Facsimile of the Annual Housing Survey Questionnaire: 1983

O.M.B. No. 2528-0016: Approval Expires May 31, 1985

1. Control number (cc 1) PSU | Segment | Serial | Panel

2. Sample F-3

NOTICE – All information which would permit identification of the individual will be held in strict confidence by law, under U.S. Code, title 13, section 9a. It may be seen only by sworn Census employees and may be used only for statistical purposes.

FORM AHS-52 (9-14-82)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR
DEPARTMENT OF HOUSING AND
URBAN DEVELOPMENT

ANNUAL HOUSING SURVEY

SMSA – GROUP BB2 – 1983

3. Household No. (cc 2)

4. Type of segment (cc 3)
1 ☐ Unit
2 ☐ Area
3 ☐ Permit
4 ☐ Special place

5a. Interviewer name

b. Code

c. Date of first visit — Month | Day | Year

d. Date completed — Month | Day | Year

e. Line No. of HH respondent (cc 10)

6. LAND USE

RURAL

(001) 1 ☐ Reg. units OR Sp. Pl. units coded 85–88 in Control Card item 5c
2 ☐ Sp. Pl. units not coded 85–88 in Control Card item 5c

URBAN

3 ☐ All Reg. and Sp. Pl. units

7a. Status of control number

(002) 1 ☐ Control number in sample last enumeration period – *Skip to Item 8*
☐ Control number in sample for first time this enumeration period – *Fill item 7b*

b. Reason for adding control number

(002) 2 ☐ New construction
3 ☐ Mobile home moved in
4 ☐ House moved in
5 ☐ Unit resulted from structural conversion
6 ☐ Conversion of nonresidential unit
7 ☐ Other – *Specify*

8. Type of interview

(003) 1 ☐ Regular – *(One or more "Y's" in cc 11c)*
2 ☐ URE – *(All "N's" in cc 11c)*
3 ☐ Vacant
Skip to Section II, page 3

4 ☐ Noninterview
☐ Type A or B – *Skip to item 12D, page 40*
☐ Type C – *Enclose completed AHS-87 and go to Control Card item 39*

Section I (TRANSCRIBE FROM CONTROL CARD)

9. Reason for noninterview (cc 40d)

a. Type A

(004) 1 ☐ No one home
2 ☐ Temporarily absent
3 ☐ Refused
4 ☐ Unable to locate
5 ☐ Other occupied – *Specify*

b. Type B

(004) 10 ☐ Unit for nonresidential use (e.g., business, school, or commercial storage)
11 ☐ OTHER unit, except unoccupied site for mobile home or tent
Fill item 9e
12 ☐ Unoccupied site for mobile home or tent
13 ☐ Under construction – not ready
14 ☐ Scheduled to be demolished
15 ☐ Condemned or occupancy prohibited by law
16 ☐ Interior exposed to the elements
17 ☐ Unit severely damaged by fire
18 ☐ Other – *Specify*
Fill items 9d and e
19 ☐ Permit granted – construction not started

9. Reason for noninterview (cc 40d) – Continued

c. Type C

(004) 30 ☐ Unit eliminated in structural conversion
31 ☐ Demolished
32 ☐ Disaster loss (flood, tornado, etc.)
33 ☐ Disaster loss – fire
34 ☐ House or mobile home moved *(Do not mark if the sample unit is a mobile home in a mobile home park)*
35 ☐ Merged – not in current sample
36 ☐ FOR OFFICE USE
37 ☐ Other – *Specify*
38 ☐ Unused permit – abandoned
(Fill for Type B14 through B18 only)

d. Unit boarded-up (cc 40e)

(005) 1 ☐ Yes
2 ☐ No
(Fill for applicable Type B10, 11, 14–18 only)

e. Status of structure *(Item 6, form AHS-97)*

(006) 1 ☐ Structure currently has no housing units
2 ☐ Structure currently has one or more housing units

Section I – Continued (TRANSCRIBE FROM CONTROL CARD)

10. Structure originally built (cc 6)

☐ April 1, 1970 or later

(007) Year

OR

(007) 1 ☐ 1969 to March 31, 1970
2 ☐ 1965–1968
3 ☐ 1960–1964
4 ☐ 1950–1959
5 ☐ 1940–1949
6 ☐ 1939 or earlier

OFFICE USE ONLY
(007) × [ ]

11. Access (cc 9d)

(008) 1 ☐ Direct
2 ☐ Through another unit

12. Type of living quarters (cc 9b and c)

HOUSING UNIT

(009) 1 ☐ House, apartment, flat
2 ☐ HU in nontransient hotel, motel, etc.
3 ☐ HU permanent in transient hotel, motel, etc.
4 ☐ HU in rooming house
5 ☐ Mobile home or trailer with NO permanent room added
6 ☐ Mobile home or trailer WITH one or more permanent rooms added
7 ☐ HU not specified above – *Specify*

OTHER UNIT *(Treat as Type B Noninterview)*

8 ☐ Quarters not HU in rooming or boarding house
9 ☐ Unit not permanent in transient hotel, motel, etc.
10 ☐ Unoccupied tent site or trailer site
11 ☐ OTHER unit not specified above – *Specify*

13. Occupancy status (cc 40c)

(010) 1 ☐ Reg. Occu. or Occu. – *Skip to Section IVA, page 8*
2 ☐ Vac. – *End transcription*
3 ☐ URE. Occu. or URE – *Skip to Section IVA, page 8*

END OF TRANSCRIPTION FOR NONINTERVIEWS

NOTES

QUESTIONNAIRE ITEMS TO BE FILLED FOR NONINTERVIEWS AND VACANT INTERVIEWS

NONINTERVIEWS			VACANT INTERVIEWS
TYPE A	TYPE B	TYPE C	
I.D. Items 1 and Address* 3–Se** 6–8 Section I items 9a 11 12 13 Section XI, page 40	I.D. Items 1 and Address* 3–Se** 6–8 Section I items 9b 9d and e *(Where appropriate)* 11 12 Section XI, page 40	I.D. Items 1 and Address* 3–Se** 6–8 Section I items 9c	I.D. Items 1 and Address* 3–8** Section I items 10–13 Section II, page 3 Section III, pages 4–7 Section XI, page 40

*NOTE – Fill item 1 only if AHS-52 is not labeled or if control number on label is incorrect. In addition, the complete address of the sample unit must be entered or updated on each questionnaire.

**NOTE – In item 5e enter the relationship of the person providing the information for the Noninterview or Vacant interview; e.g., manager, agent, or neighbor. If no one was consulted, leave item 5e blank.

FORM AHS-52 (9-14-82)

Page 2

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section II – REGULAR, URE, AND VACANT INTERVIEWS

1. How many rooms are in this house (apartment)? Do not count bathrooms, porches, balconies, foyers, halls, or half-rooms.
   (022) _____ Number of rooms
   (022) OFFICE USE ONLY x ☐

2. How many bedrooms are in this house (apartment)? Count rooms used mainly for sleeping even if used for other purposes.
   (024) _____ Number of bedrooms
   OR
   0 ☐ None

3. Does this house (building) have complete kitchen facilities; that is, a kitchen sink with piped water, a refrigerator and a range or a cookstove which are available for your use (the use of the intended occupants)?
   (026) 1 ☐ Yes – For this household only
   2 ☐ Yes – Also used by another household
   3 ☐ No

4. Does the water for this house (apartment) come from a public or private system; an individual well; or some other source such as a spring, creek, river, cistern, etc.?
   (028) 1 ☐ A public system or private company
   2 ☐ An individual well
   3 ☐ Some other source – *Specify below*

5. What means of sewage disposal does this house (building) have?
   (030) 1 ☐ Public sewer
   2 ☐ Septic tank or cesspool
   3 ☐ Chemical toilet
   4 ☐ Privy
   5 ☐ Use facilities in another structure
   6 ☐ Other – *Specify*

☐ Vacant interview – *Skip to 7*

6. How is this house (apartment) heated – by gas, oil, electricity, or with some other fuel?
   (Mark the ONE used most)
   (032) GAS
   1 ☐ From underground pipes serving the neighborhood
   2 ☐ Bottled, tank, or LP
   3 ☐ Fuel oil
   4 ☐ Kerosene, etc.
   5 ☐ Electricity
   6 ☐ Coal or coke
   7 ☐ Wood
   8 ☐ Solar heat
   9 ☐ Other fuel
   0 ☐ No fuel used

7. Is there a garage or carport on this property which is currently available for your use (the use of the intended occupants)?
   (034) 1 ☐ Yes
   2 ☐ No

CHECK ITEM A

(See item 8, page 1)

☐ Regular or URE interview – *Skip to Section IVB, page 10*

☐ Vacant interview – *Go to Section III, page 4*

PGM 3

Section III – VACANT INTERVIEWS

1a. How many living quarters, both occupied and vacant, are there in this house (building)?
   (101) 1 ☐ Mobile home or trailer (no permanent room attached) – *Skip to item 2a*
   2 ☐ One, detached from any other building (includes mobile home or trailer WITH one or more permanent rooms attached)
   3 ☐ One, attached to one or more buildings
   4 ☐ 2
   5 ☐ 3 or 4
   6 ☐ 5 to 9
   7 ☐ 10 to 19
   8 ☐ 20 to 49
   9 ☐ 50 or more
   Skip to item 2a
   (101) OFFICE USE ONLY x ☐

OBSERVATION
b. Is any part of this property used as a commercial establishment?
   (103) 1 ☐ Yes
   2 ☐ No

OBSERVATION
c. Is any part of this property used as a medical or dental office?
   (104) 1 ☐ Yes
   2 ☐ No

2a. How many stories (floors) are there in this house (building)? Do not count the basement.
   (MARK mobile homes by observation)
   (105) 1 ☐ 1 to 3 – *Skip to 3*
   2 ☐ 4 to 6
   3 ☐ 7 to 12
   4 ☐ 13 or more

OBSERVATION
b. Is there a passenger elevator in this building?
   (106) 1 ☐ Yes
   2 ☐ No

3. Does this house (building) have complete plumbing facilities; that is, hot and cold piped water, a flush toilet and a bathtub or shower, which are available for the use of the intended occupants of this house (apartment)?
   ☐ Yes → Are these facilities ONLY for the use of the intended occupants?
   (107) 1 ☐ Yes – Used for this household only – *Ask 4*
   2 ☐ No – Also used by another household – *Skip to 5*
   3 ☐ No – *Skip to 5*

4. A complete bathroom is a room with a flush toilet, a bathtub or shower, and a washbasin with piped water.
   A half bathroom has at least a flush toilet or a bathtub or shower, but does not have all the facilities for a complete bathroom.
   How many complete bathrooms and half bathrooms does this house (apartment) have?
   (Mark only one box)
   (108) 1 ☐ Complete plumbing facilities but not in one room
   2 ☐ 1 complete bathroom
   3 ☐ 1 complete bathroom plus a half bath with no flush toilet
   4 ☐ 1 complete bathroom plus a half bath with flush toilet
   5 ☐ 2 complete bathrooms
   6 ☐ More than 2 complete bathrooms

NOTES

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section III – VACANT INTERVIEWS – Continued

5. What type of heating equipment does this house (apartment) have?

(MARK heating equipment to be used most)

SHOW FLASHCARD B

(109)
1 ☐ Central warm-air furnace with ducts in individual rooms
2 ☐ Heat pump
3 ☐ Steam or hot water system
4 ☐ Built-in electric units (permanently installed in wall, ceiling, or baseboard)
5 ☐ Floor, wall, or pipeless furnace
6 ☐ Room heater(s) WITH flue or vent burning gas, oil, or kerosene
7 ☐ Room heater(s) WITHOUT flue or vent burning gas, oil, or kerosene
8 ☐ Fireplaces, stoves, or portable room heaters
9 ☐ Unit has no heating equipment

6a. Is this unit intended for year-round use, for occupancy only on a seasonal basis, or for use by migrant workers?

