

Docket no. **2** [] Survey date **3** [] Assignment no. **4** [] Designated interviewer no. **5** [] No or change Your interviewer no. []

P.S.U. **6** [] Group [] Cluster [] Rot. no. [] Listing **7** [] Mult. [] Type of dwelling **8** [] Enter code

Record time of every call on this household.

1	Mon.								
2	Tues.								
3	Wed.								
4	Thur.								
5	Fri.								
6	Sat.								

Listing address **10** []

11 INTERVIEWER CHECK ITEM:
 • Is this the first interview at this dwelling or a new household since last interview?
 Yes Go to 12 No Go to 20

12 IS (read listing address in item 10) YOUR CORRECT MAILING ADDRESS?
 Yes Go to 13 No Enter correct mailing address on Form 23 and go to 13

FIRST INTERVIEW WITH THIS HOUSEHOLD

13 WOULD YOU PREFER TO BE INTERVIEWED IN ENGLISH OR IN FRENCH?
 English French Either Neither

14 INTERVIEWER CHECK ITEM:
 Language of interview:
 English French Other Go to 15

SUBSEQUENT INTERVIEW

20 • If Personal interview Go to 21
 • Otherwise ask:
ARE YOU STILL LIVING IN THE SAME DWELLING AS LAST MONTH?
 • where possible, state listing address
 Yes Go to 21 No Personal visit required

15 WHAT ARE THE NAMES OF ALL PERSONS NOW LIVING OR STAYING HERE WHO HAVE NO USUAL PLACE OF RESIDENCE ELSEWHERE?
 Enter names in 32.

16 ARE THERE ANY PERSONS AWAY FROM THIS HOUSEHOLD ATTENDING SCHOOL, VISITING, TRAVELLING OR IN HOSPITAL WHO USUALLY LIVE HERE?
 Yes Enter names in 32 and go to 22 No Go to 22

21 DO THE FOLLOWING PERSONS STILL LIVE OR STAY AT THIS DWELLING?
 • Read all names in 32.
 • Enter appropriate code in 40.

22 DOES ANYONE ELSE LIVE AT THIS DWELLING SUCH AS OTHER RELATIVES, ROOMERS, BOARDERS OR EMPLOYEES?
 Yes Enter names in 32, COMPLETE 33 through 40 and go to 42
 No • For a first interview, COMPLETE 33 through 40 and go to 42
 • For a subsequent interview, go to 42

HRD Pg Ln	32 Names of household members	33 Age	34 Sex	35 M	36 Fam. Id.	37 R to H	38 Educ. [1] [2]	40 Membership	50 Answers to supplementary questions																				
									Ln	1	2	3	4	5	6	7	8	9	10	11	12								
																						A	B	C	D	E	F	G	H
1	Given name Surname								1																				
2	Given name Surname								2																				
3	Given name Surname								3																				
4	Given name Surname								4																				
5	Given name Surname								5																				
6	Given name Surname								6																				
7	Given name Surname								7																				
8	Given name Surname								8																				

42 IS THIS DWELLING OWNED BY A MEMBER OF THIS HOUSEHOLD?
 Yes Go directly to FORMS 05 & 06 No Complete FORM 04

COMPLETE AT END OF INTERVIEW

43 FOR ALL HOUSEHOLDS
 Telephone no. [] - [] → Permission to interview by phone:
 Granted Denied Go to 44
 or
 Telephone no. 2 [] refused Go to 44

44 Determine and record the best time to call on this household.
 []

45 RESPONSE CODE

Month [] [] [] []

Code [] [] [] []

IF CODE "B" EXPLAIN IN NOTES

46 Was this interview conducted by telephone?
 Yes No

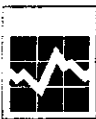
47 Forms Control

Form	04	05	06
Printed			
Completed			

48 NOTES

Ln	Retain	Item no.	
1	<input type="checkbox"/>		
2	<input type="checkbox"/>		
3	<input type="checkbox"/>		
4	<input type="checkbox"/>		

See over for additional NOTES.



Code Sheet

Household Record Docket (Form 03)

Exemplaire français
disponible sur
demande

- 8**
- 1 Single Detached
 - 2 Double
 - 3 Row or Terrace
 - 4 Duplex
 - 5 Low-Rise Apartment (less than 5 stories) or Flat
 - 6 High-Rise Apartment (5 stories or more)
 - 7 Institution
 - 8 Hotel; Rooming/Lodging House; Camp (Logging, Construction, etc.); Hutterite Colony
 - 9 Mobile Home
 - 0 Other - Specify in NOTES

- 34**
- M Male
F Female

- 35**
- WHAT IS MARITAL STATUS?**
(Read categories to respondent)
- 1 Now married or living common-law
 - 2 Single (never married)
 - 3 Widow or widower
 - 4 Separated or divorced

36

Assign one letter to all household members related to the head of a family by one of the relationships listed in Item 37.
("A" for each member of the first family, "B" for each member of the second family, etc.)

- 37**
- Each different letter used in Item 36 requires a different 'Head of Family' in Item 37.
- 1 Head of Family
 - 2 Spouse
 - 3 Son or daughter (natural, adopted or step)
 - 4 Grandchild
 - 5 Son-in-law or daughter-in-law
 - 6 Foster child (less than 18)
 - 7 Parent
 - 8 Parent-in-law
 - 9 Brother or sister
 - 0 Other relative - Specify in NOTES
- Unrelated roomers, boarders and friends require a separate family identifier in Item 36.

- 40**
- 0 Not a household member this month
 - 1 Civilian household member this month
 - 2 Full-time member of Canadian Armed Forces this month
 - 3 Household member 70 years of age and over (non-birth interview only)

FIRST CODE: Entered by interviewer

NOTE: for any code other than X, explain situation on appropriate form(s) **FORMS**

X LFS questionnaire completed for all eligible household members	22
E LFS questionnaire completed for some (not all) eligible household members	15/22
N No one at home (after several calls)	15/22
R Household refusal	15/22
K Interview prevented by death, sickness, language problem or other unusual circumstances related to the household	15/22
L Interview prevented by weather conditions	15/22
T Household temporarily absent	15/22
V Vacant dwelling (or trailer stall and vacant seasonal dwelling)	22
C Dwelling under construction	22
B Dwelling occupied by persons not to be interviewed	15/22
D Dwelling demolished, converted to business premises, moved, abandoned (unfit for habitation), listed in error	12/22
A Interview cancelled for lack of an interviewer (Regional Office use only)	

45

SECOND CODE: Regional Office use only

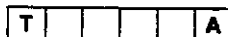
Blank interview or attempt to interview again

- 3 Do not interview unless there is a complete change in household membership
- 4 Attempt to interview again, a letter was sent
- 5 Attempt to interview again, personal contact made by Regional Office staff

