, Mexican, Mexican American, or Chicano ☐☐Yes, Puerto Rican ☐☐Yes, Cuban ☐☐Yes, another Hispanic, Latino, or Spanish origin(s): _____

	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
❖ Complete all parts of Question 6 (A-G) for each person before moving on to the next person. ❖ Flashcard: "RACE" **6a.** *Using this list,* **choose one or more races.** **Are you/Is <NAME> White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, or Some other race?**	☐☐White ☐☐Black or African American ☐☐American Indian or Alaska Native ☐☐Asian ☐☐Native Hawaiian or Other Pacific Islander ☐☐Some other race	☐☐White ☐☐Black or African American ☐☐American Indian or Alaska Native ☐☐Asian ☐☐Native Hawaiian or Other Pacific Islander ☐☐Some other race	☐☐White ☐☐Black or African American ☐☐American Indian or Alaska Native ☐☐Asian ☐☐Native Hawaiian or Other Pacific Islander ☐☐Some other race	☐☐White ☐☐Black or African American ☐☐American Indian or Alaska Native ☐☐Asian ☐☐Native Hawaiian or Other Pacific Islander ☐☐Some other race	☐☐White ☐☐Black or African American ☐☐American Indian or Alaska Native ☐☐Asian ☐☐Native Hawaiian or Other Pacific Islander ☐☐Some other race	☐☐White ☐☐Black or African American ☐☐American Indian or Alaska Native ☐☐Asian ☐☐Native Hawaiian or Other Pacific Islander ☐☐Some other race

6a_SKIP

    ❖ If person has a response of "White" to Question 6a, ask Question 6b for that person.
    ❖ Otherwise, SKIP to 6b_SKIP.

6b. What is your/<NAME's> White origin or origins? For example, German, Irish, English, Italian, Lebanese, Egyptian, etc. ❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

6b_SKIP

    ❖ If person has a response of "Black or African American" to Question 6a, ask Question 6c for that person.
    ❖ Otherwise, SKIP to 6c_SKIP.

	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
6c. What is your/<NAME's> Black or African American origin or origins? For example, African American,	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	_____	_____	_____	_____

Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc. ❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.	Origin(s): _____	Origin(s): □□□□□□□□□□□□□□□□ □□	Origin(s): □□□□□□□□□□□□□□□□□□ □□	Origin(s): □□□□□□□□□□□□□□□□□ □□	Origin(s): □□□□□□□□□□□□□□□ □□	Origin(s): □□□□□□□□□□□□□□□□□□ □□

6c_SKIP
   ❖ If person has a response of "American Indian or Alaska Native" to Question 6a, ask Question 6d for that person.
   ❖ Otherwise, SKIP to 6d_SKIP.						

6d. What is your/<NAME's> American Indian or Alaska Native enrolled or principal tribe or tribes? For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. ❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.	**Householder:** □□□□□□□□□□□□□□□□□ □□ Tribe(s): □□□□□□□□□□□□□□□□□ □□	**Person 2:** _____ Tribe(s): □□□□□□□□□□□□□□□□ □□	**Person 3:** _____ □ Tribe(s): □□□□□□□□□□□□□□□□ □□	**Person 4:** _____ □ Tribe(s): □□□□□□□□□□□□□□□□ □□	**Person 5:** _____ □ Tribe(s): □□□□□□□□□□□□□□□□ □□	**Person 6:** □□□□□□□□□□□□□□□□□ □□ Tribe(s): □□□□□□□□□□□□□□□□□ □□

6d_SKIP
   ❖ If person has a response of "Asian" to Question 6a, ask Question 6e for that person.
   ❖ Otherwise, SKIP to 6e_SKIP.						

