HOQ.010new I'd like to ask you a few questions about your home.

Is your home . . .

VERIFY OR ASK IF NOT OBVIOUS.
INCLUDE TOWNHOME AS 'HOUSE', EITHER DETACHED OR ATTACHED.

- a mobile home or trailer,.......................... 1 (HOQ.040)
- a one family house detached from any other house,................................. 2 (HOQ.040)
- a one family house attached to one or more houses,.............................. 3 (HOQ.040)
- an apartment, or .................................... 4
- dormitory............................................... 5 (HOQ.040)
- something else (SPECIFY)? ................... 6 (HOQ.040)
- REFUSED ........................................... 7 (HOQ.040)
- DON'T KNOW ................................. 9 (HOQ.040)

HOQ.030 How many apartments are in this building? Would you say . . .

- 1,.............................................................. 1
- 2,.............................................................. 2
- 3 or 4, ...................................................... 3
- 5 to 9,....................................................... 4
- 10 to 19,................................................... 5
- 20 to 49, or .............................................. 6
- 50 or more? ............................................. 7
- REFUSED ............................................. 77
- DON'T KNOW ................................. 99

HOQ.040 When was this {mobile home/house/building} 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 ........................................... 7
- DON'T KNOW ................................. 9

HOQ.050 How many rooms are in this home? Count the kitchen but not the bathroom.

|___|___|
ENTER NUMBER OF ROOMS
REFUSED ............................................... 77
DON'T KNOW .......................................... 99

HOQ.060  How long {have you/has your family} lived at this address?

|___|___|___|
ENTER NUMBER (OF MONTHS OR YEARS)

LESS THAN ONE MONTH .....................666
REFUSED ...............................................777
DON'T KNOW ........................................999

ENTER UNIT

MONTHS ............................................... 1
YEARS .................................................... 2
REFUSED ............................................... 7
DON'T KNOW ......................................... 9

HOQ.065  Is this {mobile home/house/apartment} owned, being bought, rented, or occupied by some other arrangement by {you/you or someone else in your family}?

OWNED OR BEING BOUGHT ............ 1
RENTED ............................................... 2
OTHER ARRANGEMENT ..................... 3
REFUSED ............................................... 7
DON'T KNOW ......................................... 9

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 .. 1
PRIVATE/PUBLIC WELL ...................... 2
SOMETHING ELSE ............................... 3
REFUSED ............................................... 7
DON'T KNOW ......................................... 9

HOQ.080  Are any of the water treatment devices listed on this card used in your home?

HAND CARD HOQ1

YES ...................................................... 1
NO ....................................................... 2 (BOX 1)
REFUSED ............................................... 7 (BOX 1)
DON'T KNOW ......................................... 9 (BOX 1)

HOQ.083  Which of these water treatment devices are now used in your home?

HAND CARD HOQ1
CODE ALL THAT APPLY

BRITA OR OTHER PITCHER
CHECK ITEM HOQ.085:
IF FAMILY INCLUDES CHILD WHO IS AN SP AND IS AGE 1-5, CONTINUE. OTHERWISE, GO TO END OF SECTION.

HOQ.140 During the last 12 months, were any areas inside your home painted, such as walls, trim or ceilings?

YES ......................................................... 1
NO ........................................................... 2 (HOQ.160)
REFUSED ................................................... 7 (HOQ.160)
DON'T KNOW ......................................... 9 (HOQ.160)

HOQ.150 When this painting was done did someone sand or scrape off any of the old paint?

YES ......................................................... 1
NO ........................................................... 2
REFUSED ................................................... 7
DON'T KNOW ......................................... 9

HOQ.160 Are there any rooms in your home where you can see paint that is peeling, flaking or chipping off the walls, ceilings, doors, or windows?

YES ......................................................... 1
NO ........................................................... 2 (HOQ.190)
REFUSED ................................................... 7 (HOQ.190)
DON'T KNOW ......................................... 9 (HOQ.190)

HOQ.170 In any of these rooms, can you see at least one total area of peeling, flaking or chipping paint that is larger than one page of a regular newspaper?

YES ......................................................... 1
NO ........................................................... 2 (HOQ.190)
REFUSED ................................................... 7 (HOQ.190)
DON'T KNOW ......................................... 9 (HOQ.190)

HOQ.180 How many rooms have this much peeling, flaking or chipping paint? [Areas that are larger than one page of regular newspaper.]
Can you see paint that is peeling, flaking or chipping on any outside area of your {house/building}?  

- YES ......................................................... 1  
- NO ........................................................... 2 (HOQ.220)  
- REFUSED ............................................... 7 (HOQ.220)  
- DON'T KNOW ......................................... 9 (HOQ.220)

Can you see any total area of peeling, flaking or chipping paint on any outside area that is larger than a regular door?  

- YES ......................................................... 1  
- NO ........................................................... 2  
- REFUSED ............................................... 7  
- DON'T KNOW ......................................... 9

The next questions are about work that has been done in your home in the past 12 months. In the past 12 months, have you or anyone else . . .  

RESPONSES: YES = 1, NO = 2, REFUSED = 7, DON'T KNOW = 9.

a. replaced a window in your home?  
b. replaced a kitchen cabinet?  
c. removed a wall in your home?