- 38**
- Column 1: WHAT IS THE HIGHEST GRADE OF ELEMENTARY OR HIGH SCHOOL (SECONDARY SCHOOL) EVER COMPLETED?**
- | | | |
|---|------------------|--|
| 0 | Grade 8 or lower | Quebec: Secondary II or lower |
| 1 | Grade 9 - 10 | Quebec: Secondary III or IV
Newfoundland: 1st year of secondary |
| 2 | Grade 11 - 13 | Quebec: Secondary V
Newfoundland: 2nd to 4th year of secondary |
- ↓
- DID GRADUATE FROM HIGH SCHOOL (SECONDARY SCHOOL)?**
- 2 No
 - 3 Yes

- Column 2: HAS RECEIVED ANY OTHER EDUCATION?**
- 0 No
Yes →
- COULD THIS EDUCATION BE COUNTED TOWARDS A DEGREE, CERTIFICATE OR DIPLOMA FROM AN EDUCATIONAL INSTITUTION?**
- 0 No
Yes →
- WHAT IS THE HIGHEST DEGREE, CERTIFICATE OR DIPLOMA . . . HAS OBTAINED?**
- 1 No postsecondary degree, certificate or diploma
 - 2 Trades certificate or diploma from a vocational school or apprenticeship training
 - 3 Non-university certificate or diploma from a community college, CEGEP, school of nursing, etc.
 - 4 University certificate below bachelor's level
 - 5 Bachelor's degree
 - 6 University degree or certificate above bachelor's level

USING TEMPORARY DOCKET NUMBERS



Always start with "T" for Temporary

Use the last 4 digits of your Assign. No.

"A" for the first additional dwelling, "B" for the second, "C" for the third, etc.



Rent Questionnaire

1 FORM 04

Confidential when completed

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

Français au verso

Docket no. 2

Survey date 3

Assignment no. 4

P.S.U. 5

10 INTERVIEWER CHECK ITEM:

- If first rent interview at this dwelling 1 go to 11
- Otherwise 2 go to 15

11 INTERVIEWER CHECK ITEM:

- If dwelling Code 5 or 6 in item 8 on F03 1 go to 12
- Otherwise 2 go to 13

12 ON WHICH FLOOR DO YOU LIVE?

- Enter 00 for dwellings located in the basement.

13 TO THE BEST OF YOUR KNOWLEDGE, HOW OLD IS YOUR BUILDING?

- No more than 5 years old 1
- More than 5 but no more than 10 years old 2
- More than 10 but no more than 20 years old 3
- More than 20 but no more than 40 years old 4
- More than 40 years old 5

14 HOW MANY BEDROOMS ARE THERE IN YOUR DWELLING?

- Enter 0 for bachelor
- If 9 bedrooms or greater, enter 9

15 THIS MONTH, IS THE RENT FOR YOUR DWELLING:

- SUBSIDIZED BY GOVERNMENT OR AN EMPLOYER OR RELATIVE?

Yes 1 Specify in NOTES No 2
- USED FOR BOTH LIVING AND BUSINESS ACCOMMODATION?

Yes 3 Specify in NOTES No 4

16 HOW MUCH IS THE TOTAL MONTHLY RENT FOR YOUR DWELLING?

\$ 00 If 0000, specify in NOTES

IF SUBSEQUENT INTERVIEW, SAME HOUSEHOLD ONLY Otherwise, go to 18

17 SINCE LAST MONTH, HAVE THERE BEEN ANY CHANGES IN THE AMOUNT OF RENT PAID?

Yes 1 No 2

18 DOES THIS MONTHLY RENT INCLUDE PARKING FACILITIES

Yes 3 No 4 go to 20

19 WHAT TYPES OF PARKING FACILITIES ARE INCLUDED IN YOUR RENT?

Closed garage or indoor parking ...	5 <input type="radio"/>	<input type="text"/>	} For codes 3, 4, 5 or 6 in item 8 on the F03 enter the number of spaces (exclude driveways)
Outside parking with plug-in ...	6 <input type="radio"/>	<input type="text"/>	
Outside parking without plug-in ...	7 <input type="radio"/>	<input type="text"/>	

IF SUBSEQUENT INTERVIEW, SAME HOUSEHOLD ONLY Otherwise, go to 21

20 SINCE LAST MONTH HAVE THERE BEEN ANY CHANGES IN THE SERVICES, EQUIPMENT, FURNISHING OR OTHER FACILITIES INCLUDED IN THE RENT?

Yes 1 No 2 go to 22

21 WHICH OF THE FOLLOWING COMMODITIES ARE INCLUDED AS PART OF THE MONTHLY RENT?
Check all that apply

Heat 01 <input type="radio"/>	Range 07 <input type="radio"/>
Heating of water ... 02 <input type="radio"/>	Washer 08 <input type="radio"/>
Cold water 03 <input type="radio"/>	Dryer 09 <input type="radio"/>
Electricity 04 <input type="radio"/>	Other major appliances ... 10 <input type="radio"/>
Cablevision 05 <input type="radio"/>	Furniture 11 <input type="radio"/>
Refrigerator 06 <input type="radio"/>	None of the above ... 12 <input type="radio"/>

Specify in NOTES

22 COMPLETION STATUS

Completed 1 Partially completed 2 Refused 3 Specify in NOTES

NOTES

Item no. 99 <input type="text"/>	<input type="text"/>	Item no. 99 <input type="text"/>	<input type="text"/>
Item no. 99 <input type="text"/>	<input type="text"/>	Item no. 99 <input type="text"/>	<input type="text"/>

130

130



Docket No. 2, Survey date 3, Assignment No. 4, HRD page - line No. 5, Given name 6, Surname 7, 1 FORM NO. 05

10 LAST WEEK, DID ... WORK AT A JOB OR BUSINESS? (Regardless of the number of hours.)

30 LAST WEEK, DID ... HAVE A JOB OR BUSINESS AT WHICH HE/SHE DID NOT WORK?

50 HAS ... EVER WORKED AT A JOB OR BUSINESS? YES 1 NO 2 Go to 55

11 DID ... HAVE MORE THAN ONE JOB OR BUSINESS LAST WEEK?

31 LAST WEEK, DID ... HAVE A JOB TO START AT A DEFINITE DATE IN THE FUTURE?

51 WHEN DID ... LAST WORK AT A JOB OR BUSINESS? Mo. Yr.

12 WAS THIS A RESULT OF CHANGING EMPLOYERS LAST WEEK?

32 COUNTING FROM THE END OF LAST WEEK, IN HOW MANY WEEKS WILL ... START TO WORK AT HIS/HER NEW JOB?

52 INTERVIEWER CHECK ITEM: (1) if 51 is before ... (2) if 51 is equal to or later than ...

13 HOW MANY HOURS PER WEEK DOES ... USUALLY WORK AT HIS/HER: (Main) JOB? Other jobs?

33 WHY WAS ... ABSENT FROM WORK LAST WEEK? Enter code and if code 6 go to 32

53 DID ... USUALLY WORK 30 OR MORE HOURS PER WEEK? Full-time (30 or more hours per week) Part-time (Less than 30 hours per week)