6e. You may choose one or more Asian groups. Are you/Is <NAME> Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese, or of some other Asian origin? ❖ If Chinese, Filipino, Asian Indian, Vietnamese, Korean, or Japanese, check the appropriate box. ❖ If response is "Other Asian," ask Question 6f. Otherwise, check appropriate box and move to next person. **6f. What is that origin or origins? For example, Pakistani, Cambodian, Hmong, etc.?** ❖ Enter the group(s) provided in the corresponding Other Asian write-in space in this row.	□□Chinese □□Filipino □□Asian Indian □□Vietnamese □□Korean □□Japanese □□Other Asian: _____	□□Chinese □□Filipino □□Asian Indian □□Vietnamese □□Korean □□Japanese □□Other Asian: _____	□□Chinese □□Filipino □□Asian Indian □□Vietnamese □□Korean □□Japanese □□Other Asian: _____	□□Chinese □□Filipino □□Asian Indian □□Vietnamese □□Korean □□Japanese □□Other Asian: _____	□□Chinese □□Filipino □□Asian Indian □□Vietnamese □□Korean □□Japanese □□Other Asian: _____	□□Chinese □□Filipino □□Asian Indian □□Vietnamese □□Korean □□Japanese □□Other Asian: _____

6f_SKIP

> ❖ If person has a response of "Native Hawaiian or Other Pacific Islander" to Question 6a, ask Question 6g for that person.
> ❖ Otherwise, SKIP to 6g_SKIP.

6g. You may choose one or more Pacific Islander groups. Are you/**Is \<NAME\>** Native Hawaiian, Samoan, Chamorro, or of some other Pacific Islander origin? ❖ If Native Hawaiian, Samoan, or Chamorro, check the appropriate box. ❖ If response is "Other Pacific Islander," ask Question 6h. Otherwise, check appropriate box and move to next person. **6h. What is that origin or origins? For example, Tongan, Fijian, Marshallese, etc.?** ❖ Enter the group(s) provided in the corresponding Other Pacific Islander write-in space in this row.	**Householder:** □□□□□□□□□□□□□□□ □ □□Native Hawaiian □□Samoan □□Chamorro □□Other Pacific Islander: _____ ___	**Person 2:** _____ □□Native Hawaiian □□Samoan □□Chamorro □□Other Pacific Islander: _____	**Person 3:** _____ □□Native Hawaiian □□Samoan □□Chamorro □□Other Pacific Islander: _____	**Person 4:** _____ □□Native Hawaiian □□Samoan □□Chamorro □□Other Pacific Islander: _____	**Person 5:** _____ □□Native Hawaiian □□Samoan □□Chamorro □□Other Pacific Islander: _____	**Person 6:** _____ □□Native Hawaiian □□Samoan □□Chamorro □□Other Pacific Islander: _____

6h_SKIP

> ❖ If person has a response of "Some Other Race" to Question 6a, ask Question 6i for that person.
> ❖ Otherwise, SKIP to 6i_SKIP.

6i. What is your/**\<NAME's\>** other race or origin? ❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.	□□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□□

6i_SKIP
> ❖ After asking race questions for all persons on roster, continue with housing questions.

Now I am going to ask about this place…	☐☐Mobile home
❖ Use flashcard for building types.	☐☐One-family house detached from any other house
7. *Using this list,* **which best describes this building?**	☐☐One-family house attached to one or more houses
❖ Self-propelling RVs or motorhomes should be included in the category "Boat, RV, van, etc." Towable RVs, such as travel trailers or fifth-wheel trailers, should be included in the category "Mobile home."	☐☐Building with 2 apartments ☐☐Building with 3 or 4 apartments
A mobile home A one-family house detached from any other house A one-family house attached to one or more houses A building with 2 apartments A building with 3 or 4 apartments A building with 5 to 9 apartments A building with 10 to 19 apartments A building with 20 to 49 apartments A building with 50 or more apartments Boat, RV, van, etc.	☐☐Building with 5 to 9 apartments ☐☐Building with 10 to 19 apartments ☐☐Building with 20 to 49 apartments ☐☐Building with 50 or more apartments ☐☐Boat, RV, van, etc.
8. About when was this <FILL BUILDING TYPE> **first built?** ❖ If the building was built in the year 2000 or later, enter the specific year. **2000 or later_____ 1990-1999 1980-1989 1970-1979 1960-1969 1950-1959 1940-1949 1939 or earlier**	☐☐2000 or later: Enter year built: _____ ☐☐1990-1999 ☐☐1980-1989 ☐☐1970-1979 ☐☐1960-1969 ☐☐1950-1959 ☐☐1940-1949 ☐☐1939 or earlier

9a. In what year did you/<FILL HOUSEHOLDER> move into this <FILL BUILDING TYPE>?	Year: _____
9b. In what month was that?	Month: _____

9b_SKIP
- ❖ If building type is a HOUSE or a MOBILE HOME, ask Questions 10 and 11.
- ❖ Otherwise, SKIP to Question 12a.