(117)
☐ YEAR ROUND – *Ask 6b*
10 ☐ Seasonal – summers only
11 ☐ Seasonal – winters only
12 ☐ Other seasonal – *Specify in Notes*
0 ☐ Migratory
} Skip to 7

NOTES – Other seasonal use

OFFICE USE ONLY (117) ☐

b. Is this house (apartment) for rent, for sale only, rented not occupied, sold not occupied, held for occasional use, or something else?

(117)
1 ☐ For rent, OR for sale or for rent
2 ☐ For sale only – regular ownership
3 ☐ For sale only – condominium ownership
} Skip to 7
4 ☐ For sale only – cooperative ownership – *Ask 6c*
5 ☐ Rented, not occupied
6 ☐ Sold, not occupied
7 ☐ Held for occasional use
8 ☐ Other vacant – *Specify*
} Skip to 7

OFFICE USE ONLY (117) ☐

c. To the Census Bureau, a cooperative is property which is owned by a corporation. Each shareholder is entitled to occupy an individual unit. Is this what you mean when you say this is a cooperative?

☐ Yes
☐ No – Recode 6b and correct the entry

7. How many months has this house (apartment) been vacant?

(119)
1 ☐ Less than 1 month
2 ☐ 1 month up to 2 months
3 ☐ 2 months up to 6 months
4 ☐ 6 months up to 12 months
5 ☐ 1 year up to 2 years
6 ☐ 2 years or more

OBSERVATION

8a. Is the unit boarded-up?

(120)
1 ☐ Yes
2 ☐ No

OBSERVATION

b. Are there any buildings (other than this building) with windows broken or boarded-up on this street?

(121)
1 ☐ Yes
2 ☐ No

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Page 5

Section III – VACANT INTERVIEWS – Continued

9. Does this place have 10 acres or more?

(122)
1 ☐ Yes, 10 acres or more
2 ☐ No, less than 10 acres

CHECK ITEM A

VACANCY STATUS *(See item 6b, page 5)*

- **FOR RENT, OR FOR SALE OR FOR RENT** *(6b, box 1)*

(See item 1a, page 4, and item 9 above)
☐ One-unit structure on less than 10 acres – Skip to item 11
☐ One-unit structure on 10 acres or more – Skip to item 13, page 7
☐ Two-or-more unit structure or a mobile home or trailer – Skip to item 11

- **FOR SALE ONLY** *(6b, box 2, 3, or 4)*

REGULAR OWNERSHIP

(See items 1a, 1b, 1c on page 4, and item 9 above)
☐ One-unit structure on less than 10 acres and there is no commercial establishment or medical or dental office on the property – *Ask item 10*
☐ All others – Skip to item 14, page 7

☐ **A CONDOMINIUM** – *Ask item 10*
☐ **A COOPERATIVE** – *Skip to item 14, page 7*

- **ALL OTHERS** *(6b, box 5, 6, 7, 8, DK, NA, REF, or Blank)*

☐ Other vacants, units rented or sold, units held for occasional use, seasonal, and similar units – *Skip to item 13, page 7*

10. What is the sale price asked for this property (condominium unit)?

SHOW FLASHCARD C

(126)
1 ☐ Less than $5,000
2 ☐ $ 5,000 – $ 7,499
3 ☐ 7,500 – 9,999
4 ☐ 10,000 – 12,499
5 ☐ 12,500 – 14,999
6 ☐ 15,000 – 17,499
7 ☐ 17,500 – 19,999
8 ☐ 20,000 – 22,499
9 ☐ 22,500 – 24,999
10 ☐ 25,000 – 27,499
11 ☐ 27,500 – 29,999
12 ☐ 30,000 – 34,999
13 ☐ 35,000 – 39,999
14 ☐ 40,000 – 44,999
15 ☐ 45,000 – 49,999
16 ☐ 50,000 – 54,999
17 ☐ 55,000 – 59,999
18 ☐ 60,000 – 64,999
19 ☐ 65,000 – 69,999
20 ☐ 70,000 – 74,999
21 ☐ 75,000 – 79,999
22 ☐ 80,000 – 89,999
23 ☐ 90,000 – 99,999
24 ☐ 100,000 – 124,999
25 ☐ 125,000 – 149,999
26 ☐ 150,000 – 199,999
27 ☐ 200,000 – 249,999
28 ☐ 250,000 – 299,999
29 ☐ 300,000 or more
} Skip to item 14, page 7

11. What is the MONTHLY rent?

(Mark the frequency of payment box and enter the MONTHLY rent. If rent is not to be paid by the month, compute the MONTHLY rent in the "Notes" space, and enter the MONTHLY rent on the line provided.)

(Include site rent for mobile homes if it is to be paid separately.)

(151) $ _____ .00 Per month

(152)
1 ☐ More frequently than once a month
2 ☐ Less frequently than once a month
3 ☐ Once a month

Notes

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Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section III – VACANT INTERVIEWS – Continued

12a. In addition to rent, does the renter also pay for electricity?	(156)	1 ☐ Yes 2 ☐ No, included in rent 3 ☐ No, electricity not used
b. In addition to rent, does the renter also pay for gas?	(158)	1 ☐ Yes 2 ☐ No, included in rent 3 ☐ No, gas not used
c. In addition to rent, does the renter also pay for water?	(160)	1 ☐ Yes 2 ☐ No, included in rent or no charge
d. In addition to rent, does the renter also pay for oil, coal, kerosene, wood, OR any other fuel?	(162)	1 ☐ Yes 2 ☐ No, included in rent 3 ☐ No, these fuels not used or obtained free
e. In addition to rent, does the renter also pay for garbage (food waste) collection?	(164)	1 ☐ Yes 2 ☐ No
13. Is this house (apartment) part of a condominium?	(527)	1 ☐ Yes, part of a condominium 2 ☐ No
14. How many rooms in this house (apartment) do NOT have hot air ducts, registers, radiators, or room heaters? Do not count the kitchen or bathroom(s).	(803)	1 ☐ None 2 ☐ 1 room 3 ☐ 2 rooms 4 ☐ 3 or more rooms
15. Does each room in this house (apartment) have a working electric wall outlet (wall plug)?	(808)	1 ☐ Yes 2 ☐ No
16. Is all the wiring in this house (apartment) concealed in the walls or in metal coverings? Do not count appliance cords, extension cords, or chandelier cords.	(809)	1 ☐ Yes 2 ☐ No
17a. Is it necessary to go through any bedroom to get to any bathroom?	(810)	1 ☐ Yes 2 ☐ No
b. Is it necessary to go through any bedroom to get to any other room?	(811)	1 ☐ Yes 2 ☐ No
18. Is there a basement in this house (building)? *(A basement is an enclosed space in which persons can walk upright under all or part of the building.)*	(841)	1 ☐ Yes 2 ☐ No } Go to Check Item AA, page 40

NOTES

Section IVA – REGULAR (OR URE) INTERVIEWS

TRANSCRIBE

→ PGM 4 ~

1. Line number of household respondent (See item 5e, page 1) (090) ☐☐

HOUSEHOLD CHARACTERISTICS – *TRANSCRIBE FROM CONTROL CARD*

2a. Line number (cc 10)	2b. Relationship to reference person (cc 11b) *Transcribe information for all persons listed in control card item 11a whose line number is not deleted. INCLUDE REFERENCE PERSON.* OFFICE USE ONLY	2c. Household member (cc 11c) CIRCLE ONE Yes	No	2d. Age (cc 14)	2e. Marital status (For persons 14+) (cc 15) 1 – Married 2 – Widowed 3 – Divorced 4 – Separated 5 – Never married ENTER CODE IN UNSHADED AREA	2f. Race (cc 16) *Note – If using 4-page blue or green cc convert the written entry using the following codes:* 1 – White 2 – Negro 3 – Other ENTER CODE IN UNSHADED AREA	2g. Sex (cc 17) CIRCLE ONE Male	Female
		1	2				1	2
		1	2				1	2
		1	2				1	2
		1	2				1	2
		1	2				1	2
		1	2				1	2
		1	2				1	2
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		1	2				1	2
		1	2				1	2
		1	2				1	2
		1	2				1	2
		1	2				1	2
		1	2				1	2

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

~ PGM 5 ↓

Section IVA – REGULAR (OR URE) INTERVIEWS – Continued

TRANSCRIBE FROM CONTROL CARD

3. Highest grade completed by reference person (cc 19)

(091)
- 0 ☐ Never attended school
- 1 ☐ Kindergarten
- 2 ☐ First
- 3 ☐ Second
- 4 ☐ Third
- 5 ☐ Fourth
- 6 ☐ Fifth
- 7 ☐ Sixth
- 8 ☐ Seventh
- 9 ☐ Eighth
- 10 ☐ Ninth
- 11 ☐ Tenth
- 12 ☐ Eleventh
- 13 ☐ Twelfth

College (Academic years)
- 14 ☐ C1
- 15 ☐ C2
- 16 ☐ C3
- 17 ☐ C4
- 18 ☐ C5
- 19 ☐ C6 or more

4. Ethnic origin (cc 20)

(092)
- 1 ☐ Mexican-American
- 2 ☐ Chicano
- 3 ☐ Mexican
- 4 ☐ Mexicano
- 5 ☐ Puerto Rican
- 6 ☐ Cuban
- 7 ☐ Central or South American
- 8 ☐ Other Spanish – *Specify* _____
- 9 ☐ Other – *Specify* _____

5. When reference person moved in (cc 21)

After April 1, 1970 ↙

(093) Month (01–12) | Year

OR

(093)
- 1 ☐ 1965 to April 1, 1970
- 2 ☐ 1960 to 1964
- 3 ☐ 1950 to 1959
- 4 ☐ 1949 or earlier

(093) OFFICE USE ONLY × ☐

6. Use of telephone (cc 38a)

(095)
- 1 ☐ Yes
- 2 ☐ No

INTERVIEWER INSTRUCTION ➧ *END TRANSCRIPTION*

FORM AHS-82 (9-14-82)

Section IVB – REGULAR (OR URE) INTERVIEWS

7a. Are your living quarters owned or being bought by you or by someone else in your household?

☐ Yes ↙

Are they owned as a cooperative or condominium?

(100)
- 1 ☐ No, regular ownership – *Skip to 8a*
- 2 ☐ Yes, a cooperative – *Skip to 7c*
- 3 ☐ Yes, a condominium – *Skip to 8a*

☐ No – *Ask 7b*

(100) OFFICE USE ONLY × ☐

b. Are your living quarters rented for cash by you or by someone else or occupied without payment of cash rent?

(100)
- 4 ☐ Rented for cash
- 5 ☐ Occupied without payment of cash rent

} Skip to 8a

c. To the Census Bureau, a cooperative is property which is owned by a corporation. Each shareholder is entitled to occupy an individual unit. Is this what you mean when you say this is a cooperative?

- ☐ Yes
- ☐ No – *Reask 7a and correct the entry*

8a. How many living quarters, both occupied and vacant, are there in this house (building)?

(101)
- 1 ☐ Mobile home or trailer (no permanent room attached) – *Go to 8b*
- 2 ☐ One, detached from any other building (includes mobile home or trailer WITH one or more permanent rooms attached)
- 3 ☐ One, attached to one or more buildings
- 4 ☐ 2
- 5 ☐ 3 or 4

} Skip to 8c

- 6 ☐ 5 to 9
- 7 ☐ 10 to 19
- 8 ☐ 20 to 49
- 9 ☐ 50 or more

} Skip to 9a

(101) OFFICE USE ONLY × ☐

OBSERVATION

b. How many mobile homes are in this group?

(102)
- 1 ☐ 1–5
- 2 ☐ 6–99
- 3 ☐ 100 or more

} Skip to 9a

OBSERVATION

c. Is any part of this property used as a commercial establishment?

(103)
- 1 ☐ Yes
- 2 ☐ No

OBSERVATION

d. Is any part of this property used as a medical or dental office?