14 WHAT IS THE REASON ... USUALLY WORKS LESS THAN 30 HOURS PER WEEK? Enter Code

34 DID ... HAVE MORE THAN ONE JOB OR BUSINESS LAST WEEK? Yes 1 No 2

54 WHAT WAS THE MAIN REASON WHY ... LEFT THAT JOB? Enter code

15 LAST WEEK, HOW MANY HOURS OF OVERTIME OR EXTRA HOURS DID ... WORK? include paid and unpaid time at all jobs

35 HOW MANY HOURS PER WEEK DOES ... USUALLY WORK AT HIS/HER: (Main) JOB? Other jobs?

55 INTERVIEWER CHECK ITEM: *if "perm. unable to work" in 10 ... *Otherwise

16 LAST WEEK, HOW MANY HOURS WAS ... AWAY FROM WORK FOR ANY REASON? (Holiday, vacation, illness, labour dispute, etc.)

36 WHAT IS THE REASON ... USUALLY WORKS LESS THAN 30 HOURS PER WEEK? Enter code

56 IN THE PAST 6 MONTHS, HAS ... LOOKED FOR WORK? Yes 1 No 2 Go to 64

17 WHAT WAS THE MAIN REASON FOR BEING AWAY FROM WORK? Enter code

37 UP TO THE END OF LAST WEEK, HOW MANY WEEKS HAS ... BEEN CONTINUOUSLY ABSENT FROM WORK?

57 IN THE PAST 4 WEEKS, WHAT HAS ... DONE TO FIND WORK? (Mark all methods reported.)

18 HOW MANY HOURS DID ... ACTUALLY WORK LAST WEEK AT HIS/HER: (Main) JOB? Other jobs?

38 IS ... GETTING ANY WAGES OR SALARY FROM HIS/HER EMPLOYER FOR ANY TIME OFF LAST WEEK? Yes 1 No 2

57 IN THE PAST 4 WEEKS, HAS ... DONE ANYTHING ELSE TO FIND WORK? Mark all other methods reported.

19 IN THE PAST 4 WEEKS, HAS ... LOOKED FOR ANOTHER JOB? Yes 1 No 2

39 INTERVIEWER CHECK ITEM: *if code 5 (layoff) in 33 ... *Otherwise

57 WHEN DID ... LAST (Repeat method) Method used No. of weeks ago (excl. svy. week)

20 DESCRIPTION OF MAIN JOB OR BUSINESS

40 IN THE PAST 4 WEEKS, HAS ... LOOKED FOR ANOTHER JOB? Yes 1 No 2

58 UP TO THE END OF LAST WEEK, HOW MANY WEEKS HAS ... BEEN LOOKING FOR WORK? (Not counting weeks worked.)

72 FOR WHOM DID ... WORK? (Name of business, government dept. or agency, or person)

73 WHEN DID ... START WORKING FOR THIS EMPLOYER? Mo. Yr.

59 WHAT WAS ...'S MAIN ACTIVITY BEFORE HE/SHE STARTED TO LOOK FOR WORK? Enter Code

74 WHAT KIND OF BUSINESS, INDUSTRY OR SERVICE WAS THIS? (Give full description: e.g., federal government, canning industry, forestry services.)

75A WHAT KIND OF WORK WAS ... DOING? (Give full description: e.g., office clerk, factory worker, forestry technician.)

60 IS ... LOOKING FOR A JOB TO LAST MORE THAN 6 MONTHS? Yes 1 (More than 6 months) No 2 (6 months or less)

75B IN THIS WORK, WHAT WERE ...'S MOST IMPORTANT ACTIVITIES OR DUTIES? (Give full description: e.g., filing documents, drying vegetables, forest examiner.)

76 Class of worker: Main job No change 1 Enter Code

61 IS ... LOOKING FOR A FULL-TIME OR PART-TIME JOB? Full-time (30 or more hours per week) Part-time (Less than 30 hours per week)

77 Other job No change 1 Enter Code go to 80

77 NOTES

62 WHAT WAS THE MAIN REASON WHY ... DID NOT LOOK FOR WORK LAST WEEK? Enter code

78

78

63 WAS THERE ANY REASON WHY ... COULD NOT TAKE A JOB LAST WEEK? Enter code

79

79

64 INTERVIEWER CHECK ITEM: *if "No" (never worked) in 50 ... *if upper circle in 52 is marked ... *Otherwise

80

80

EDUCATIONAL ACTIVITIES (if age 65 or over, go to 90)

81

81

80 LAST WEEK, WAS ... ATTENDING A SCHOOL, COLLEGE OR UNIVERSITY? Yes 1 No 2 Go to 90

82

82

81 WAS ... ENROLLED AS A FULL-TIME OR PART-TIME STUDENT? Full time 1 Part time 2

83

83

82 WHAT KIND OF SCHOOL WAS THIS? Enter code

84

84

90 HRD page-line No of person providing the above information Last interview This interview

85

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Code Sheet

Labour Force Survey Questionnaire (Form 05)

Exemplaire français
disponible sur
demande

14
36

- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Going to school
- 4 Could only find part-time work
- 5 Did not want full-time work
- 6 Full-time work under 30 hours per week
- 0 Other – Specify in NOTES

59

- 1 Working
- 2 Keeping house
- 3 Going to school
- 0 Other – DO NOT specify in NOTES

17

- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Weather
- 4 Labour dispute (strike or lockout)
- 5 Layoff, expects to return (**Paid Workers Only**)
- 6 New job started during week, or job terminated (does not expect to return)
- 7 Vacation
- 8 Holiday (legal or religious)
- 9 Working short-time (because of material shortages, plant maintenance or repair, etc.)
- 0 Other – Specify in NOTES

62

- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Going to school
- 4 No longer interested in finding work
- 5 Waiting for recall (to former job)
- 6 Has found new job
- 7 Waiting for replies from employers
- 8 Believes no work available (in area, or suited to skills)
- 9 No reason given
- 0 Other – Specify in NOTES

33

- 1 Own illness or disability
- 2 Personal or family responsibilities (include maternity leave)
- 3 Weather
- 4 Labour dispute (strike or lockout)
- 5 Temporary layoff, expects to return (**Paid Workers Only**)
- 6 New job to start in the future
- 7 Vacation
- 8 Seasonal Business (**Excl. Paid Workers**)
- 0 Other – Specify in NOTES

63

Yes, because of:

- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Going to school
- 4 Already has a job
- 0 Other – Specify in NOTES
- 5 No (Was available for work)

54

- 1 Own illness or disability
- 2 Personal or family responsibilities
Include: Marriage, pregnancy, trip, vacation, family illness, etc.
- 3 Going to school
- 4 Quit job for no specific reason
- 5 Lost job or laid off job (**Paid Workers Only**)
Include: Seasonal job, on-call arrangement, temporary job, dismissal (fired), company moved or went out of business, economic conditions, etc.
- 6 Changed residence
- 7 Dissatisfied with job
Include: Low pay, poor hours, transportation problems, working conditions, conflict with employer or co-workers, no opportunity for advancement, etc.
- 8 Retired
- 0 Other – Specify in NOTES

76

“IN...’S JOB, WAS HE/SHE A PAID WORKER, SELF-EMPLOYED OR AN UNPAID FAMILY WORKER?”

