Housing Characteristics

The next section asks questions about your home and your exposure to certain hazards in the home.

1.	When was this home or building originally built?		
HOQ040_R3	 ○ Before 1900 ○ 1901 to 1950 ○ 1951 to 1978 ○ 1979 to 1990 ○ 1991 and after ○ Don't know 	HOQ040_R3 FM	IT_HOQ040_R2
2.	How long have you lived at this address?		
HOQ060_R3	 ○ 0-1 years ○ 1-3 years ○ 3-10 years ○ >10 years 	HOQ060_R3 FM	T_HOQ060_R2
3.	What kind of pets do you keep inside your home r	now? Fill in all	that apply.
HOQ250_R2	 None Cat Dog Bird Hamster, mice, guinea pig, gerbils Reptile Fish Other 	HOQ250_R2_A HOQ250_R2_B HOQ250_R2_C HOQ250_R2_D HOQ250_R2_E HOQ250_R2_F HOQ250_R2_G HOQ250_R2_H	FMT_YES_NO.
4.	Do you have a basement in this home?		
HOQ066_R2	O Yes	HOO066 R2	FMT YES NO.



5.	What is the main type of heating system in this home?		
HOQ067_R2	 Steam radiators Hot water radiators / heaters Forced air system using gas or fuel oil Active solar Wood burning stoves Portable electric space heaters Other types of space heaters 	Other: Print below. Don't know HOQ067_R2 FMT_HOQ067_R2 HOQ067_OTHER_R2 \$FMT_CHAR.	
6.	Is your home connected to a private well or to a community water supply?		
HOQ070_R2	 ○ Private well ○ Community water supply → Go to question 8 ○ Don't know → Go to question 8 	HOQ070_R2 FMT_HOQ070_R2	
7. HOQ075_R2	Approximately how deep is your well? < 50 feet 50-99 feet 100-149 feet > 150 feet Don't know	HOQ075_R2 FMT_HOQ075	
8.	Do you use a home water filter/treatment s	ystem in the home for drinking water?	
HOQ080_R2	 Yes No → Go to question 10, page 38 Don't know → Go to question 10, page 	HOQ080_R2 FMT_YES_NO.	
9.	Are any of these water filter/t eatment syste	ms in your home? Fill in all that apply.	
HOQ083_R2	O Brita or other pitcher with water filter O Ceramic or charcoal filter O Water softener O Aerator O Reverse osmosis O None of these are in our home	Other: Print below. Don't know HOQ083_R2_A FMT_YES_NO. HOQ083_R2_B FMT_YES_NO. HOQ083_R2_C FMT_YES_NO. HOQ083_R2_D FMT_YES_NO. HOQ083_R2_E FMT_YES_NO. HOQ083_R2_F FMT_YES_NO. HOQ083_R2_G FMT_YES_NO. HOQ083_R2_G FMT_YES_NO. HOQ083_R2_OTHER \$FMT_CHAR.	

This next section is about chemicals, such as insecticides and weed killers, that may have been used outside or inside your home. These products could have been used by you, another household member, a landlord, or a company.

10.	During the last 12 months, how often were weed killers or insecticides used on the foundation, yard/lawn, flowers, vegetables, o fruit trees <i>outside</i> your house?		
HOQ261_R2	 ○ 0 times ○ 1 time ○ 2-3 times ○ 4-10 times ○ > 10 times 	HOQ261_R2 FMT_HOQ261_R2	
	O Don't know		
11.	During the last 12 months, how often were chome to kill or control insects or other pests?	<u>-</u>	
HOQ266_R2	 ○ 0 times → Go to question 1, page 39 ○ 1 time ○ 2-3 times ○ 4-10 times ○ > 10 times ○ Don't know 	HOQ266_R2 FMT_HOQ261_R2	
12.	Which rooms in your home were treated with	this product? Fill in all that apply.	
HOQ270_R2	 Kitchen Bathroom Living room or family room Bedroom Laundry room Basement 	 ○ Other: Print below. ○ Don't know HOQ270_R2_A FMT_YES_NO. HOQ270_R2_B FMT_YES_NO. HOQ270_R2_C FMT_YES_NO. HOQ270_R2_D FMT_YES_NO. HOQ270_R2_E FMT_YES_NO. HOQ270_R2_F FMT_YES_NO. HOQ270_R2_G FMT_YES_NO. HOQ270_R2_G FMT_YES_NO. HOQ270_R2_G FMT_YES_NO. HOQ270_R2_G FMT_YES_NO. HOQ270_R2_OTHER \$FMT_CHAR. 	