10. Is this <FILL BUILDING TYPE>… **On less than 1 acre,** **Between 1 and 9.9 acres,** **or 10 or more acres?**	☐☐Less than 1 acre ☐☐Between 1 and 9.9 acres ☐☐10 or more acres

10_SKIP
- ❖ If response is "Less than 1 acre," SKIP to Question 12a.
- ❖ Otherwise, go to Question 11a.

11a. IN THE PAST 12 MONTHS, were there any sales of agricultural products from this property? **Yes** **No**	☐☐Yes ☐☐No

11a_SKIP
- ❖ If response is "No," SKIP to Question 12a.
- ❖ Otherwise, go to Question 11b.

11b. How much were the sales? **$1 - $999** **$1,000 - $2,499** **$2,500 - $4,999** **$5,000 - $9,999** **$10,000 or more**	☐☐$1 - $999 ☐☐$1,000 - $2,499 ☐☐$2,500 - $4,999 ☐☐$5,000 - $9,999 ☐☐$10,000 or more
The next questions are about the number and kinds of rooms at this place. Rooms must be separated by built-in archways or walls that extend out at least 6 inches and go from floor to ceiling. **12a. How many separate rooms are in this <FILL BUILDING TYPE> not counting bathrooms, porches, balconies, foyers, halls or unfinished basements?** ❖ INCLUDE bedrooms, kitchens, etc.	Number of rooms: _____
12b. How many of the rooms would you list as bedrooms if this <FILL BUILDING TYPE> were for sale or rent?	Number of bedrooms: _____
13a. Does this <FILL BUILDING TYPE> have hot and cold running water?	☐☐Yes ☐☐No
13b. Does this <FILL BUILDING TYPE> have a bathtub or shower?	☐☐Yes ☐☐No

13c. Does this <FILL BUILDING TYPE> have a sink with a faucet?	☐☐Yes ☐☐No
13d. Does this <FILL BUILDING TYPE> have a stove or range?	☐☐Yes ☐☐No
13e. Does this <FILL BUILDING TYPE> have a refrigerator?	☐☐Yes ☐☐No
14a. Is this <FILL BUILDING TYPE> connected to a public sewer? **Yes** **No**	☐☐Yes ☐☐No
14a_SKIP ❖ If response is "Yes," SKIP to Question 15. ❖ Otherwise, go to Question 14b.	
14b. Is it connected to a septic system or cesspool? **Yes** **No**	☐☐Yes ☐☐No

15. Can you or any member of this household both make and receive phone calls when at this **\<FILL BUILDING TYPE\>**? Include calls using cell phones, land lines, or other phone devices. **Yes** **No**	☐☐Yes ☐☐No
16a. At this **\<FILL BUILDING TYPE\>**, do you or any member of this household own or use a desktop or laptop-computer?	☐☐Yes ☐☐No
16b. At this **\<FILL BUILDING TYPE\>,** Do you or any member of this household own or use a smartphone?	☐☐Yes ☐☐No
16c. At this **\<FILL BUILDING TYPE\>,** Do you or any member of this household own or use a tablet or other portable wireless computer?	☐☐Yes ☐☐No
16d. At this **\<FILL BUILDING TYPE\>,** Do you or any member of this household own or use some other type of computer?	☐☐Yes ☐☐No

16d_SKIP

- ❖ If response to Question 16d is "No," SKIP to Question 17.
- ❖ Otherwise, go to Question 16e.

16e. What is this other type of computer?	Other computer type: _____

17. At this **<FILL BUILDING TYPE>**, do you or any member of this household have access to the Internet? **Yes** **No**	☐☐Yes ☐☐No ☐

17_SKIP
   ❖ If response to Question 17 is "No," SKIP to Question 20.
   ❖ Otherwise, go to Question 18.	