“IN...’S OTHER JOB, WAS HE/SHE A PAID WORKER, SELF-EMPLOYED OR AN UNPAID FAMILY WORKER?”

Worked for Others

- 1 Paid Worker
- 2 Unpaid family worker

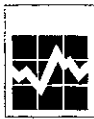
Self-employed

- 3 Incorporated business – **With paid help**
- 4 Incorporated business – **No paid help**
- 5 Not incorporated business – **With paid help**
- 6 Not incorporated business (*include self-employed without a business*) – **No paid help**

77

82

- 1 Primary or secondary school
- 2 Community college, junior college, or CEGEP
- 3 University
- 0 Other – Specify in NOTES



Survey of Household Energy Use, 1993

F 08

Copie française disponible

Confidential when completed

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.



<p>LABEL</p>	<p>Docket No. <input style="width: 50px;" type="text"/> 1</p> <p>Date <input style="width: 50px;" type="text"/> 2</p> <p>Assignment No. <input style="width: 50px;" type="text"/> 3</p> <p>Type of Dwelling <input style="width: 20px;" type="text"/> 4</p> <p>Owner/Renter <input style="width: 50px;" type="text"/> 5</p> <p>Language <input style="width: 20px;" type="text"/> 7</p> <p>Collect. <input style="width: 20px;" type="text"/> 8</p> <p>Telephone Number <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> 9</p> <p>Code <input style="width: 20px;" type="text"/> 10</p> <p>Name (Head of HHLD) <input style="width: 100px;" type="text"/> 11</p>																				
<p>12. COMPLETION STATUS</p> <p>LFS non-interview <input type="radio"/> 1</p> <p>Completed <input type="radio"/> 2</p> <p>Partially completed <input type="radio"/> 3</p> <p>Refused Energy Use Survey <input type="radio"/> 4</p> <p>Other non-response <input type="radio"/> 5</p>																					
<p>13. Now let's move to the Energy Use Survey. Did you receive the Guide we mailed you?</p> <p>yes <input type="radio"/> 6</p> <p>no <input type="radio"/> 7</p> <p>don't know <input type="radio"/> 8</p>																					
<p>14. Who would be the best person to answer questions about your appliances, heating and cooling?</p> <p>LFS respondent <input type="radio"/> 1</p> <p>Someone else <input type="radio"/> 2</p> <p style="text-align: right; margin-right: 50px;"><input style="width: 40px; height: 15px;" type="text"/></p> <p style="text-align: right; margin-right: 50px;"><i>write name</i></p> <p style="text-align: right; margin-right: 50px;">HRD page line no. Item 31, F03</p>																					
<p>15. If not ready for interview, make an appointment and remind the respondent to complete the Guide.</p>																					
<p>16. RECORD OF CALLS / APPOINTMENTS</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%; text-align: center;">Date</th> <th style="width: 10%; text-align: center;">Time</th> <th style="width: 50%; text-align: center;">Comments</th> <th style="width: 30%; text-align: center;">Call back for:</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">2</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">3</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">4</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Date	Time	Comments	Call back for:	1				2				3				4			
Date	Time	Comments	Call back for:																		
1																					
2																					
3																					
4																					
<p>17. For those who received the Guide:</p> <p>Have you completed the Guide? yes <input type="radio"/> 1 no <input type="radio"/> 2</p> <p>Please get the Guide.</p>																					
<p>18. START TIME <input style="width: 50px;" type="text"/></p>																					
<p>19. This month's supplement is being done for the Department of Energy, Mines and Resources and will help to plan energy efficiency programs. While your participation is voluntary, your answers are important and will be kept confidential under the Statistics Act.</p>																					

A. APPLIANCES

20. I'm starting with appliances. Consider those used at least once in the past 12 months.

Refrigerator

21. How many refrigerators do you use?

- one 1
- two 2
- more than two 3
- none 4 **▶ Go to 28**

Note: if more than one fridge, determine the main and secondary by the frequency of use.

22. What are the make and model number of your (main/second) refrigerator?
(Code "999" for "don't know" in Make or Model)

*Guide

Main

Make 1

OR Other (Specify) 2

Model number 3

Second

Make 4

OR Other (Specify) 5

Model number 6

23. How old is your (main/second) refrigerator? (Round up)

*Guide

- | | Main | Second |
|------------------|--------------------------|--------------------------|
| 1 year or less | <input type="radio"/> 01 | <input type="radio"/> 12 |
| 2 years | <input type="radio"/> 02 | <input type="radio"/> 13 |
| 3 years | <input type="radio"/> 03 | <input type="radio"/> 14 |
| 4 years | <input type="radio"/> 04 | <input type="radio"/> 15 |
| 5 years | <input type="radio"/> 05 | <input type="radio"/> 16 |
| 6 - 7 years | <input type="radio"/> 06 | <input type="radio"/> 17 |
| 8 - 10 years | <input type="radio"/> 07 | <input type="radio"/> 18 |
| 11 - 15 years | <input type="radio"/> 08 | <input type="radio"/> 19 |
| 16 - 20 years | <input type="radio"/> 09 | <input type="radio"/> 20 |
| 21 years or more | <input type="radio"/> 10 | <input type="radio"/> 21 |
| don't know | <input type="radio"/> 11 | <input type="radio"/> 22 |

24. What kind of door(s) does your (main/second) refrigerator have? Is it...?

- | | Main | Second |
|---|--------------------------|--------------------------|
| single | <input type="radio"/> 01 | <input type="radio"/> 06 |
| side by side | <input type="radio"/> 02 | <input type="radio"/> 07 |
| top & bottom with freezer on top | <input type="radio"/> 03 | <input type="radio"/> 08 |
| top & bottom with freezer on the bottom | <input type="radio"/> 04 | <input type="radio"/> 09 |
| three doors | <input type="radio"/> 05 | <input type="radio"/> 10 |

25. What is the size of your (main/second) refrigerator? Is it...?

*Guide

- | | Main | Second |
|-----------------------------------|--------------------------|--------------------------|
| bar less than 6.5 cu. ft. | <input type="radio"/> 11 | <input type="radio"/> 17 |
| small 6.5 - 12.4 cu. ft. | <input type="radio"/> 12 | <input type="radio"/> 18 |
| medium 12.5 - 16.4 cu. ft. | <input type="radio"/> 13 | <input type="radio"/> 19 |
| large 16.5 - 20.0 cu. ft. | <input type="radio"/> 14 | <input type="radio"/> 20 |
| very large more than 20.0 cu. ft. | <input type="radio"/> 15 | <input type="radio"/> 21 |
| don't know | <input type="radio"/> 16 | <input type="radio"/> 22 |

26. Is your (main/second) refrigerator frost-free (automatically defrosted) or manually defrosted?

*Guide

- | | Main | Second |
|----------------------|--------------------------|--------------------------|
| frost-free | <input type="radio"/> 01 | <input type="radio"/> 06 |
| manually defrosted | <input type="radio"/> 02 | <input type="radio"/> 07 |
| no freezer in fridge | <input type="radio"/> 03 | <input type="radio"/> 08 |
| don't know | <input type="radio"/> 04 | <input type="radio"/> 09 |