(104)
- 1 ☐ Yes
- 2 ☐ No

9a. How many stories (floors) are in this house (building)? Do not count the basement.

(MARK mobile homes by observation.)

(105)
- 1 ☐ 1 to 3 – *Skip to 10*
- 2 ☐ 4 to 6
- 3 ☐ 7 to 12
- 4 ☐ 13 or more

b. Is there a passenger elevator in this building?

(106)
- 1 ☐ Yes
- 2 ☐ No

10. Do you have complete plumbing facilities in this house (building); that is, hot and cold piped water, a flush toilet and a bathtub or shower, which are available for your use?

(107)
- 1 ☐ Yes – For this household only
- 2 ☐ Yes – Also used by another household
- 3 ☐ No

} Skip to 12

FORM AHS-82 (9-14-82)

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section IVB – REGULAR (OR URE) INTERVIEWS – Continued

11. A complete bathroom is a room with a flush toilet, a bathtub or shower, and a washbasin with piped water. A half bathroom has at least a flush toilet or a bathtub or shower, but does not have all the facilities for a complete bathroom.
How many complete bathrooms and half bathrooms do you have?

(108) *(Mark only one box)*
1 ☐ Complete plumbing facilities but not in one room
2 ☐ 1 complete bathroom
3 ☐ 1 complete bathroom plus half bath with no flush toilet
4 ☐ 1 complete bathroom plus half bath with flush toilet
5 ☐ 2 complete bathrooms
6 ☐ More than 2 complete bathrooms

12. What type of heating equipment does your house (apartment) have?
(MARK heating equipment used most.)
SHOW FLASHCARD B

(109)
1 ☐ Central warm-air furnace with ducts in individual rooms
2 ☐ Heat pump
3 ☐ Steam or hot water system
4 ☐ Built-in electric units (permanently installed in wall, ceiling, or baseboard)
5 ☐ Floor, wall, or pipeless furnace
6 ☐ Room heater(s) WITH flue or vent burning gas, oil, or kerosene
7 ☐ Room heater(s) WITHOUT flue or vent burning gas, oil, or kerosene
8 ☐ Fireplaces, stoves, or portable room heater(s)
9 ☐ Unit has no heating equipment

OFFICE USE ONLY (109) X☐

13a. Do you have air conditioning, either individual room units or a central system?
(110) 1 ☐ Yes
2 ☐ No – *Skip to 14a*

b. Which do you have?
(111) 1 ☐ Central – *Skip to 14a*
2 ☐ Room units

c. How many room units do you have?
(112) _____ Room units

14a. Does this house (apartment) have open cracks or holes in the interior walls or ceiling? *(Do not include hairline cracks)*
(113) 1 ☐ Yes
2 ☐ No

b. Does this house (apartment) have holes in the floors?
(114) 1 ☐ Yes
2 ☐ No

15a. Is there any area of broken plaster on the ceiling or inside walls which is larger than this piece of paper? *(SHOW CLOSED INTERVIEWER FLASHCARD AND INFORMATION BOOKLET)*
(115) 1 ☐ Yes
2 ☐ No

b. Is there any area of peeling paint on the ceiling or inside walls which is larger than this piece of paper? *(SHOW CLOSED INTERVIEWER FLASHCARD AND INFORMATION BOOKLET)*
(116) 1 ☐ Yes
2 ☐ No

OBSERVATION
16. Are there any buildings with windows broken or boarded-up on this street?
(121) 1 ☐ Yes
2 ☐ No

Section IVB – REGULAR (OR URE) INTERVIEWS – Continued

17. Does this place have 10 acres or more?
(122) 1 ☐ Yes
2 ☐ No

CHECK ITEM A

Part 1 *(See item 6, page 1)*
Rural
☐ Regular units OR Special Place units coded 85–88 (box 1 marked in item 6) – *Go to part 2 below*
☐ Special Place units not coded 85–88 (box 2 marked in item 6) – *Skip to Check Item B*
Urban
☐ All Regular and Special Place units (box 3 marked in item 6) – *Skip to Check Item B*
Part 2 *(See item 17 above)*
☐ On 10 acres or more – *Ask 18a*
☐ On less than 10 acres – *Skip to 18b*

18a. During the past 12 months, did sales of crops, livestock and other farm products from this place amount to $50 or more?
(123) 1 ☐ Yes – *Skip to 18c*
2 ☐ No – *Skip to Check Item B*

b. During the past 12 months, did sales of crops, livestock and other farm products from this place amount to $250 or more?
(124) 1 ☐ Yes
2 ☐ No – *Skip to Check Item B*

c. During the past 12 months, did sales of crops, livestock and other farm products from this place amount to $1,000 or more?
(125) 1 ☐ Yes
2 ☐ No

CHECK ITEM B

TENURE *(See items 7a and 7b, page 10)*
1 ☐ OWNED AS A COOPERATIVE – *Skip to Check Item F, page 16*
2 ☐ OWNED AS A CONDOMINIUM – *Ask 19, page 13*
☐ OWNED OR BEING BOUGHT (Regular ownership)
If this is a – (See item 8a, page 10)
3 ☐ Mobile home or trailer on less than 10 acres ("No" marked in item 17) – *Skip to item 20a, page 13*
4 ☐ One-unit structure on less than 10 acres ("No" marked in item 17) and there is no commercial establishment or medical or dental office on the property ("No" in items 8c and 8d) – *Ask 19, page 13*
5 ☐ All others – *Skip to Check Item F, page 16*
☐ RENTED FOR CASH
If this is a – (See item 8a, page 10)
6 ☐ One-unit structure on less than 10 acres ("No" marked in item 17) – *Skip to item 26, page 14*
7 ☐ One-unit structure on 10 acres or more ("Yes" marked in item 17) – *Skip to Check Item F, page 16*
8 ☐ Two-or-more unit structure or mobile home or trailer – *Skip to item 26, page 14*
☐ OCCUPIED WITHOUT PAYMENT OF CASH RENT
If this is a – (See item 8a, page 10)
9 ☐ One-unit structure on less than 10 acres ("No" marked in item 17) – *Skip to item 28, page 15*
10 ☐ One-unit structure on 10 acres or more ("Yes" marked in item 17) – *Skip to Check Item F, page 16*
11 ☐ Two-or-more unit structure, or a mobile home or trailer – *Skip to Check Item D, page 15*

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section IYB – REGULAR (OR URE) INTERVIEWS – Continued

19. How much do you think this property, that is, house and lot, (condominium unit), would sell for on today's market?
SHOW FLASHCARD C

(126)
1 ☐ Less than $5,000
2 ☐ $ 5,000 – $ 7,499
3 ☐ 7,500 – 9,999
4 ☐ 10,000 – 12,499
5 ☐ 12,500 – 14,999
6 ☐ 15,000 – 17,499
7 ☐ 17,500 – 19,999
8 ☐ 20,000 – 22,499
9 ☐ 22,500 – 24,999
10 ☐ 25,000 – 27,499
11 ☐ 27,500 – 29,999
12 ☐ 30,000 – 34,999
13 ☐ 35,000 – 39,999
14 ☐ 40,000 – 44,999
15 ☐ 45,000 – 49,999
16 ☐ 50,000 – 54,999
17 ☐ 55,000 – 59,999
18 ☐ 60,000 – 64,999
19 ☐ 65,000 – 69,999
20 ☐ 70,000 – 74,999
21 ☐ 75,000 – 79,999
22 ☐ 80,000 – 89,999
23 ☐ 90,000 – 99,999
24 ☐ 100,000 – 124,999
25 ☐ 125,000 – 149,999
26 ☐ 150,000 – 199,999
27 ☐ 200,000 – 249,999
28 ☐ 250,000 – 299,999
29 ☐ 300,000 or more

CHECK ITEM C *(See Check Item B, page 12)*
☐ **OWNED AS A CONDOMINIUM** (Box 2 marked) –*Skip to Check Item F, page 16*
☐ All others – *Skip to item 23*

20a. Do you own this mobile home (trailer) SITE or is it rented?
(127) 1 ☐ Owned – *Skip to 21a*
2 ☐ Rented for cash or occupied without payment of cash rent

b. What is the MONTHLY rent for this site?
(Mark the frequency of payment box and enter the MONTHLY site rent. (If rent is not paid by the month, compute the MONTHLY site rent in "Notes" space, and enter the monthly site rent on the line provided).)
(566) $_____.00
0 ☐ No cash rent
(567) 1 ☐ More frequently than once a month
2 ☐ Less frequently than once a month
3 ☐ Once a month

21a. In what year did you acquire this mobile home (trailer)?
(128) 1 9 ☐☐

b. Was the mobile home (trailer) NEW when you acquired it?
(129) 1 ☐ Yes
2 ☐ No

c. When you acquired this mobile home (trailer), what was the purchase price? Do not include the price of the site or closing costs.
(130) $_____.00 Purchase price
0 ☐ Not purchased

22. Do you have an installment loan or contract on this mobile home (trailer) or do you own it free and clear?
(131) 1 ☐ Installment loan or contract – *Skip to 24a, page 14*
2 ☐ Owned free and clear – *Skip to 25a, page 14*

23. Do you have a mortgage, deed of trust, or land contract on this property, that is house and lot, or do you own it free and clear?
(132) 1 ☐ Mortgage, deed of trust, or land contract
2 ☐ Owned free and clear – *Skip to 25a, page 14*

FORM AHS-82 (9-14-82)

Section IYB – REGULAR (OR URE) INTERVIEWS – Continued

24a. In regard to the mortgage (loan), what are the required payments to the lender? If more than one mortgage (loan) on this property (mobile home or trailer), give the total amount of the payments.
(If there are separate loans on the mobile home and its site, combine amounts.)
(133) $_____.00 PER
(134) 1 ☐ Month
2 ☐ Year
☐ Other – Specify _____

b. In regard to the mortgage (loan), do the required payments include –
(1) Real estate taxes on this property?
(135) 1 ☐ Yes
2 ☐ No

(2) Fire and hazard insurance?
(136) 1 ☐ Yes
2 ☐ No

NOTE – *Ask 25a for all categories before asking 25b.*

NOTE – *Ask 25b only for those categories in 25a which were answered "Yes."*

25a. (1) Do you pay for electricity?
(137) 1 ☐ Yes
2 ☐ No

25b. (1) In the past 12 months, what was the average MONTHLY cost for electricity?
(138) $_____.00

(2) Do you pay for gas?
(139) 1 ☐ Yes
2 ☐ No

(2) In the past 12 months, what was the average MONTHLY cost for gas?
(140) $_____.00

(3) Do you pay for oil, coal, kerosene, wood, OR any other fuel?
(141) 1 ☐ Yes
2 ☐ No, these fuels not used or obtained free

(3) What is the YEARLY cost for oil, coal, kerosene, wood and any other fuel?
(142) $_____.00

(4) Do you pay for fire and hazard insurance?
(Also include if part of mortgage payments.)
(143) 1 ☐ Yes
2 ☐ No

(4) What is the YEARLY cost for fire and hazard insurance?
(144) $_____.00

(5) Do you pay for real estate taxes?
(Also include if part of mortgage payments.)
(145) 1 ☐ Yes
2 ☐ No

(5) What is the YEARLY cost for real estate taxes? (Do not include taxes in arrears from previous years.)
(146) $_____.00

(6) Do you pay for water supply and/or sewage disposal separately from real estate taxes?
(147) 1 ☐ Yes
2 ☐ No or payment included in real estate taxes

(6) What is the YEARLY cost for water supply and sewage disposal?
(148) $_____.00

25c. Do you pay for garbage (food waste) collection separately from real estate taxes?
(149) 1 ☐ Yes
2 ☐ No, or payment included in real estate taxes – *Skip to Check Item F, page 16*

d. What is the YEARLY cost for garbage (food waste) collection?
(150) $_____.00 *Skip to Check Item F, page 16*

26. What is the MONTHLY rent?
(Mark the frequency of payment box and enter the MONTHLY rent. If rent is not paid by the month, compute the MONTHLY rent in "Notes" space and enter the monthly rent on the line provided.)
(Do not include site rent for mobile homes if it is paid separately.)
(151) $_____.00
(152) 1 ☐ More frequently than once a month
2 ☐ Less frequently than once a month
3 ☐ Once a month

NOTES

FORM AHS-82 (9-14-82)

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section IVB – REGULAR (OR URE) INTERVIEWS – Continued

CHECK ITEM D (See item 8a, page 10)
- ☐ Mobile home or trailer (no permanent room attached) – Ask 27a
- ☐ All others – Skip to 28

27a. Do you own the mobile home site or is it rented?
(153) 1 ☐ Owned – Skip to 28
2 ☐ Rented for cash or occupied without payment of cash rent

b. What is the MONTHLY rent for this site?
(Mark the frequency of payment box and enter the MONTHLY site rent. (If rent is not paid by the month, compute the MONTHLY site rent in "Notes" space, and enter the monthly site rent on the line provided.)
(566) $ _____ . 00 Per month
0 ☐ No cash rent
(567) 1 ☐ More frequently than once a month
2 ☐ Less frequently than once a month
3 ☐ Once a month

28. Is this house (apartment) in a public housing project; that is, is it owned by a local housing authority or other local public agency?
(154) 1 ☐ Yes – Skip to 30a
2 ☐ No

29. Is the rent for this house (apartment) subsidized; that is, is the rent lower because the federal, state or local government pays part of the cost?
(155) 1 ☐ Yes
2 ☐ No

NOTE – Ask 30a for all categories before asking 30b. Exclude phrase "In addition to rent" for sample units OCCUPIED WITHOUT PAYMENT OF CASH RENT.