18. At this **<FILL BUILDING TYPE>,** Do you or any member of this household pay a cell phone company or Internet service provider to access the Internet? **Yes** **No**	☐☐Yes ☐☐No

18_SKIP
   ❖ If response to Question 18 is "No," SKIP to Question 20.
   ❖ Otherwise, go to Question 19a.	

19a. Do you or any member of this household have access to the Internet using a cellular data plan for a smartphone or other mobile device?	☐☐Yes ☐☐No☐
19b. Do you or any member of this household have access to the Internet using a broadband or high speed Internet service such as cable, fiber optic, or DSL service installed in this **<FILL BUILDING TYPE>**?	☐☐Yes ☐☐No
19c. Do you or any member of this household have access to the Internet using a satellite Internet service installed in this **<FILL BUILDING TYPE>**?	☐☐Yes ☐☐No

19d. Do you or any member of this household have access to the Internet using a dial-up Internet service installed in this <FILL BUILDING TYPE>?	☐☐Yes ☐☐No
19e. Do you or any member of this household have access to the Internet using some other service?	☐☐Yes ☐☐No

19e_SKIP
- ❖ If response to Question 19e is "No," SKIP to Question 20.
- ❖ Otherwise, go to Question 19f.

19f. What is this other type of Internet service?	Other Internet type: _____
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household? (If a business vehicle is available for personal use, it should be included.) **None** **1** **2** **3** **4** **5** **6 or more**	☐☐None ☐☐1 ☐☐2 ☐☐3 ☐☐4 ☐☐5 ☐☐6 or more

21. At this **<FILL BUILDING TYPE>**, do you or any member of this household own or lease any of the following types of electric vehicles?
 	
❖ Read one at a time:
 	
A plug-in electric vehicle?
A hybrid electric vehicle?
	Plug-in electric vehicle:
	  Yes
	  No
	
	Hybrid electric vehicle:
	  Yes
	  No

22a. To heat this **<FILL BUILDING TYPE>**, which fuel do you use MOST— **Gas,** **Electricity,** **Fuel oil or kerosene,** **Coal or coke,** **Wood,** **Solar energy,** **or Some other fuel?**	☐☐Gas ☐☐Electricity ☐☐Fuel oil or kerosene ☐☐Coal or coke ☐☐Wood ☐☐Solar energy ☐ Some other fuel ☐☐No fuel used

22a_SKIP
   ❖ If response to 22a is "Gas," go to Question 22b.
   ❖ Otherwise, SKIP to Question 23.

22b. Is it natural gas used from underground pipes serving the neighborhood? **Yes** **No**	☐☐Yes ☐☐No

22b_SKIP
- ❖ If response to Question 22b is "Yes," SKIP to Question 23.
- ❖ Otherwise, go to Question 22c.

22c. Is it bottled or tank gas, such as propane or butane? **Yes** **No**	☐☐Yes ☐☐No
23. Does this <FILL BUILDING TYPE> use solar power or photovoltaic panels that generate electricity? **Yes** **No**	☐☐Yes ☐☐No
The next few questions deal with general utility use… **24a. Does anyone in this household pay for electricity?** **Yes** **No**	☐☐Yes ☐☐No

24a_SKIP
- ❖ If response to 24a is "No," SKIP to Question 24c.
- ❖ Otherwise, go to Question 24b.

24b. LAST MONTH, what was the cost of electricity for this <FILL BUILDING TYPE>? ❖ Estimate last month's cost in dollars. ❖ If electricity and gas are paid together, enter the combined amount under electricity and enter that it includes gas in Question 24f.	Cost of Electricity: $_____