27. Does your refrigerator have an automatic ice-maker in the door?

- | | Main | Second |
|-----|-------------------------|-------------------------|
| yes | <input type="radio"/> 1 | <input type="radio"/> 3 |
| No | <input type="radio"/> 2 | <input type="radio"/> 4 |

Cooking Appliances

26. Now moving on to your cooking appliances, do you use a...

regular stove?
(Range) 1

built-in oven with
separate cook top? 2

▶ If separate cook-top, is it...
electric? 4
natural gas? 5

other?
(Specify) 3

 ▶ Go to 30

29. What are the make and model of your (stove/oven)?
(Code "999" for "don't know" in Make or Model)

*Guide

Make 6

OR Other
(Specify) 7

Model
number 8

30. How old is your (stove/oven)?

*Guide

- 1 year or less 01 5 - 10 years 07
- 2 years 02 11 - 15 years 08
- 3 years 03 16 - 20 years 09
- 4 years 04 21 years or more 10
- 5 years 05
- 6 - 7 years 06 don't know 11

31. What fuel(s) does your (stove/oven) use?
(Mark one only)

- electricity only 1
- electricity and natural gas 2
- natural gas only 3
- oil 4
- wood 5 ▶ Go to 35
- propane 6
- other 7

32. Does your oven have the self-cleaning feature?

*Guide

- yes 1
- no 2
- don't know 3 ▶ Go to 34

33. How often is the self-cleaning feature used? Is it used...?

*Guide

- once a year or less 4
- every 4-6 months 5
- every 2-3 months 6
- at least once a month 7
- never 8

34. Is it a convection oven, that is, an oven with a fan to circulate the hot air?

*Guide

- yes 1
- no 2
- don't know 3

35. Do you use a range hood or exhaust fan in your kitchen?

- yes 4
- no 5
- don't know 6 ▶ Go to 37

36. Does it have an outdoor vent or a charcoal filter only?

- an outdoor vent 7
- a charcoal filter only 8
- don't know 9

37. Do you use a microwave oven in your (house/apartment)?

- yes 1
- no 2 ▶ Go to 41

38. How often is your microwave used for reheating?
Is it...

*Guide

- everyday 3
- a few times a week 4
- once a week or less 5
- never 6
- don't know 7

39. And for defrosting?

*Guide

- everyday 1
- a few times a week 2
- once a week or less 3
- never 4
- don't know 5

40. And for cooking?
*Guide

everyday 1

a few times a week 2

once a week or less 3

never 4

don't know 5

Dishwasher

41. Do you use a dishwasher in your (house/apartment)?

yes 1

no 2 ▶ Go to 49

42. What are the make and model of your dishwasher? (Code "999" for "don't know" in Make or Model)

*Guide

Make 1

OR Other (Specify) 2

Model number 3

43. How old is your dishwasher? (Round up)

*Guide

1 year or less 01 8 - 10 years 07

2 years 02 11 - 15 years 08

3 years 03 16 - 20 years 09

4 years 04 21 years or more 10

5 years 05

6 - 7 years 06 don't know 11

44. Is it built-in? (Permanently installed)

yes 1

no 2

don't know 3

45. Is it a compact or standard size dishwasher?

*Guide

compact (mini) 4

standard (full size) 5

don't know 6

46. Does your dishwasher have a switch that allows you to turn off the heat and to dry with unheated air? ("energy-saver")

*Guide

yes 1

no 2

▶ is it heat dry only?

yes 4

no 5

don't know 6

don't know 3

47. Do you usually dry the dishes with ...?

*Guide

heat on? (hot air) 1

heat off? (air-dry, door closed) 2

open door? (to let the dishes dry naturally) 3

don't know 4

48. How many loads of dishes do you do in an average week? (Mark one only)

*Guide

less than 1 01 6 07

1 02 7 08

2 03 8 - 13 09

3 04 14 or more 10

4 05

5 06 don't know 11

Freezer

49. How many freezers do you use, separate from your refrigerator(s)?

one 1

two 2

more than two 3

none 4 ▶ Go to 54

50. What are the make and model number of your (main/second) freezer?
(Code "999" for "don't know" in Make or Model)

*Guide

Main

Make 1

OR Other (Specify) 2

Model number 3

Second

Make 4

OR Other (Specify) 5

Model number 6

51. How old is your (main/second) freezer? (Round up)

*Guide

	Main	Second
1 year or less	01 <input type="radio"/>	13 <input type="radio"/>
2 years	02 <input type="radio"/>	14 <input type="radio"/>
3 years	03 <input type="radio"/>	15 <input type="radio"/>
4 years	04 <input type="radio"/>	16 <input type="radio"/>
5 years	05 <input type="radio"/>	17 <input type="radio"/>
6-7 years	06 <input type="radio"/>	18 <input type="radio"/>
8-10 years	07 <input type="radio"/>	19 <input type="radio"/>
11-15 years	08 <input type="radio"/>	20 <input type="radio"/>
16-20 years	09 <input type="radio"/>	21 <input type="radio"/>
21-25 years	10 <input type="radio"/>	22 <input type="radio"/>
26 years or more	11 <input type="radio"/>	23 <input type="radio"/>
don't know	12 <input type="radio"/>	24 <input type="radio"/>

52. Is your (main/second) freezer a chest or upright?

	Main	Second
a) chest (top opening)	01 <input type="radio"/>	05 <input type="radio"/>
b) upright (front opening)		
Is it manual defrost?	02 <input type="radio"/>	07 <input type="radio"/>
frost-free?	03 <input type="radio"/>	08 <input type="radio"/>
don't know	04 <input type="radio"/>	09 <input type="radio"/>
c) don't know	06 <input type="radio"/>	10 <input type="radio"/>

53. What is the size of your (main/second) freezer? Is it

*Guide

	Main	Second
very small? (less than 7.0 cu.ft.)	11 <input type="radio"/>	17 <input type="radio"/>
small? (7.0-13.9 cu.ft.)	12 <input type="radio"/>	18 <input type="radio"/>
medium? (14.0-17.9 cu.ft.)	13 <input type="radio"/>	19 <input type="radio"/>
large? (18.0-22.9 cu.ft.)	14 <input type="radio"/>	20 <input type="radio"/>
very large? (23 cu.ft. or more)	15 <input type="radio"/>	21 <input type="radio"/>
don't know	16 <input type="radio"/>	22 <input type="radio"/>

Washing machine

54. Do you use a washing machine in your (house/apartment)? (Include those solely for the use of your household)

yes 1
no 2 **Go to 67**

55. Is your washing machine...

an automatic washer? 3
a washer/dryer combination? 4 **Go to 59**
(single unit with the dryer above the washer)
a wringer washer? 5
other? 6 **Go to 64**

