



# Consumer Price Index: Housing Survey Form

**BLS Contact:** <Enter Name>  
**Contact Phone:** <Enter Phone>  
**Contact Fax:** <Enter Fax>  
**Contact Email:** <Enter Email>  
**Please Return Form By:** <Add Date>  
**Number of Units:** 1

<b>Address:</b>		<b>Unit:</b>
Tenant Name OR Initials		<Enter Name of Occupant>
When did the person, who has lived in this house (or apartment) the longest, move in?		<Enter Date>
Is this unit occupied by the owner or is it rented?		<Select>
Is this unit part of an assisted living program?		<Select Yes or No>
Is this unit the primary residence of at least one of the occupants?		<Select Yes or No>
Is anyone living in the household a relative of the landlord?		<Select Yes or No>
How many bedrooms, baths, and other rooms are there?		
	Bedrooms	<#>
	Full Baths	<#>
	Half Baths	<#>
	Other	<#>
	<b>Total:</b>	0
Is this house/apartment under rent control?		<Select Yes or No>
Do you/Does the tenant have a lease or other rental agreement?		<Select Yes or No>
If Yes, How long is the current lease agreement?		<Select>
If 12-months or any other length of time, "In what month and year did the current lease start?"		<Enter Month and Year>
How much rent is the tenant paying for this house now?		<Enter Amount>
What period of time does that rent cover?		<Select>
Is the rent lower because the Landlord receives a subsidy from the government such as Section 8?		<Select Yes or No>
If Yes, how much was the subsidy?		<Enter Amount>
Is the rent lower because someone did work for the landlord?		<Select Yes or No>
If Yes, how much was the work reduction?		<Enter Amount>
	<b>Total Rent:</b>	\$ -
Does this rent include any optional extra charges?		<Select Yes or No>
If Yes, what is the amount of the extra charge?		<Enter Amount>
Does the Landlord provide free off street parking?		<Select Yes or No>
Who pays for the water service?		<Select>
Who pays for the sewer service?		<Select>
Who pays for the electricity?		<Select>
If this is paid by the Tenant, is the cost of electricity included in the rent you reported earlier?		<Select Yes or No>
What type of A/C equipment does this unit have?		<Select>
If Thru-the-wall A/C, how many does this unit have?		<Enter Amount>
If Window A/C, how many does this unit have? How many are provided by the Landlord?		<Enter Each Amount>
What is the primary type of heating fuel used by this unit?		<Select>
Who pays for the heating fuel?		<Select>
If this is paid by the tenant, is the cost of heat fuel included in the rent you reported earlier?		<Select Yes or No>
What is the primary type of hot water fuel used by this unit?		<Select>
Who pays for the heating fuel?		<Select>
If this is paid by the tenant, is the cost of heat fuel included in the rent you reported earlier?		<Select Yes or No>
If the building/structure is a multi-unit, how many units are in the building?		<Enter Number of Units>
If the building/structure is a multi-unit, is there an elevator?		<Select Yes or No>
<b>Additional Information:</b>		
<b>Respondent Comments:</b>		