24b_SKIP ❖ If Question 24b was asked, SKIP to Question 24d. ❖ Otherwise, go to Question 24c.	
24c. Are the electricity costs included in the rent or condominium fee or is there no charge for electricity? **Included in rent or condominium fee** **No charge for electricity**	☐☐Included in rent or condominium fee ☐☐No charge for electricity
24d. Does anyone in this household pay for gas? **Yes** **No**	☐☐Yes ☐☐No
24d_SKIP ❖ If response to 24d is "No," SKIP to Question 24f. ❖ Otherwise, go to Question 24e.	
24e. LAST MONTH, what was the cost of gas for this <FILL BUILDING TYPE>? ❖ Estimate last month's cost in dollars.	Cost of Gas: $_____
24e_SKIP ❖ If Question 24e was asked, SKIP to Question 24g. ❖ Otherwise, go to Question 24f.	
24f. Are the gas costs included in the rent or condominium fee, or included in the electricity payment, or is there no charge for gas? **Included in rent or condominium fee** **Included with electricity payment recorded above** **No charge for gas**	☐☐Included in rent or condominium fee ☐☐Included in electricity payment recorded above ☐☐No charge or gas not used

24g. Does anyone in this household pay for water and sewer?	☐☐Yes ☐☐No

24g_SKIP
  ❖ If response to 24g is "No," SKIP to Question 24i.
  ❖ Otherwise, go to Question 24h.	

24h. IN THE PAST 12 MONTHS, what was the cost of the water and sewer for this <FILL BUILDING TYPE>? ❖ Estimate past 12 months' cost in dollars.	Water and Sewer Cost: $_____

24h_SKIP
  ❖ If Question 24h was asked, SKIP to Question 24j.
  ❖ Otherwise, go to Question 24i.	

24i. Are the water and sewer costs included in the rent or condominium fee, or is there no charge for water and sewer? **Included in rent or condominium fee** **No charge for water and sewer**	☐☐Included in rent or condominium fee ☐☐No charge for water and sewer
24j. Does this household use other fuels like oil, coal, kerosene, wood or any other fuel? **Yes** **No**	☐☐Yes ☐☐No

24j_SKIP
  ❖ If response to Question 24j was "No," SKIP to Question 25.
  ❖ Otherwise, go to Question 24k.	

24k. Does anyone in this household pay for other fuels like oil, coal, kerosene, wood or any other fuel? **Yes** **No**	☐☐Yes ☐☐No

24k_SKIP
   ❖ If response to Question 24k is "No," SKIP to Question 24m.
   ❖ Otherwise, go to Question 24L.	

24L. IN THE PAST 12 MONTHS, what was the cost of other fuels like oil, coal, kerosene, wood, or any other fuel for this <FILL BUILDING TYPE>? ❖ Estimate past 12 months' cost in dollars.	☐☐Cost of Other Fuels: $_____

24L_SKIP
   ❖ If Question 24L was asked, SKIP to Question 25a.
   ❖ Otherwise, go to Question 24m.	

24m. Are the costs of the other fuels like oil, coal, kerosene, wood or any other fuel included in the rent or condominium fee, or is there no charge for other fuels? **Included in rent or condominium fee** **No charge for other fuels**	☐☐Included in rent or condominium fee ☐☐No charge for other fuels
The next few questions refer to this <FILL BUILDING TYPE>. **25a. Is this <FILL BUILDING TYPE> part of a condominium?** **Yes** **No**	☐☐Yes ☐☐No

25a_SKIP	
❖ If response to 25a is "No," SKIP to Question 26. ❖ Otherwise, go to Question 25b.	

25b. Is there a condominium fee? **Yes** **No**	☐☐Yes ☐☐No

25b_SKIP	
❖ If response to 25b is "No," SKIP to Question 26. ❖ Otherwise, go to Question 25c.	

25c. What is the MONTHLY condominium fee? ❖ Estimate monthly amount in dollars.	Monthly Condo Fee: $_____

26. Do you or does someone in this household own this <FILL BUILDING TYPE> with a mortgage or loan including home equity loans, own it free and clear, rent it, or occupy it without having to pay rent? **Own with a mortgage or loan including home equity loans** **Own free and clear** **Rent** **Occupy without having to pay rent**	☐☐ Own with a mortgage or loan including home equity loans ☐☐ Own free and clear ☐☐ Rent ☐☐ Occupy without having to pay rent

26_SKIP	
❖ If response to Question 26 is "Rent," go to Question 27a. ❖ Otherwise, SKIP to Question 28.	