NOTE – Ask 30b only for those categories in 30a which were answered "Yes."

30a. (1) In addition to rent, do you pay for electricity?
(156) 1 ☐ Yes
2 ☐ No, included in rent or supplied free
3 ☐ No, electricity not used

30b. (1) In the past 12 months, what was the average MONTHLY cost for electricity?
(157) $ _____ . 00

(2) In addition to rent, do you pay for gas?
(158) 1 ☐ Yes
2 ☐ No, included in rent or supplied free
3 ☐ No, gas not used

(2) In the past 12 months, what was the average MONTHLY cost for gas?
(159) $ _____ . 00

(3) In addition to rent, do you pay for water?
(160) 1 ☐ Yes
2 ☐ No, included in rent or no charge

(3) What is the YEARLY cost for water?
(161) $ _____ . 00

(4) In addition to rent, do you pay for oil, coal, kerosene, wood, OR any other fuel?
(162) 1 ☐ Yes
2 ☐ No, included in rent
3 ☐ No, these fuels not used or obtained free

(4) What is the YEARLY cost for oil, coal, kerosene, wood, and any other fuel?
(163) $ _____ . 00

(5) In addition to rent, do you pay for garbage (food waste) collection?
(164) 1 ☐ Yes
2 ☐ No

(5) What is the YEARLY cost for garbage (food waste) collection?
(165) $ _____ . 00

Section IVB – REGULAR (OR URE) INTERVIEWS – Continued

CHECK ITEM E (See Check Item B, page 12)
- ☐ Rented for cash (box 6, 7, or 8 marked) – Ask 31
- ☐ Occupied without payment of cash rent (box 9, 10, or 11 marked) – Skip to Check Item F

31. Do you rent this apartment (house) furnished or unfurnished?
(166) 1 ☐ Furnished
2 ☐ Unfurnished

CHECK ITEM F (See item B, page 1)
- ☐ URE interview – Ask 32
- ☐ Regular interview – Skip to item 33

32. Is this UNIT intended for year-round use, for occupancy only as a seasonal basis, or for use by migrant workers?
(167) 9 ☐ YEAR ROUND (occupied temporarily at time of interview)
10 ☐ Seasonal – summers only
11 ☐ Seasonal – winters only
12 ☐ Other seasonal – Specify _____
9 ☐ Migratory
} Skip to Check Item H, page 20

33. In the past 12 months, how much did . . . earn in wages, salaries, tips, and commissions before taxes and deductions?
(Obtain income for reference person and all household members 15+ RELATED TO REFERENCE PERSON by blood, marriage, or adoption.)
(If more than six persons, enter in the "Notes" beginning with the sixth person and then combine the amounts for all these persons on the last "Amount" line. Leave the Line No. blank.)

	Line No.	Amount (Dollars only)
(168)		(169) $ _____ . 00
(170)		(171) $ _____ . 00
(172)		(173) $ _____ . 00
(174)		(175) $ _____ . 00
(176)		(177) $ _____ . 00
(178)		(179) $ _____ . 00

Notes

34a. In the past 12 months, how much did this family (you) earn in net income from its (your) own business, professional practice or partnership?
(Exclude income previously reported in item 33. Probe if identical amounts are reported. Indicate that identical amounts are correct by marking this box ☐.)
(180) $ _____ . 00
(181) 1 ☐ None
2 ☐ Lost money (Enter amount LOST on line above)

b. In the past 12 months, how much did this family (you) earn in net income from farming or ranching?
(Exclude income previously reported in items 33 and 34a. Probe if identical amounts are reported. Indicate that identical amounts are correct by marking this box ☐.)
(182) $ _____ . 00
(183) 1 ☐ None
2 ☐ Lost money (Enter amount LOST on line above)

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section IVB – REGULAR INTERVIEWS – Continued

NOTE – *Ask 35a for all categories before asking 35b.*

(Obtain income for reference person and all household members 15+ RELATED TO REFERENCE PERSON by blood, marriage, or adoption.)

35a. In the past 12 months, did any member of this family (you) receive any money from –

		35a	35b. How much was received from (source of income) in the past 12 months?
(1)	Social Security or Railroad Retirement payments?	(184) 1 ☐ Yes 2 ☐ No	(185) $ ____.00
(2)	Interest on savings accounts or bonds?	(188) 1 ☐ Yes 2 ☐ No	(189) $ ____.00
(3)	Estates, trusts, or dividents?	(186) 1 ☐ Yes 2 ☐ No	(187) $ ____.00
(4)	Net rental income?	(190) 1 ☐ Yes 2 ☐ No	(191) $ ____.00
(5)	Welfare payments or other public assistance such as SSI?	(192) 1 ☐ Yes 2 ☐ No	(193) $ ____.00
(6)	Unemployment compensation?	(194) 1 ☐ Yes 2 ☐ No	(195) $ ____.00
(7)	Worker's compensation?	(196) 1 ☐ Yes 2 ☐ No	(197) $ ____.00
(8)	Government employee pensions?	(198) 1 ☐ Yes 2 ☐ No	(199) $ ____.00
(9)	Veterans payments?	(200) 1 ☐ Yes 2 ☐ No	(201) $ ____.00
(10)	Private pensions or annuities?	(202) 1 ☐ Yes 2 ☐ No	(203) $ ____.00
(11)	Alimony or child support?	(204) 1 ☐ Yes 2 ☐ No	(205) $ ____.00
(12)	Regular contributions from persons not living in this household?	(206) 1 ☐ Yes 2 ☐ No	(207) $ ____.00
(13)	Anything else?	(208) 1 ☐ Yes 2 ☐ No	(209) $ ____.00

NOTE – *Exclude income previously reported. Probe if an amount in item 35b is identical to an amount in item 33 or 34. Indicate that identical amounts are correct by marking this box* ☐.

CHECK ITEM G

(See Control Card items 11b, 11c, and 14)

☐ Household contains household members 15+ NOT RELATED TO THE REFERENCE PERSON by blood, marriage, or adoption – *Ask 36, page 18*

☐ All others – *Skip to Check Item H, page 20*

Section IVB – REGULAR INTERVIEWS – Continued

36. In the past 12 months, how much did . . . earn in wages, salaries, tips, and commissions before taxes and deductions? ——→

(Obtain income for household members 15+ NOT RELATED TO REFERENCE PERSON by blood, marriage, or adoption.)

37a. In the past 12 months, how much did . . . earn in net income from his (her) own business, professional practice, or partnership? ——→

(Exclude income previously reported in item 36. Probe if identical amounts are reported for an individual. Indicate that identical amounts are correct by marking this box ☐.)

b. In the past 12 months, how much did . . . earn in net income from farming or ranching? ——→

(Exclude income previously reported in items 36 and 37a. Probe if identical amounts are reported for an individual. Indicate that identical amounts are correct by marking this box ☐.)

NOTE – *Ask 38b for each "Yes" response in 38a. Ask 38a (and 38b as appropriate) for all categories before asking 38c.*

38a. In the past 12 months, did . . . *(Names of ALL household members 15+ NOT RELATED TO REFERENCE PERSON by blood, marriage, or adoption)* receive any money from –	38a	38b. Who received this type of income? *(Enter line numbers)*
(1) Social Security or Railroad Retirement payments?	(210) 1 ☐ Yes 2 ☐ No	
(2) Interest on savings accounts or bonds?	(212) 1 ☐ Yes 2 ☐ No	
(3) Estates, trusts, or dividends?	(211) 1 ☐ Yes 2 ☐ No	
(4) Net rental income?	(213) 1 ☐ Yes 2 ☐ No	
(5) Welfare payments or other public assistance such as SSI?	(214) 1 ☐ Yes 2 ☐ No	
(6) Unemployment compensation?	(215) 1 ☐ Yes 2 ☐ No	
(7) Worker's compensation?	(216) 1 ☐ Yes 2 ☐ No	
(8) Government employee pensions?	(217) 1 ☐ Yes 2 ☐ No	
(9) Veterans payments?	(218) 1 ☐ Yes 2 ☐ No	
(10) Private pensions or annuities?	(219) 1 ☐ Yes 2 ☐ No	
(11) Alimony or child support?	(220) 1 ☐ Yes 2 ☐ No	
(12) Regular contributions from persons not living in this household?	(221) 1 ☐ Yes 2 ☐ No	
(13) Anything else?	(222) 1 ☐ Yes 2 ☐ No	

NOTES

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section IVB – REGULAR INTERVIEWS – Continued

(223) Line No.	(242) Line No.	(261) Line No.	(280) Line No.
36. (224) $ ____.00	36. (243) $ ____.00	36. (262) $ ____.00	36. (281) $ ____.00
37a. (225) $ ____.00	37a. (244) $ ____.00	37a. (263) $ ____.00	37a. (282) $ ____.00
(226) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)	(245) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)	(264) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)	(283) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)
b. (227) $ ____.00	b. (246) $ ____.00	b. (265) $ ____.00	b. (284) $ ____.00
(228) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)	(247) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)	(266) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)	(285) 1 ☐ None 2 ☐ Lost money (Enter amount LOST on line above)
38c. How much did . . . receive from (Source of income) in the past 12 months?	38c. How much did . . . receive from (Source of income) in the past 12 months?	38c. How much did . . . receive from (Source of income) in the past 12 months?	38c. How much did . . . receive from (Source of income) in the past 12 months?
(1) (229) $ ____.00	(1) (248) $ ____.00	(1) (267) $ ____.00	(1) (286) $ ____.00
(2) (231) $ ____.00	(2) (250) $ ____.00	(2) (269) $ ____.00	(2) (288) $ ____.00
(3) (230) $ ____.00	(3) (249) $ ____.00	(3) (268) $ ____.00	(3) (287) $ ____.00
(4) (232) $ ____.00	(4) (251) $ ____.00	(4) (270) $ ____.00	(4) (289) $ ____.00
(5) (233) $ ____.00	(5) (252) $ ____.00	(5) (271) $ ____.00	(5) (290) $ ____.00
(6) (234) $ ____.00	(6) (253) $ ____.00	(6) (272) $ ____.00	(6) (291) $ ____.00
(7) (235) $ ____.00	(7) (254) $ ____.00	(7) (273) $ ____.00	(7) (292) $ ____.00
(8) (236) $ ____.00	(8) (255) $ ____.00	(8) (274) $ ____.00	(8) (293) $ ____.00
(9) (237) $ ____.00	(9) (256) $ ____.00	(9) (275) $ ____.00	(9) (294) $ ____.00
(10) (238) $ ____.00	(10) (257) $ ____.00	(10) (276) $ ____.00	(10) (295) $ ____.00
(11) (239) $ ____.00	(11) (258) $ ____.00	(11) (277) $ ____.00	(11) (296) $ ____.00
(12) (240) $ ____.00	(12) (259) $ ____.00	(12) (278) $ ____.00	(12) (297) $ ____.00
(13) (241) $ ____.00	(13) (260) $ ____.00	(13) (279) $ ____.00	(13) (298) $ ____.00

NOTE – *Exclude income previously reported. Probe if an amount in item 38c is identical to an amount in item 36, 37a, or 37b. Indicate that identical amounts are correct by marking this box* ☐.