56. What are the make and model of your washing machine? (Code "999" for "don't know" in Make or Model)

*Guide

Make 7

OR Other (Specify) 8

Model number 9

57. How old is your washing machine? (Round up)

*Guide

1 year or less	01 <input type="radio"/>	8-10 years	07 <input type="radio"/>
2 years	02 <input type="radio"/>	11-15 years	08 <input type="radio"/>
3 years	03 <input type="radio"/>	16-20 years	09 <input type="radio"/>
4 years	04 <input type="radio"/>	21 years or more	10 <input type="radio"/>
5 years	05 <input type="radio"/>		
6-7 years	06 <input type="radio"/>	don't know	11 <input type="radio"/>

58. What size (tub capacity) is the washing machine? Is it

*Guide

mini (compact) 1
standard (full size) 2
large (extra capacity) 3
don't know 4

59. What water temperature options do you have for WASHING?

*Guide

	yes	no	don't know
hot	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
warm	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
cold	7 <input type="radio"/>	8 <input type="radio"/>	9 <input type="radio"/>

60. And for RINSING?
*Guide

	yes	no	don't know
hot	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
warm	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
cold	7 <input type="radio"/>	8 <input type="radio"/>	9 <input type="radio"/>

65. And in SUMMER?
(Mark one only)
*Guide

less than 1	01 <input type="radio"/>	6	07 <input type="radio"/>
1	02 <input type="radio"/>	7	08 <input type="radio"/>
2	03 <input type="radio"/>	8 - 13	09 <input type="radio"/>
3	04 <input type="radio"/>	14 or more	10 <input type="radio"/>
4	05 <input type="radio"/>		
5	06 <input type="radio"/>	don't know	11 <input type="radio"/>

61. What water temperature do you use for most of your washing?
(Mark one only)
*Guide

hot	1 <input type="radio"/>
warm	2 <input type="radio"/>
cold	3 <input type="radio"/>
don't know	4 <input type="radio"/>

Clothes dryer

66. INTERVIEWER CHECK ITEM:

If "washer/dryer combination" in 55 Go to 68

Otherwise continue

62. And for rinsing?
(Mark one only)
*Guide

hot	5 <input type="radio"/>
warm	6 <input type="radio"/>
cold	7 <input type="radio"/>
don't know	8 <input type="radio"/>

67. Do you use a clothes dryer in your house or apartment?

yes	3 <input type="radio"/>
no	4 <input type="radio"/> Go to 75

63. Can you choose the water level in your washing machine depending on your needs?
*Guide

yes	1 <input type="radio"/>
no	2 <input type="radio"/>
don't know	3 <input type="radio"/>

Do you use this feature?

yes	4 <input type="radio"/>
no	5 <input type="radio"/>
don't know	6 <input type="radio"/>

68. What are the make and model of the clothes dryer?
(Code "999" for "don't know" in Make or Model)
*Guide

Make 5

OR Other (Specify) 6

Model number 7

64. On an average week in WINTER, how many LOADS of laundry do you wash? (Mark one only) *Guide

less than 1	01 <input type="radio"/>	6	07 <input type="radio"/>
1	02 <input type="radio"/>	7	08 <input type="radio"/>
2	03 <input type="radio"/>	8 - 13	09 <input type="radio"/>
3	04 <input type="radio"/>	14 or more	10 <input type="radio"/>
4	05 <input type="radio"/>		
5	06 <input type="radio"/>	don't know	11 <input type="radio"/>

69. What size (drum size) is your clothes dryer? Is it...
*Guide

mini (compact)	1 <input type="radio"/>
standard (full size)	2 <input type="radio"/>
large (extra capacity)	3 <input type="radio"/>
don't know	4 <input type="radio"/>

70. How old is your clothes dryer? (Round up)
*Guide

1 year or less	01 <input type="radio"/>	8 - 10 years	07 <input type="radio"/>
2 years	02 <input type="radio"/>	11 - 15 years	08 <input type="radio"/>
3 years	03 <input type="radio"/>	16 - 20 years	09 <input type="radio"/>
4 years	04 <input type="radio"/>	21 years or more	10 <input type="radio"/>
5 years	05 <input type="radio"/>		
6 - 7 years	06 <input type="radio"/>	don't know	11 <input type="radio"/>

71. Does your clothes dryer use...

electricity? 1

natural gas? 2

other fuel? 3

don't know 4

72. Does your clothes dryer have the following options?
*Guide

	yes	no	don't know
a) a manual timer? <i>(shuts off dryer after pre-selected time)</i>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
b) an automatic shut off when the clothes are dry? <i>(auto-dry)</i>	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
c) cool-down or permapress setting? <i>(cold air used in the last few minutes of the cycle)</i>	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9

73. And which of them do you regularly use?
(Mark all that apply)
*Guide

manual timer 1

automatic shut off 2

cool-down or permapress setting 3

don't know 4

74. On an average week in WINTER, how many LOADS of laundry do you dry in the clothes dryer? *(Do not count loads if heat was not used)*
*Guide

less than 1	<input type="radio"/> 01	<input type="radio"/> 6	<input type="radio"/> 07
1	<input type="radio"/> 02	<input type="radio"/> 7	<input type="radio"/> 08
2	<input type="radio"/> 03	<input type="radio"/> 8 - 13	<input type="radio"/> 09
3	<input type="radio"/> 04	<input type="radio"/> 14 or more	<input type="radio"/> 10
4	<input type="radio"/> 05		
5	<input type="radio"/> 06	don't know	<input type="radio"/> 11

75. And in SUMMER?
*Guide

less than 1	<input type="radio"/> 12	<input type="radio"/> 6	<input type="radio"/> 18
1	<input type="radio"/> 13	<input type="radio"/> 7	<input type="radio"/> 19
2	<input type="radio"/> 14	<input type="radio"/> 8 - 13	<input type="radio"/> 20
3	<input type="radio"/> 15	<input type="radio"/> 14 or more	<input type="radio"/> 21
4	<input type="radio"/> 16		
5	<input type="radio"/> 17	don't know	<input type="radio"/> 22

Other appliances

76. Now, I'd like to ask about other appliances used by your household. How many of the following are used?
(Enter "0" if not applicable)

How many?

colour TV set	<input type="text"/> 01
black & white TV set	<input type="text"/> 02
VCR <i>(video cassette recorder)</i>	<input type="text"/> 03
CD player <i>(compact disk)</i>	<input type="text"/> 04
other separate stereo system <i>(exclude portable stereos, "walkmans", etc.)</i>	<input type="text"/> 05
computer	<input type="text"/> 06
electric blanket	<input type="text"/> 07
waterbed heater	<input type="text"/> 08
portable humidifier	<input type="text"/> 09
portable dehumidifier	<input type="text"/> 10
car block heater	<input type="text"/> 11
interior car warmer	<input type="text"/> 12
water cooler	<input type="text"/> 13
fish tank with pump, heater, and light	<input type="text"/> 14
bathroom exhaust fans	<input type="text"/> 15

77. INTERVIEWER CHECK ITEM:
If item 10 on LABEL is 'D' **Go to SECTION D, 143, page 14**
Otherwise continue 2

B. HOUSE HEATING

Let's move on now to your heating equipment.