27a. What is the MONTHLY rent for this <FILL BUILDING TYPE>? ❖ Estimate monthly rent in dollars.	Monthly Rent: $_____
27b. Does the MONTHLY rent include any meals? **Yes** **No**	☐☐ Yes ☐☐ No
27b_SKIP ❖ If respondent or any member of this household owns or is buying this house, apartment, or mobile home, go to Question 28. ❖ Otherwise, SKIP to Question 35.	
28. How much do you think this <FILL BUILDING TYPE> would sell for if it were for sale? ❖ Estimate value of property in dollars. ❖ Property includes house and lot, mobile home and lot, or apartment. ❖ If respondent says any value less than $1000 ('50' or 50K), probe to verify the amount (for example, $50,000). ❖ If respondent doesn't know exact value, ask for a range and then pick the midpoint.	Property Value: $_____
29. What are the annual real estate taxes on THIS property? ❖ Estimate annual amount in dollars.	Real Estate Taxes: $_____

30. What is the annual payment for fire, hazard, and flood insurance on THIS property? ❖ Estimate annual amount in dollars.	Property Insurance: $_____

30_SKIP
    ❖ If response to Question 26 is "Own with a mortgage or loan including home equity loans," go to Question 31.
    ❖ Otherwise, SKIP to Question 33a.	

31. Earlier I recorded that there is a mortgage or loan on this property. Is it a mortgage, deed of trust, contract to purchase, or similar debt? **Yes, mortgage, deed of trust, or similar debt** **Yes, contract to purchase** **No**	☐ Yes, mortgage, deed of trust, or similar debt ☐ Yes, contract to purchase ☐ No

31_SKIP
    ❖ If response is "No," SKIP to Question 33a.
    ❖ Otherwise, go to Question 32a.	

32a. What is the regular MONTHLY mortgage payment on this property? ❖ Only include payments on first mortgage or contract to purchase. ❖ Estimate monthly amount in dollars. ❖ Enter zero for no regular payment required, or for reverse mortgage.	Monthly Mortgage Amt: $_____

32a_SKIP
    ❖ If response is zero, SKIP to Question 33a.
    ❖ Otherwise, go to Question 32b.	

32b. Does the regular MONTHLY mortgage payment include payments for real estate taxes? **Yes, taxes included in payment** **No, taxes paid separately or taxes not required**	☐☐ Yes, taxes included in payment ☐☐ No, taxes paid separately or taxes not required
32c. Does the regular MONTHLY mortgage payment include payments for fire, hazard, or flood insurance? **Yes, insurance included in payment** **No, insurance paid separately or no insurance**	☐☐ Yes, insurance included in payment ☐☐ No, insurance paid separately or no insurance
33a. Is there a second or junior mortgage on this property? **Yes** **No**	☐☐ Yes ☐☐ No
33b. Is there a home equity loan on this property? **Yes** **No**	☐☐ Yes ☐☐ No
33c. What is the regular MONTHLY payment on all second or junior mortgages and all home equity loans on this property? ❖ Estimate monthly amount in dollars ❖ Enter zero for no regular payment required.	Additional Loan Amt: $_____
33c_SKIP ❖ If this is a mobile home, go to Question 34. ❖ Otherwise, SKIP to Question 35.	

Participant ID #: |___|___|___|___|___|___|___|___|___|___|

34. What are the total annual costs for personal property taxes, site rent, registration fees, and license fees on THIS mobile home and its site? ❖ Do not include real estate taxes. ❖ Estimate annual amount in dollars. ❖ Enter zero for none.	Mobile Home Costs: $_____
35. In 2019, did you or any member of this household receive benefits from the Food Stamp Program or SNAP, the Supplemental Nutrition Assistance Program? Do NOT include WIC, the School Lunch Program, or assistance from food banks. **Yes** **No**	☐Yes ☐No
<u>**Overcount Follow-up**</u> **We are conducting research to understand why people stay in more than one place. Earlier in the survey you indicated that** <Name(s) from Additional Person(s)> **sometime/s live/s somewhere else or is/are only staying here for a short time.** **Could you briefly explain** <Name(s) from Additional Person(s)>**'s living situation?**	Explanation: _____