NOTES

PGM 6

Section V – SUPPLEMENTAL ITEMS

CHECK ITEM H

Part (1) *(See Check Item B, page 12)*
- ☐ Box 1 or 2 marked – *Ask 39a*
- ☐ Box 3 or 4 marked – *Go to Part (2)*
- ☐ Box 5 marked – *Go to Part (3)*
- ☐ Box 6, 7, 8, 9, 10, or 11 marked – *Skip to Check Item I*

Part (2) *(See items 22 and 23, page 13)*
- ☐ Installment loan or contract, mortgage, deed of trust, or land contract – *Skip to 39d*
- ☐ Owned free and clear – *Skip to Check Item I*
- ☐ "DK," "NA," "REF," or Blank in items 22 and 23 – *Skip to Check Item I*

Part (3) *(See item 8a, page 10)*
- ☐ Box 1 marked – *Skip to 39b*
- ☐ All others – *Skip to 39c*

39a. Is there a mortgage or loan on this condominium (cooperative) or is it owned free and clear?	(307)	1 ☐ Mortgage or loan – *Skip to 39d* 2 ☐ Owned free and clear – *Skip to Check Item I*
b. Do you have an installment loan or contract on this mobile home (trailer) or do you own it free and clear?	(307)	1 ☐ Installment loan or contract – *Skip to 39d* 2 ☐ Owned free and clear – *Skip to Check Item I*
c. Do you have a mortgage or loan on this house (apartment) or do you own it free and clear?	(307)	1 ☐ Mortgage or loan 2 ☐ Owned free and clear – *Skip to Check Item I*
d. What kind of mortgage (loan) do you have? *SHOW FLASHCARD D*	(308)	1 ☐ Federal Housing Administration 2 ☐ Veterans Administration 3 ☐ Farmers Home Administration 4 ☐ Other mortgage

CHECK ITEM I

Mark all three parts (see cc 21 and item 5d, page 1)

Part (1) Reference person lived here last 90 days.	(309)	1 ☐ Yes 2 ☐ No
Part (2) Reference person moved into this house or apartment before February 1983.	(310)	1 ☐ Yes 2 ☐ No
Part (3) Reference person MOVED here since . . . date of this interview (item 5d, page 1) a year ago . .	(311)	1 ☐ Yes – *Go to Check Item J* 2 ☐ No – *Skip to Check Item Q, page 28*

CHECK ITEM J

Part (1) *(See item 8, page 1)*
- ☐ URE Interview – *Go to Check Item Q, page 28*
- ☐ Regular Interview – *Go to Part 2 below*

Part (2) *(See items 7a and 7b, page 10)*
- ☐ Regular ownership (box 1 marked) – *Go to Part 3 below*
- ☐ Owned as a cooperative (box 2 marked) – *Skip to Check Item K, page 21*
- ☐ Owned as a condominium (box 3 marked) – *Go to Part 3 below*
- ☐ Rented for cash or occupied without payment of cash rent (box 4 or 5 marked) – *Skip to 43, page 21*

Part (3) *(See item 8a, page 10)*
- ☐ Mobile home or trailer (no permanent room attached) – *Skip to Check Item K, page 21*
- ☐ All others – *Ask 40a, page 21*

NOTES

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section VI – RECENT MOVERS SUPPLEMENT

40a. Was this property (condominium unit) purchased in the past 12 months?
(401) 1 ☐ Yes
2 ☐ No – *Skip to Check Item K*

b. When this house and lot (condominium unit) was acquired, what was the purchase price? Do not include closing costs.
(402) $_____.00

c. What was the MAJOR source of the down payment used for the purchase or construction of this property (condominium unit)?
(403)
1 ☐ Sale of previous home (only if sold during 12-month period preceding acquisition of present home)
2 ☐ Sale of other real property or other investment (including stock)
3 ☐ Savings (cash, bank deposits, share accounts, or bonds)
4 ☐ Borrowing other than a mortgage on this property
5 ☐ Gift
6 ☐ Land on which structure was built
7 ☐ Other – *Specify*
8 ☐ No down payment required

CHECK ITEM K
(See item 39d, page 20)
☐ Kind of mortgage specified (box 1, 2, 3 or 4 marked OR "NA," "DK" or "REF" entered) – *Ask 41a*
☐ Item 39d blank – *Skip to 42a*

41a. Earlier you told me that this property (mobile home) is mortgaged. When you acquired this property did you originate (place) a new mortgage or assume an existing mortgage?
(404) 1 ☐ Originated mortgage
2 ☐ Assumed mortgage – *Skip to 42a*

b. At the time you acquired this property (mobile home), what was the amount of the mortgage? Do not include second trusts, or any other loan associated with the property.
(405) $_____.00

42a. Is this the first home . . . *(Reference person)* has ever owned as his (her) usual residence?
(406) 1 ☐ Yes – *Skip to 43*
2 ☐ No – *Ask 42b*

b. Including this home, how many homes has . . . *(Reference person)* owned altogether? Do not include vacation homes, or homes purchased for commercial or rental purposes.
(407) 1 ☐ Two
2 ☐ Three or more

43. Was . . . *(Reference person)* the first occupant(s) of this house (apartment) or did someone else live here before . . . *(Reference person)*?
(408) 1 ☐ First occupants
2 ☐ Previously occupied

44. The following questions are about the place where . . . *(Reference person)* lived before moving here. What was the address of . . .'s *(Reference person)* previous residence?

Number	Street	Apartment
City, town, or place		
County	State	ZIP Code

OR
(409) 0 ☐ Outside the United States – *Skip to 66, page 27*
(409) OFFICE USE ONLY

45. Did . . . *(Reference person)* live inside the incorporated limits of *(Name of place in item 44)*?
(440) 1 ☐ Yes
2 ☐ No, lived outside incorporated limits or place not incorporated

Section VI – RECENT MOVERS SUPPLEMENT – Continued

46. Please look at this card.
SHOW FLASHCARD F
What are the reasons . . . *(Reference person)* moved FROM that residence?
(Mark all answers given)

EMPLOYMENT
(410)
1 ☐ Job transfer
2 ☐ To look for work
3 ☐ To take a new job
4 ☐ Entered or left U.S. Armed Forces
5 ☐ Retirement
6 ☐ Commuting reasons
(411)
7 ☐ To attend school
8 ☐ Other employment reasons – *Specify*

FAMILY
(412)
09 ☐ Needed larger house or apartment
10 ☐ Divorced or separated
11 ☐ Widowed
(413)
12 ☐ To be closer to relatives
13 ☐ Newly married
14 ☐ Family increased
(414)
15 ☐ Family decreased
16 ☐ To establish own household
17 ☐ Other family reasons – *Specify*

OTHER
(415)
18 ☐ Neighborhood overcrowded
19 ☐ Change in racial or ethnic composition of neighborhood
20 ☐ Crime
(416)
21 ☐ Wanted neighborhood with children
22 ☐ Wanted neighborhood without children
23 ☐ Wanted better neighborhood
(417)
24 ☐ Wanted more expensive place or better investment
25 ☐ Wanted to own residence
26 ☐ Wanted better house
(418)
27 ☐ Wanted to rent residence
28 ☐ Wanted residence with more conveniences
29 ☐ Lower rent or less expensive house
(419)
30 ☐ Wanted change of climate
31 ☐ Displaced by urban renewal, highway construction, or other public activity
32 ☐ Displaced by private action
(420)
33 ☐ Schools
34 ☐ Natural disaster
35 ☐ Other – *Specify*

INTERVIEWER INSTRUCTION
Two or more boxes marked in item 46 – *Ask 47*
If only ONE box is marked in item 46 – *Transcribe code to item 47 and fill Check Item L, page 23*

47. Of the reasons you just mentioned, what was the MAIN reason . . . *(Reference person)* moved from that residence?
(421) ☐☐ Box number of MAIN reason

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section VI – RECENT MOVERS SUPPLEMENT – Continued

CHECK ITEM L

(See item 47, page 22)

- ☐ If "29" entered in item 47 – *Ask 48a*
- ☐ If "32" entered in item 47 – *Skip to 48b*
- ☐ All others – *Skip to 49a, page 24*

48a. Did you want or need lower rent or a less expensive house because . . .'s (*Reference person*) income was reduced, . . .'s (*Reference person*) housing costs greatly increased, or some other reason?

(Mark all answers given)

(422)
- 1 ☐ Income reduced
- 2 ☐ Housing costs greatly increased
- 3 ☐ Other – Specify

→ Skip to 49a, page 24

b. Were you displaced because –

(Read answer categories and mark all answers given)

SHOW FLASHCARD G

(423)
- 1 ☐ The owner was converting the building to a condominium?
- 2 ☐ The owner closed the building for rehabilitation?
- 3 ☐ The owner closed the building but gave no reason?
- 4 ☐ The owner sold the building?
- 5 ☐ The rents were raised?
- 6 ☐ The building was converted to nonresidential use?

(424)
- 7 ☐ The owner wanted unit for own use or use of his/her family?
- 8 ☐ Other reason? – Specify

NOTES

Section VI – RECENT MOVERS SUPPLEMENT – Continued

49a. Please look at this card.

SHOW FLASHCARD H

What are the reasons . . . (*Reference person*) moved TO this particular neighborhood?

(Mark all answers given then ask 49b)

b. What are the reasons . . . (*Reference person*) moved TO this particular residence?

(Mark all additional answers given)

EMPLOYMENT

(425)
- 1 ☐ Job transfer
- 2 ☐ To look for work
- 3 ☐ To take a new job
- 4 ☐ Entered U.S. Armed Forces
- 5 ☐ Retirement
- 6 ☐ Commuting reasons

(426)
- 7 ☐ To attend school
- 8 ☐ Other employment reasons – Specify

FAMILY

(427)
- 9 ☐ Needed larger house or apartment
- 10 ☐ To be closer to relatives
- 11 ☐ Other family reasons – Specify

OTHER

(428)
- 12 ☐ Neighborhood less crowded
- 13 ☐ Racial or ethnic composition of neighborhood
- 14 ☐ Low crime rate

(429)
- 15 ☐ Wanted neighborhood with children
- 16 ☐ Wanted neighborhood without children
- 17 ☐ Wanted better neighborhood

(430)
- 18 ☐ Wanted more expensive place or better investment
- 19 ☐ Residence with more convenience
- 20 ☐ Lower rent or less expensive house

(431)
- 21 ☐ Change of climate
- 22 ☐ Schools
- 23 ☐ Other – Specify

INTERVIEWER INSTRUCTIONS

- Two or more boxes marked in item 49 – *Ask 50*
- If only ONE box is marked in item 49 – *Transcribe code to item 50 and ask 51a*

50. Of all the reasons you just mentioned, what is the MAIN reason . . . (*Reference person*) moved to this particular residence or neighborhood?

(432) ☐☐ Box number of MAIN reason

51a. Was . . . (*Reference person*) the person or one of the persons who owned or rented the previous residence at the time he (she) moved?

