9/29/06 **Questionnaire:** Family

## HOUSING CHARACTERISTICS – HOQ Target Group: SPs Family

HOQ.040	I'd like to ask you a few questions about your home.				
	When was this home originally built?				
	READ CATEGORIES IF NECESSARY.				
		1990 TO PRESENT, 1 1978 TO 1989, 2 1960 TO 1977, 3 1950 TO 1959, 4 1940 TO 1949, OR 5 BEFORE 1940? 6 REFUSED 77 DON'T KNOW 99			
HOQ.050	How many rooms are in this home? Count the kitchen but not the bathroom.				
		 ENTER NUMBER OF ROOMS			
		REFUSED 777777 DON'T KNOW 999999			
HOQ.060 G/Q/U	How long {have you/has your family} lived at this address?				
		 ENTER NUMBER (OF MONTHS OR YEARS)			
		LESS THAN ONE MONTH	(HOQ.065)		
		ENTER UNIT			
		MONTHS			
HOQ.065	Is this home owned, being bought, rented, or occupied by some other arrangement by {you/you or someone else in your family}?				
		OWNED OR BEING BOUGHT			

HOQ.070	What is the source of tap water in this home? Is it a private or public water company, a private or public well, or something else?			
		PRIVATE/PUBLIC WATER COMPANY PRIVATE/PUBLIC WELL SOMETHING ELSE	2 3 7	
HOQ.080	Are any of the water treatme	DON'T KNOWent devices listed on this card used in your home?		
	HAND CARD HOQ1	YES NO REFUSED DON'T KNOW	2 (END OF SECTION) 7 (END OF SECTION)	
HOQ.083	Which of these water treatment of these water treatment of these water treatment of the the treatment of the these water treatment of the treat	BRITA OR OTHER PITCHER WATER FILTER CERAMIC OR CHARCOAL FILTER	2	
		AERATOR	4 5 7	