Heat Pump

78. Do you have a heat pump?
*Guide

yes 3

no 4 **Go to 84**

don't know 5

79. Is your heat pump air source or ground source?
*Guide

air source? 6

ground source?
(earth energy system) 7

don't know 8

80. How old is it? (Round up)
 *Guide

1 year or less	01 <input type="radio"/>	8 - 10 years	07 <input type="radio"/>
2 years	02 <input type="radio"/>	11 - 15 years	08 <input type="radio"/>
3 years	03 <input type="radio"/>	16 - 20 years	09 <input type="radio"/>
4 years	04 <input type="radio"/>	21 years or more	10 <input type="radio"/>
5 years	05 <input type="radio"/>		
6 - 7 years	06 <input type="radio"/>	don't know	11 <input type="radio"/>

81. How much power does your heat pump have?
 *Guide

1. BTU/hr

OR

2. ton(s)

don't know

82. Do you use a back-up furnace with your heat pump?
 *Guide

yes

no **Go to 89**

don't know

83. What fuel does this furnace use?
 *Guide

natural gas	1 <input type="radio"/>	wood	5 <input type="radio"/>
oil	2 <input type="radio"/>	coal	6 <input type="radio"/>
electricity	3 <input type="radio"/>	other	7 <input type="radio"/>
propane	4 <input type="radio"/>	don't know	8 <input type="radio"/>

GO TO 89

Principal Heating

84. What is the heating equipment that heats most of the house?
 Is it
 (Mark one only)
 *Guide

furnace with hot air vents?	How many?	<input type="text"/>
boiler (furnace) with hot water radiators?		<input type="text"/>
wood stove?		<input type="text"/>
electric baseboards?	4 <input type="radio"/>	Go to 88
electric radiant heating	5 <input type="radio"/>	
other	6 <input type="radio"/>	
don't know	7 <input type="radio"/>	Go to 89

85. What fuel or fuels does your heating system use? If it uses two fuels, that is, a dual fuel system, please mention both.
 *Guide

Note: If there are two fuels, follow the questions for the first fuel indicated in the list (see interviewers manual).

natural gas	1 <input type="radio"/>	
oil	2 <input type="radio"/>	
electricity	3 <input type="radio"/>	Go to 87
wood	4 <input type="radio"/>	
propane	5 <input type="radio"/>	
coal	6 <input type="radio"/>	Go to 87
other	7 <input type="radio"/>	
don't know	8 <input type="radio"/>	

86. What is the efficiency rating of the heating equipment?
 *Guide

standard (50 - 65%)	1 <input type="radio"/>
medium (75 - 80%)	2 <input type="radio"/>
high (90% or higher)	3 <input type="radio"/>
don't know	4 <input type="radio"/>

87. What are the make and model of your (furnace/stove)?
 (Code "999" for "don't know" in Make or Model)
 *Guide

Make 5.

OR Other (Specify) 6.

Model number 7.

88. How old is the heating equipment? (Round up)
 *Guide

1 year or less	01 <input type="radio"/>	8 - 10 years	07 <input type="radio"/>
2 years	02 <input type="radio"/>	11 - 15 years	08 <input type="radio"/>
3 years	03 <input type="radio"/>	16 - 20 years	09 <input type="radio"/>
4 years	04 <input type="radio"/>	21 years or more	10 <input type="radio"/>
5 years	05 <input type="radio"/>		
6 - 7 years	06 <input type="radio"/>	don't know	11 <input type="radio"/>

89. Do any of the following special features complement your heating system?
 *Guide

	yes	no	don't know
a) central electronic air filter	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b) central humidifier	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
c) central dehumidifier	7 <input type="radio"/>	8 <input type="radio"/>	9 <input type="radio"/>

90. Do you use a programmable thermostat with a timer to change the temperature automatically?
 *Guide
 yes 1
 no 2
 don't know 3

Fireplace

91. Do you have a wood burning fireplace in your home?
 林 yes 4 ► How many?
 no 5 ► Go to 96

Note: If more than one fireplace, ask about the one used most often.

92. Does it have glass doors?
 yes 1
 no 2
 don't know 3

93. Does it have a fireplace insert?
 yes 4
 no 5
 don't know 6

94. How old is it?
 *Guide
 0 - 5 years 1
 6 - 10 years 2
 11 years or more 3
 don't know 4

95. About how often do you use the fireplace during the heating season? Is it...
 (Mark one only)
 never 5
 not every week 6
 1 - 3 times per week 7
 more than 3 times per week 8
 don't know 9

96. Do you have a gas burning fireplace in your home?
 yes 1 ► How many?
 no 2

97. Do you use any of the following types of supplementary heating...
 (Mark all that apply)
 *Guide

A) wood stove(s)?
 林 yes 01
 no 02 ► Go to 97B
 don't know 03

i) How old is it?
 0 - 5 years 04
 6 - 10 years 05
 11 years or more 06
 don't know 07

ii) What area is it heating?
 whole house 08
 basement 09
 garage 10
 attic 11
 solarium/sunroom 12
 other 13

iii) On average, how often do you use it during the heating season? Is it...
 more than 4 hours per day? 14
 between 1 and 4 hours per day? 15
 less than 1 hour per day but more than 1 hour per week? 16
 less than 1 hour per week? 17

B) electric baseboard(s)?
 yes 18
 no 19 ► Go to 97C
 don't know 20

i) What area(s) is it (are they) heating?
 (Mark all that apply)
 whole house 21
 basement 22
 garage 23
 attic 24
 solarium/sunroom 25
 other 26

C) portable heater(s)?
 yes 27
 no 28 ► Go to 97D
 don't know 29

ii) What area(s) is it (are they) heating?
 (Mark all that apply)
 whole house 30
 basement 31
 garage 32
 attic 33
 solarium/sunroom 34
 other 35

iii) What fuel is used?
 electricity 36
 natural gas 37
 oil 38
 other 39

D) any other supplementary heating?

yes 40

no 41 **Go to 98**

don't know 42

i) What area(s) is it (are they) heating?

(Mark all that apply)

whole house 43

basement 44

garage 45

attic 46

solarium/sunroom 47

other 48

ii) What fuel is used?

electricity 49

natural gas 50

oil 51

other 52

98. INTERVIEWER CHECK ITEM:

If "no" or "don't know" in supplementary heating in Q.97 A, B, C and D 1 **Go to 100**

Otherwise continue 2

99. During the last heating season, would you say you used your supplementary heating system ...

*Guide

less than 25% of the time? 3

25% to 75% of the time? 4

more than 75% of the time? 5

don't know 6

100. INTERVIEWER CHECK ITEM:

棒 If 85 is "wood" or 91 is "yes" (wood fireplace) or 97A is "yes" (supplementary wood stove) continue 7

Otherwise 8 **Go to 103**

101. How many cords of wood do you use in an average year?

*Guide

less than 1 1

1 - 3 2

4 - 6 3

more than 6 4

don't know 5 **Go to 103**

102. What type of cord is it?

*Guide

face or stove cords (less than 4 ft. X 4 ft. X 8 ft.) 6

full (bush) cord (4 ft. X 4 ft. X 8 ft.) 7

other 8

don't know 9

103. At what temperature do you usually maintain most of your home during the heating season: . . .

*Guide

A) during the daytime (6am - 6pm)