(433)

☐ Yes
- 1 ☐ Respondent is the reference person – *Skip to 52, page 25*
- 2 ☐ Respondent is not the reference person – *Ask 51b*

☐ No
- 3 ☐ Respondent is the reference person – *Skip to 52, page 25*
- 4 ☐ Respondent is not the reference person – *Ask 51b*

b. Were you also a member of . . .'s (*Reference person*) household in the previous residence?

(434)
- 1 ☐ Yes
- 2 ☐ No

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section VI – RECENT MOVERS SUPPLEMENT – Continued

52. How many rooms were in THAT residence? Do not count bathrooms, porches, balconies, halls, foyers, or half-rooms. (435) _____ Number

53. How many bedrooms were in THAT residence? Count rooms used mainly for sleeping, even if used for other purposes. (436) _____ Number

54. How many persons were living THERE at the time . . . (*Reference person*) moved? (437) _____ Number

55. Were there complete plumbing facilities in that building; that is, hot and cold piped water, a flush toilet, and a bathtub or shower? ☐ Yes

Were these facilities used by that household only? (438)
1 ☐ Yes – Used by that household only
2 ☐ No – Also used by another household
3 ☐ No

56. How many living quarters, both occupied and vacant, were in that building? (439)
1 ☐ Mobile home or trailer (no permanent room attached)
2 ☐ One, detached from any other building (Includes mobile home or trailer WITH one or more permanent rooms attached)
3 ☐ One, attached to one or more buildings
4 ☐ 2
5 ☐ 3 or 4
6 ☐ 5 to 9
7 ☐ 10 to 19
8 ☐ 20 to 49
9 ☐ 50 or more

CHECK ITEM M (*See item 51a, page 24*)
☐ "No" (box 3) marked – *Skip to item 66, page 27*
☐ All others (box 1 or 2 marked) – *Ask 57a*

57a. Was that residence owned or being bought by someone in the household? ☐ Yes

Was it owned as a cooperative or condominium? (440)
1 ☐ No – *Skip to Check Item N, page 26*
2 ☐ Yes, a cooperative – *Skip to 57c*
3 ☐ Yes, a condominium – *Skip to 59, page 26*

☐ No – *Ask 57b*

b. Was it rented for cash rent or occupied without payment of cash rent? (440)
4 ☐ Rented for cash
5 ☐ Occupied without payment of cash rent
} *Skip to Check Item N, page 26*

c. To the Census Bureau, a cooperative is property which is owned by a corporation. Each shareholder is entitled to occupy an individual unit. Is this what you mean when you say that it was a cooperative?
☐ Yes – *Skip to 66, page 27*
☐ No – *Reask 57a and correct the entry*

NOTES

Section VI – RECENT MOVERS SUPPLEMENT – Continued

CHECK ITEM N

TENURE OF PREVIOUS RESIDENCE (*See item 57, page 25*)

REGULAR OWNERSHIP (*Box 1 marked in 57a*) (*See item 56, page 25*)
☐ One-unit structure – *Ask 58a*
☐ Two-or-more unit structure, or a mobile home or trailer – *Skip to 66, page 27*

RENTED FOR CASH OR OCCUPIED WITHOUT PAYMENT OF CASH RENT (*Box 4 or 5 marked in 57b*) (*See item 56, page 25*)
☐ One-unit structure – *Skip to 60*
☐ Two-or-more unit structure, or a mobile home or trailer – *Skip to Check Item O*

58a. Was that house on a place of 10 acres or more? (441)
1 ☐ Yes – *Skip to 66, page 27*
2 ☐ No

b. Was there a commercial establishment or medical or dental office on the property? (442)
1 ☐ Yes – *Skip to 66, page 27*
2 ☐ No

59. What was the value of that property when . . . (*Reference person*) moved; that is, about how much did that property (house and lot) (condominium unit) sell for, or would it have sold for, had it been for sale?

SHOW FLASHCARD C

(443)
1 ☐ Less than $5,000
2 ☐ $ 5,000 – $ 7,499
3 ☐ 7,500 – 9,999
4 ☐ 10,000 – 12,499
5 ☐ 12,500 – 14,999
6 ☐ 15,000 – 17,499
7 ☐ 17,500 – 19,999
8 ☐ 20,000 – 22,499
9 ☐ 22,500 – 24,999
10 ☐ 25,000 – 27,499
11 ☐ 27,500 – 29,999
12 ☐ 30,000 – 34,999
13 ☐ 35,000 – 39,999
14 ☐ 40,000 – 44,999
15 ☐ 45,000 – 49,999
16 ☐ 50,000 – 54,999
17 ☐ 55,000 – 59,999
18 ☐ 60,000 – 64,999
19 ☐ 65,000 – 69,999
20 ☐ 70,000 – 74,999
21 ☐ 75,000 – 79,999
22 ☐ 80,000 – 89,999
23 ☐ 90,000 – 99,999
24 ☐ 100,000 – 124,999
25 ☐ 125,000 – 149,999
26 ☐ 150,000 – 199,999
27 ☐ 200,000 – 249,999
28 ☐ 250,000 – 299,999
29 ☐ 300,000 or more
} *Skip to 66, page 27*

60. Was that house on a place of 10 acres or more? (444)
1 ☐ Yes – *Skip to 66, page 27*
2 ☐ No

CHECK ITEM O (*See item 57b, page 25*)
☐ Rented for cash – *Ask 61*
☐ Occupied without payment of cash rent – *Skip to 62, page 27*

61. What was the MONTHLY rent for that apartment (house)? (445) $_____.00 Per month
(If rent was not paid by the month, write amount and time period covered in "Notes" space, then compute MONTHLY rent and enter on line provided.)
(Include site rent for mobile homes if it was paid separately.)

NOTES

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section VI – RECENT MOVERS SUPPLEMENT – Continued

62. Was that house (apartment) in a public housing project; that is, was it owned by a local housing authority or other local public agency? (646) 1 ☐ Yes – Skip to 64a 2 ☐ No

63. Was the rent for that house (apartment) subsidized; that is, was the rent lower because the federal, state, or local government was paying part of the cost? (647) 1 ☐ Yes 2 ☐ No

NOTE – *Ask 64a for all categories before asking 64b. (Exclude phrase "In addition to rent" for sample units OCCUPIED WITHOUT PAYMENT OF CASH RENT.)*

NOTE – *Ask 64b only for those categories in 64a which were answered "Yes."*

64a. (1) In addition to rent, did that household pay for electricity? (648) 1 ☐ Yes 2 ☐ No, included in rent or supplied free 3 ☐ No, electricity not used

64b. (1) What was the average MONTHLY cost for electricity? (649) $ _____ . 00

(2) In addition to rent, did that household pay for gas? (650) 1 ☐ Yes 2 ☐ No, included in rent or supplied free 3 ☐ No, gas not used

(2) What was the average MONTHLY cost for gas? (651) $ _____ . 00

(3) In addition to rent, did that household pay for water? (652) 1 ☐ Yes 2 ☐ No, included in rent or no charge

(3) What was the YEARLY cost for water? (653) $ _____ . 00

(4) In addition to rent, did that household pay for oil, coal, kerosene, wood, OR any other fuel? (654) 1 ☐ Yes 2 ☐ No, included in rent 3 ☐ No, these fuels not used or obtained free

(4) What was the YEARLY cost for oil, coal, kerosene, wood, and any other fuel? (655) $ _____ . 00

(5) In addition to rent, did that household pay for garbage (food waste) collection? (656) 1 ☐ Yes 2 ☐ No

(5) What was the YEARLY cost for garbage (food waste) collection? (657) $ _____ . 00

NOTES

CHECK ITEM P (See item 57b, page 25)
☐ Rented for cash – Ask 65
☐ Occupied without payment of cash rent – Skip to 66

65. Was that apartment (house) rented furnished or unfurnished? (658) 1 ☐ Furnished 2 ☐ Unfurnished

66. Besides the move to the present residence, how many other times did . . . *(Reference person)* move in the past 12 months? *(Do not include visits or vacations.)* (659) 1 ☐ None 2 ☐ One 3 ☐ Two 4 ☐ Three or more

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~ PGM 7 ↓

Section VII – HOUSING QUALITY AND EQUIPMENT BREAKDOWN SUPPLEMENT

INTRODUCTION Now I have some questions concerning problems you may have experienced in this home.

CHECK ITEM Q (See Check item I, Part (2), page 20)
Part (1) Reference person moved into this house (apartment) before February 1983
☐ Yes – Go to Part (2) below
☐ No – Skip to Check Item R
(See item 12, page 11)
Part (2) Heating Equipment
☐ Room heater(s) WITHOUT flue or vent (box 7 marked) – Ask 67
☐ Fireplaces, stoves, or portable room heater(s) (box 8 marked) – Ask 67
☐ Unit has no heating equipment (box 9 marked) – Ask 67
☐ All others – Skip to 68

67. During the time period of December 1982 through February 1983 was this house (apartment) so cold for 24 hours or more that it caused you discomfort? (801) 1 ☐ Yes 2 ☐ No } Skip to 70

68. During the time period of December 1982 through February 1983 when your regular heating system was working, did you, at any time, have to use additional sources of heat BECAUSE YOUR REGULAR SYSTEM DID NOT PROVIDE ENOUGH HEAT? (802) 1 ☐ Yes 2 ☐ No } Skip to 69

CHECK ITEM R (See item 12, page 11)
HEATING EQUIPMENT
☐ Room heater(s) WITHOUT flue or vent (box 7 marked) – Skip to 70
☐ Fireplaces, stoves, or portable room heater(s) (box 8 marked) – Skip to 70
☐ Unit has no heating equipment (box 9 marked) – Skip to 70
☐ All others – Ask 69

69. How many rooms in this house (apartment) do NOT have hot air ducts, registers, radiators, or room heaters? Do not count kitchen or bathroom(s). (803) 1 ☐ None 2 ☐ 1 room 3 ☐ 2 rooms 4 ☐ 3 or more rooms

70. Does each room in this house (apartment) have a working electric wall outlet (wall plug)? (808) 1 ☐ Yes 2 ☐ No

71. Is all the wiring in this house (apartment) concealed in the walls or in metal coverings? Do not count appliance cords, extension cords or chandelier cords. (809) 1 ☐ Yes 2 ☐ No

72a. Is it necessary to go through any bedroom to get to any bathroom? (810) 1 ☐ Yes 2 ☐ No

b. Is it necessary to go through any bedroom to get to any other room? (811) 1 ☐ Yes 2 ☐ No

NOTES

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Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section VII – HOUSING QUALITY AND EQUIPMENT BREAKDOWN SUPPLEMENT – Continued

CHECK ITEM S

(See Check Item I, Part (1), page 20)
Reference person lived here last 90 days
☐ Yes – Ask 73a
☐ No – Skip to Check Item U

73a. Have any electric fuses or breaker switches blown in this house (apartment) in the last 90 days? (816) 1 ☐ Yes 2 ☐ No . . . . . 3 ☐ Don't know } Skip to 74a

b. How many times did this happen? (817) 1 ☐ 1 2 ☐ 2 3 ☐ 3 or more

74a. At any time in the last 90 days, have you seen any mice or rats, or signs of mice or rats in this house (building)? (818) 1 ☐ Yes 2 ☐ No – Skip to Check Item T

b. Is this house (building) serviced by an exterminator for mice or rats regularly, only when needed, irregularly, or not at all? (819) 1 ☐ Regularly 2 ☐ Only when needed 3 ☐ Irregularly 4 ☐ Not at all

CHECK ITEM T

(See item 8, page 1)
☐ REGULAR INTERVIEW – Ask 75
☐ URE INTERVIEW – Skip to 81a, page 30

75. Do you have piped water in this building? (825) 1 ☐ Yes 2 ☐ No – Skip to 77a

76a. At any time in the last 90 days, were you COMPLETELY without running water? (826) 1 ☐ Yes 2 ☐ No – Skip to 77a

b. Were you completely without running water for 6 consecutive hours or more? (827) 1 ☐ Yes 2 ☐ No . . . . . 3 ☐ Don't know } Skip to 77a

c. How many times? (828) 1 ☐ 1 2 ☐ 2 3 ☐ 3 or more

d. What was the (most common) reason you were completely without water for 6 consecutive hours or more – was it because of problems inside the building or problems outside the building? (829) 1 ☐ Inside 2 ☐ Outside

77a. At any time in the last 90 days was there a breakdown in your flush toilet or toilets, such that there were no usable toilets? (830) 1 ☐ Yes 2 ☐ No – Skip to 78a, page 30

b. Did any of these breakdowns last 6 consecutive hours or more? (831) 1 ☐ Yes 2 ☐ No – Skip to 78a, page 30

c. How many of these breakdowns were there? (832) 1 ☐ 1 2 ☐ 2 3 ☐ 3 4 ☐ 4 or more

d. What was the (most common) reason you were completely without the use of your flush toilet for 6 consecutive hours or more – was it because of problems inside the building or problems outside the building? (833) 1 ☐ Inside 2 ☐ Outside

Section VII – HOUSING QUALITY AND EQUIPMENT BREAKDOWN SUPPLEMENT – Continued

78a. At any time in the last 90 days, was there a breakdown in your sewage disposal system such that it was completely unusable? (834) 1 ☐ Yes 2 ☐ No – Skip to Check Item U

b. Did any of these breakdowns last 6 consecutive hours or more? (835) 1 ☐ Yes 2 ☐ No . . . . . 3 ☐ Don't know } Skip to Check Item U

c. How many of these breakdowns were there? (836) 1 ☐ 1 2 ☐ 2 3 ☐ 3 or more

CHECK ITEM U

(See Check Item I, Part (2), page 20)
Part (1) Reference person moved into this house (apartment) before February 1983
☐ Yes – Go to Part (2) below
☐ No – Skip to 81a
(See item 12, page 11)
Part (2) Heating equipment
☐ Unit has no heating equipment (box 9 marked) – Skip to 81a
☐ All others – Ask 79a

79a. During the time period of December 1982 through February 1983, was there a breakdown in your heating equipment; that is, was it completely unusable for 6 consecutive hours or more? (837) 1 ☐ Yes 2 ☐ No – Skip to 80a

b. How many times did that happen? (838) 1 ☐ 1 2 ☐ 2 3 ☐ 3 4 ☐ 4 or more

80a. During the time period of December 1982 through February 1983, did you completely close certain rooms for a week or longer because you couldn't get them warm? Include kitchen and bathroom(s). (839) 1 ☐ Yes 2 ☐ No – Skip to 81a

b. Which rooms? Mark (X) all that apply (840) * 1 ☐ Living room 2 ☐ Dining room 3 ☐ One or more bedrooms 4 ☐ Other – Specify

81a. Is there a basement in this house (building)? (A basement is an enclosed space in which persons can walk upright under all or part of the building.) (841) 1 ☐ Yes 2 ☐ No – Skip to 82

b. Does the basement show any signs of water having leaked in from the outside? (842) 1 ☐ Yes 2 ☐ No 3 ☐ Don't know

82. Does the roof of this house (building) leak? (843) 1 ☐ Yes 2 ☐ No 3 ☐ Don't know

83. In view of all the things we have talked about, how would you rate this house (building) as a place to live – would you say it is excellent, good, fair, or poor? (844) 1 ☐ Excellent 2 ☐ Good 3 ☐ Fair 4 ☐ Poor

NOTES

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section VIII – NEIGHBORHOOD QUALITY SUPPLEMENT

NOTE – Ask all categories in 84a before asking 84b

NOTE – Ask 84b only for those categories in 84a which were answered "Yes"

84a. The following questions are concerned with different aspects of your present neighborhood. Here is a list of conditions which many people have on their streets. Which, if any, do you have?		b. Does the (Condition) bother you?	c. Is it so objectionable that you would like to move from the neighborhood?
(1) Street (highway) noise?	(901) * 1 ☐ Yes 2 ☐ No	(1) 3 ☐ Yes – Ask c 4 ☐ No	5 ☐ Yes 6 ☐ No
(2) Streets or roads continually in need of repair, or open ditches?	(902) * 1 ☐ Yes 2 ☐ No	(2) 3 ☐ Yes – Ask c 4 ☐ No	5 ☐ Yes 6 ☐ No
(3) Neighborhood crime?	(903) * 1 ☐ Yes 2 ☐ No	(3) 3 ☐ Yes – Ask c 4 ☐ No	5 ☐ Yes 6 ☐ No
(4) Trash, litter, or junk in the streets (roads), or on empty lots, or on properties in this neighborhood?	(904) * 1 ☐ Yes 2 ☐ No	(4) 3 ☐ Yes – Ask c 4 ☐ No	5 ☐ Yes 6 ☐ No
(5) Boarded-up or abandoned structures?	(905) * 1 ☐ Yes 2 ☐ No	(5) 3 ☐ Yes – Ask c 4 ☐ No	5 ☐ Yes 6 ☐ No
(6) Industries, businesses, stores, or other nonresidential activities?	(906) * 1 ☐ Yes 2 ☐ No	(6) 3 ☐ Yes – Ask c 4 ☐ No	5 ☐ Yes 6 ☐ No
(7) Odors, smoke, or gas?	(907) * 1 ☐ Yes 2 ☐ No	(7) 3 ☐ Yes – Ask c 4 ☐ No	5 ☐ Yes 6 ☐ No

NOTE – If "Yes" was answered for one or more of the categories in 84a, ask 84b

NOTE – Ask ALL categories in 85a before asking 85b

NOTE – Ask 85b only for those categories in 85a which were answered "No"

85a. The following questions are concerned with neighborhood services. Do you have –		86b. Is the (Service) so unsatisfactory that you would like to move from the neighborhood?
(1) Satisfactory police protection?	(908) 1 ☐ Yes 2 ☐ No 3 ☐ Don't know	(909) 1 ☐ Yes 2 ☐ No
(2) Satisfactory outdoor recreation facilities such as parks, playgrounds, or swimming pools?	(910) 1 ☐ Yes 2 ☐ No 3 ☐ Don't know	(911) 1 ☐ Yes 2 ☐ No
(3) Satisfactory hospitals or health clinics?	(912) 1 ☐ Yes 2 ☐ No 3 ☐ Don't know	(913) 1 ☐ Yes 2 ☐ No

NOTE – If "No" was answered for one or more categories in 85a, ask 85b.

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Section VIII – NEIGHBORHOOD QUALITY SUPPLEMENT – Continued

86a. Is there public transportation for this area?	(914)	1 ☐ Yes 2 ☐ No – Skip to 87a
b. Is it satisfactory?	(915)	1 ☐ Yes 2 ☐ No 3 ☐ Don't know
c. Does anyone in the household (Do you) use public transportation at least once a week?	(916)	1 ☐ Yes 2 ☐ No
87a. Do you have satisfactory neighborhood shopping, that is grocery stores or drug stores?	(917)	1 ☐ Yes 2 ☐ No . . . . . 3 ☐ Don't know . . . } Skip to Check Item V
b. Are any of these stores within one mile of here?	(918)	1 ☐ Yes 2 ☐ No

CHECK ITEM V

Part (1) (See item 8, page 1)
- ☐ Regular Interview – Go to part (2) below
- ☐ URE Interview – Skip to 89

Part (2) (See Control Card items 11c and 14)
- ☐ Household members 5 through 13 years of age – Ask 88a
- ☐ No household members 5 through 13 years of age – Skip to 88b

88a. Does your child (Do your children) attend a public elementary school or a private elementary school? (Mark all that apply.)	(919) *	1 ☐ Public elementary school 2 ☐ Private elementary school 3 ☐ Other school 4 ☐ Does not attend school
b. Is the public elementary school that children living at this address attend (would attend) satisfactory? (If more than one public elementary school, ask about the closest one to the area.)	(920)	1 ☐ Yes 2 ☐ No 3 ☐ Don't know
c. Is that public elementary school within one mile of here?	(921)	1 ☐ Yes 2 ☐ No
89. In view of all the things we have talked about, how would you rate this neighborhood as a place to live – would you say it is excellent, good, fair, or poor?	(922)	1 ☐ Excellent 2 ☐ Good 3 ☐ Fair 4 ☐ Poor

NOTES

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Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

~ PGM 8 ↓

Section IX – CONDOMINIUM/COOPERATIVE SUPPLEMENT

CHECK ITEM W

(See Check Item B, page 12)
- ☐ Owned as a cooperative (box 1 marked) – Skip to 91
- ☐ Owned as a condominium (box 2 marked) – Skip to 91
- ☐ Rented for cash or occupied without payment of cash rent (box 6, 7, 8, 9, 10 or 11 marked) – Ask 90
- ☐ All other (box 3, 4, or 5 marked) – Skip to Check Item Y, page 35

90. Is this apartment (house) part of a condominium? (527)
1 ☐ Yes – Skip to 93
2 ☐ No – Skip to Check Item Y, page 35

91. Was this building converted from rental housing to condominium (cooperative) housing? (528)
1 ☐ Yes
2 ☐ No . . . . . } Skip to 93
3 ☐ Don't know

92. In what year was this unit converted to condominium (cooperative) ownership? (529)
0 ☐ 1983
1 ☐ 1981–1982
2 ☐ 1979–1980
3 ☐ 1976–1978
4 ☐ 1970–1975
5 ☐ Before 1970
6 ☐ Don't know

93. A development is a building or group of buildings under a single management. How many condominium (cooperative) units are there in THIS development? (Read categories) (530)
1 ☐ Less than 50
2 ☐ 50–99
3 ☐ 100–499
4 ☐ 500 or more
5 ☐ Don't know

94. Are any of the (any other) units in this development rented or for rent? (531)
1 ☐ Yes
2 ☐ No
3 ☐ Don't know

CHECK ITEM X

Part (1) (See item 8, page 1)
- ☐ URE Interview – Skip to Check Item AA, page 40
- ☐ Regular Interview – Go to Part (2) below

Part (2) (See Check Item B, page 12)
- ☐ Owned as a cooperative or condominium (box 1 or 2 marked) – Go to Part (3) below
- ☐ All others – Skip to Check Item Y, page 35

Part (3) (See item 39d, page 20)
- ☐ Kind of mortgage specified box 1, 2, 3 or 4 marked or "NA," "DK" or "REF" entered) – Ask 95, page 34
- ☐ Item 39d blank – Skip to 96a, page 34

NOTES

Section IX – CONDOMINIUM/COOPERATIVE SUPPLEMENT – Continued

95. Earlier you told me that this unit is mortgaged. In regard to that mortgage, what are the required payments to the lender? If more than one mortgage (loan) on this condominium, (cooperative) give the total amount of the payments. (534) $_____.00
PER
(535) 1 ☐ Month
2 ☐ Year
☐ Other – Specify _____

96a. Do you pay for fire and hazard insurance? (Also include fire and hazard insurance that is included in mortgage payments.) (536)
1 ☐ Yes
2 ☐ No – Skip to 97a

b. What is the YEARLY cost? (537) $_____.00

97a. Are the real estate taxes included in the mortgage payment (cooperative maintenance fee)? (538)
1 ☐ Yes – Skip to 97c
2 ☐ No

b. Do you pay real estate taxes separately? (539)
1 ☐ Yes
2 ☐ No – Skip to 98

c. What is the YEARLY cost? (Do not include taxes in arrears from previous years.) (540) $_____.00

98. How much is your condominium (cooperative maintenance) fee? (541) $_____.00
PER
(542) 1 ☐ Month
2 ☐ Year
☐ Other – Specify _____

99a. Does your condominium (cooperative maintenance) fee include electricity? (543)
1 ☐ Yes – Skip to 100a
2 ☐ No

b. Do you pay for electricity separately? (544)
1 ☐ Yes
2 ☐ No or electricity not used – Skip to 100a

c. In the past 12 months, what was the average MONTHLY cost for electricity? (545) $_____.00

100a. Does your condominium (cooperative maintenance) fee include gas? (546)
1 ☐ Yes – Skip to 101a
2 ☐ No

b. Do you pay for gas separately? (547)
1 ☐ Yes
2 ☐ No or gas not used – Skip to 101a

c. In the past 12 months, what was the average MONTHLY cost for gas? (548) $_____.00

101a. Does your condominium (cooperative maintenance) fee include water supply and/or sewage disposal? (549)
1 ☐ Yes – Skip to 102a, page 35
2 ☐ No

b. Do you pay for water supply and/or sewage disposal separately (550)
1 ☐ Yes
2 ☐ No – Skip to 102a, page 35

c. What is the YEARLY cost for water supply and sewage disposal? (551) $_____.00

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section IX – CONDOMIUM/COOPERATIVE SUPPLEMENT – Continued

102a. Does your condominium (cooperative maintenance) fee include oil, coal, kerosene, wood, OR any other fuel? (552) 1 ☐ Yes – *Skip to 103a* 2 ☐ No

b. Do you pay for oil, coal, kerosene, wood, OR any other fuel separately? (553) 1 ☐ Yes 2 ☐ No – *Skip to 103a*

c. What is the YEARLY cost for oil, coal, kerosene, wood, and any other fuel? (554) $_____.00

103a. Does your condominium (cooperative maintenance) fee include garbage (food waste) collection? (555) 1 ☐ Yes – *Skip to 104* 2 ☐ No

b. Do you pay for garbage (food waste) collection separately from real estate taxes? (556) 1 ☐ Yes 2 ☐ No or payment included in real estate taxes – *Skip to 104*

c. What is the YEARLY cost for garbage (food waste) collection? (557) $_____.00

104. Does your condominium (cooperative maintenance) fee include –

(1) Upkeep and maintenance of the common property, buildings, equipment, and grounds? (558) 1 ☐ Yes 2 ☐ No

(2) Off-street parking? (559) 1 ☐ Yes 2 ☐ No

(3) Swimming facilities? (560) 1 ☐ Yes 2 ☐ No

(4) Other recreational facilities? (561) 1 ☐ Yes 2 ☐ No

(5) Security personnel? (562) 1 ☐ Yes 2 ☐ No

(6) Anything else? (563) 1 ☐ Yes – Specify _____ 2 ☐ No

CHECK ITEM Y

Part (1) (See *Check Item B, page 12*)
☐ Box 5 marked – *Go to Part (2)*
☐ All others – *Skip to Check Item AA, page 40*

Part (2) (See *item 8a, page 10*)
☐ Mobile home or trailer (no permanent room attached) – *Ask 105a, page 36*
☐ All others – *Skip to Check Item Z, page 36*

NOTES

Section X – HOUSING COST SUPPLEMENT

105a. Do you own the mobile home (trailer) SITE or is it rented? (565) 1 ☐ Owned – *Skip to 106a* 2 ☐ Rented for cash or occupied without payment of cash rent

b. What is the MONTHLY rent for this site? *(Mark the frequency of payment box and enter the MONTHLY site rent. If rent is not paid by the month, compute the MONTHLY site rent in "Notes" space, and enter the monthly site rent on the line provided.)* (566) $_____.00 Per month 0 ☐ No cash rent

(567) 1 ☐ More frequently than once a month 2 ☐ Less frequently than once a month 3 ☐ Once a month

106a. In what year did you acquire this mobile home (trailer)? (568) 19__

b. Was the mobile home (trailer) NEW when you acquired it? (569) 1 ☐ Yes 2 ☐ No

c. When you acquired this mobile home (trailer), what was the purchase price? Do not include the price of the site or closing costs. (570) $_____.00 Purchase price 0 ☐ Not purchased

CHECK ITEM Z

(See item 39d, page 20)
☐ Kind of mortgage specified (box 1, 2, 3, or 4 marked or "DK," "NA," or "REF" entered) – *Ask 107*
☐ Item 39d blank – *Skip to 110a, page 37*

107. Earlier you told me that your residence is mortgaged. In regard to that mortgage (loan), what are the required payments to the lender? If more than one mortgage (loan), on this property, give the total amount of the payments. (534) $_____.00 PER (535) 1 ☐ Month 2 ☐ Year ☐ Other – Specify _____

108a. In regard to the mortgage (loan), do the required payments include mortgage payments for property other than your residence? (571) 1 ☐ Yes 2 ☐ No – *Skip to 109*

b. How much of the *(specify amount in 107)* is for YOUR RESIDENCE? (572) $_____.00 0 ☐ Don't know

109. In regard to the mortgage (loan), do the required payments include –
(1) Real estate taxes for your residence? (573) 1 ☐ Yes 2 ☐ No

(2) Fire and hazard insurance for your residence? (574) 1 ☐ Yes 2 ☐ No

NOTES

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section X – HOUSING COST SUPPLEMENT – Continued

110a. Do you pay for electricity? (575) 1 ☐ Yes 2 ☐ No or electricity not used – *Skip to 111a*

b. In the past 12 months, what was the average MONTHLY cost for electricity? (576) $ _____ .00

c. Does any part of that amount cover electricity for use other than for your residence? (577) 1 ☐ Yes 2 ☐ No – *Skip to 111a*

d. How much of the (specify amount in item 110b) is for YOUR RESIDENCE? (578) $ _____ .00 0 ☐ Don't know

e. Is that based on separate metering? (579) 1 ☐ Yes 2 ☐ No

111a. Do you pay for gas? (580) 1 ☐ Yes 2 ☐ No or gas not used – *Skip to 112a*

b. In the past 12 months, what was the average MONTHLY cost for gas? (581) $ _____ .00

c. Does any part of that amount cover gas for use other than for your residence? (582) 1 ☐ Yes 2 ☐ No – *Skip to 112a*

d. How much of the (specify amount in item 111b) is for YOUR RESIDENCE? (583) $ _____ .00 0 ☐ Don't know

e. Is that based on separate metering? (584) 1 ☐ Yes 2 ☐ No

112a. Do you pay for water supply and/or sewage disposal? (585) 1 ☐ Yes 2 ☐ No – *Skip to 113a*

b. What is the YEARLY cost for water supply and sewage disposal? (586) $ _____ .00

c. Does any part of that amount cover water supply and/or sewage disposal for use other than for your residence? (587) 1 ☐ Yes 2 ☐ No – *Skip to 113a*

d. How much of the (specify amount in item 112b) is for YOUR RESIDENCE? (588) $ _____ .00 0 ☐ Don't know

e. Is that based on separate metering? (589) 1 ☐ Yes 2 ☐ No

Section X – HOUSING COST SUPPLEMENT – Continued

113a. Do you pay for oil, coal, kerosene, wood, OR any other fuel? (590) 1 ☐ Yes 2 ☐ No – *Skip to 114a*

b. What is the YEARLY cost for oil, coal, kerosene, wood, or any other fuel? (591) $ _____ .00

c. Does any part of that amount cover fuels for use other than for your residence? (592) 1 ☐ Yes 2 ☐ No – *Skip to 114a*

d. How much of the (specify amount in item 113b) is for YOUR RESIDENCE? (593) $ _____ .00 0 ☐ Don't know

114a. Do you pay for fire and hazard insurance? (Also include if part of mortgage payment) (594) 1 ☐ Yes 2 ☐ No – *Skip to 115a*

b. What is the YEARLY cost for fire and hazard insurance? (595) $ _____ .00

c. Does any part of that amount cover fire and hazard insurance for property other than your residence? (596) 1 ☐ Yes 2 ☐ No – *Skip to 115a*

d. How much of the (specify amount in item 114b) is for YOUR RESIDENCE? (597) $ _____ .00 0 ☐ Don't know

e. Is that based on separate premiums? (598) 1 ☐ Yes 2 ☐ No

115a. Do you pay for real estate taxes? (Also include if part of mortgage payment) (599) 1 ☐ Yes 2 ☐ No – *Skip to 116a*

b. What is the YEARLY cost for real estate taxes? (Do not include taxes in arrears from previous years) (600) $ _____ .00

c. Does any part of that amount cover real estate taxes for property other than your residence? (601) 1 ☐ Yes 2 ☐ No – *Skip to 116a*

d. How much of the (specify amount in item 115b) is for YOUR RESIDENCE? (602) $ _____ .00 0 ☐ Don't know

e. Is that based on separate assessments? (603) 1 ☐ Yes 2 ☐ No

NOTES

Facsimile of the Annual Housing Survey Questionnaire: 1983—Continued

Section X – HOUSING COST SUPPLEMENT – Continued

116a. Do you pay for garbage (food waste) collection separately from real estate taxes? (604) 1 ☐ Yes; 2 ☐ No or payment included in real estate taxes – *Skip to Check Item AA, page 40*

b. What is the YEARLY cost for garbage (food waste) collection? (605) $ _____ . 00

c. Does any part of that amount cover garbage (food waste) collection for other than your residence? (606) 1 ☐ Yes; 2 ☐ No – *Skip to Check Item AA, page 40*

d. How much of the (*specify amount in item 116b*) is for YOUR RESIDENCE? (607) $ _____ . 00 *Skip to Check Item AA, page 40*; 0 ☐ Don't know

e. Is that based on separate bills? (608) 1 ☐ Yes; 2 ☐ No

NOTES

→ PGM 9 ↓

Section XI – STRUCTURE AND NEIGHBORHOOD CONDITION ITEMS

CHECK ITEM AA

(*See item 8, page 1*)
☐ Regular or URE interview
(*See item 8a, page 10*)
☐ One-unit structure or a mobile home or trailer – *Skip to 120*
☐ Two or more unit structure – *Continue with item 117a*
☐ Vacant interview
(*See item 1a, page 4*)
☐ One-unit structure or a mobile home or trailer – *Skip to 120*
☐ Two or more unit structure – *Continue with item 117a*

117a. Are there loose, broken, or missing steps on any common stairways inside this building or attached to this building? (633) 1 ☐ Yes; 2 ☐ No; 3 ☐ No common stairways – *Skip to 118a*

b. Are all stair railings firmly attached? (634) 1 ☐ Yes; 2 ☐ No; 3 ☐ No stair railings

OBSERVATION
118a. Do the public halls in this building have light fixtures? (635) 1 ☐ Yes; 2 ☐ No; 3 ☐ No public halls – *Skip to 119*

OBSERVATION
b. Are the light fixtures in working order? (636) 1 ☐ All in working order; 2 ☐ Some in working order; 3 ☐ None in working order

OBSERVATION
119. How many stories (floors) are there from the main entrance of the building to the main entrance of the apartment? (637) 1 ☐ None, on same floor; 2 ☐ One (up or down); 3 ☐ Two or more (up or down)

OBSERVATION
120. Are there abandoned buildings on this street? (638) 1 ☐ Yes, one; 2 ☐ Yes, more than one; 3 ☐ No

OBSERVATION
121. What is the condition of streets and roads in this neighborhood? (639) 1 ☐ No repairs needed; 2 ☐ Minor repairs needed; 3 ☐ Major repairs needed

OBSERVATION
122. Is there trash, litter, or junk in the streets (roads), or on empty lots, or on properties in this neighborhood? (640) 1 ☐ None; 2 ☐ Minor accumulation; 3 ☐ Moderate accumulation; 4 ☐ Heavy accumulation

CHECK ITEM BB
☐ Regular or URE Interview – *Go to Control Card item 38a*
☐ Vacant Interview – *Go to Control Card item 39*
☐ Type A – *Go to Control Card item 39*
☐ Type B – *Enclose completed AHS-97 and go to Control Card item 39*

OFFICE USE ONLY
a. (923) ☐☐☐
b. (924) ☐☐
c. (925) ☐☐

NOTES