16°C (61°F) or less 01

17°C (62 - 63°F) 02

18°C (64 - 65°F) 03

19°C (66 - 67°F) 04

20°C (68 - 69°F) 05

21°C (70 - 71°F) 06

22°C (72°F) 07

23°C (73 - 74°F) 08

24°C (75°F) or more 09

don't know 10

B) during the evening (6pm - 10pm)

16°C (61°F) or less 11

17°C (62 - 63°F) 12

18°C (64 - 65°F) 13

19°C (66 - 67°F) 14

20°C (68 - 69°F) 15

21°C (70 - 71°F) 16

22°C (72°F) 17

23°C (73 - 74°F) 18

24°C (75°F) or more 19

don't know 20

C) over night (10pm - 6am)

16°C (61°F) or less 21

17°C (62 - 63°F) 22

18°C (64 - 65°F) 23

19°C (66 - 67°F) 24

20°C (68 - 69°F) 25

21°C (70 - 71°F) 26

22°C (72°F) 27

23°C (73 - 74°F) 28

24°C (75°F) or more 29

don't know 30

C. HOUSE FEATURES and CONDITION

104. How many storeys, excluding the basement, does your house have?
- *Guide
- one storey 01
 - one and one half storeys 02
 - two storeys 03
 - two and one half storeys 04
 - three storeys 05
 - split level 06
 - bi-level (split entry) 07
 - other 08

Exterior

105. What are most of the exterior walls of your house made of? (Mark one only)
- aluminum/steel siding 01
 - brick 02
 - stucco 03
 - vinyl siding 04
 - stone/concrete 05
 - wood 06
 - log 07
 - asbestos shingle 08
 - other 09
 - don't know 10

106. What other material, if any, is used on the exterior walls? (Mark one only)
- aluminum/steel siding 11
 - brick 12
 - stucco 13
 - vinyl siding 14
 - stone/concrete 15
 - wood 16
 - log 17
 - asbestos shingle 18
 - other 19
 - none 20
 - don't know 21

107. To your knowledge, have any improvements been made to the insulation of the walls, excluding siding?

*Guide

yes 01

- a) Was the insulation added to the outside or put inside the wall?
- outside 04
 - inside 05
 - both 06
 - don't know 07
- b) When?
- '77 or earlier 08
 - '78 - '83 09
 - '84 or later 10
 - don't know 11

no 02

don't know 03

108. To your knowledge, have any improvements been made to the insulation of the roof or the attic, excluding replacement of roof?

*Guide

yes 10

- When?
- '77 or earlier 40
 - '78 - '83 50
 - '84 or later 60
 - don't know 70

no 20

don't know 30

109. Approximately, what is the total HEATED living area of your house, excluding basement and garage?

*Guide

- less than 600 sq. ft. 01
- 601 - 1,000 02
- 1,001 - 1,500 03
- 1,501 - 2,000 04
- 2,001 - 2,500 05
- 2,501 sq. ft. or more 06

OR

square meters 07

OR Inside measurements:

08 length ft. width ft.

OR

09 length m. width m.

OR

Total heated rooms 10

(Total number of heated rooms excluding basement and bathrooms)

don't know 11


Basement

110. Does this house have a... (Mark all that apply)


- full basement? 10
- partial basement? 20
- crawl space? 30
- no basement? 40 Go to 118

111. What is the square footage of your basement or crawl space?

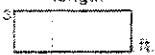
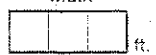
*Guide

1  sq. ft.

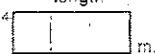
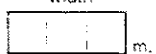
OR

2  sq. m.

OR

3 length  ft. width  ft.

OR

4 length  m. width  m.

don't know 5

116. Is the basement usually heated?

yes 1

no 2

don't know 3

Go to 118

117. How much of the basement area is heated? (Mark one only)

the whole basement 4

more than one half 5

about one half 6

less than half 7

don't know 8

112. Are the basement walls (foundation) insulated on the inside?

yes 1

Are they...
 fully insulated? 4
 partly insulated? 5
 don't know? 6

no 2

don't know 3

Go to 114

Garage

118. Do you have a heated garage solely for the use of your household?

yes 1

no 2

Go to 122

113. To your knowledge, have any improvements been made to the insulation of the basement walls?

*Guide

yes 1

When?
 '77 or earlier 4
 '78-'83 5
 '84 or later 6
 don't know 7

no 2

don't know 3

119. Is your garage attached to your house?

yes 3

no 4

Go to 122

120. Is your garage under a heated room?

yes 5

no 6

114. Not including carpeting or flooring, is the basement floor insulated?

yes 1

Is it...
 fully insulated? 4
 partly insulated? 5
 don't know 6

no 2

don't know 3

Go to 116

121. Does it have an insulated door?

yes 1

no 2

don't know 3

115. To your knowledge, have any improvements been made to the insulation of the basement floor?

*Guide

yes 1

When?
 '77 or earlier 4
 '78-'83 5
 '84 or later 6
 don't know 7

no 2

don't know 3

Attic

122. Do you have...

a finished attic 4

an unfinished attic 5

a crawl space (not enough room to stand) 6

no attic 7

don't know 8

Solarium/Sunroom

123. Do you have a heated solarium or sunroom?

- yes 1
- no 2

Doors

124. Moving on to doors that lead to outside or unheated areas, do you have any...

*Guide

a) wood doors?

- yes 1

How many... with storm doors?	<input type="text"/>
without storm doors?	<input type="text"/>

- no 2

b) metal doors?

- yes 3

How many... with storm doors?	<input type="text"/>
without storm doors?	<input type="text"/>

- no 4

c) patio doors?

- yes 5 How many?
- no 6

d) other exterior doors?

- yes 7 How many?
- no 8

125. Do you feel there are any air leaks or drafts around your doors?

- yes 1

Do they all leak?	<input type="text"/>
yes	<input type="text"/>
no	<input type="text"/>

- no 2
- don't know 3

126. Were any of your exterior doors replaced?

*Guide

- yes 1

When? (Most recent replacement)	
'77 or earlier	<input type="text"/>
'78 - '83	<input type="text"/>
'84 or later	<input type="text"/>
don't know	<input type="text"/>

- no 2
- don't know 3

127. To your knowledge, have any improvements been made to the weatherstripping or caulking of the doors?

*Guide

- yes 01

a) When?	
'77 or earlier	<input type="text"/>
'78 - '83	<input type="text"/>
'84 or later	<input type="text"/>
don't know	<input type="text"/>
b) Was it done by a professional?	
yes	<input type="text"/>
no	<input type="text"/>
don't know	<input type="text"/>

- no 02
- don't know 03

Windows

128. Do you have any skylights? (Windows in the roof)

- yes 1

How many are...	<input type="text"/>
triple pane?	<input type="text"/>
double pane?	<input type="text"/>
single pane?	<input type="text"/>
don't know	<input type="text"/>

- no 2

129. In the heated part of your house, do you have any of the following?

*Guide

a) triple pane windows?

- yes 1

How many are... picture windows? (oversized)	<input type="text"/>
other size?	<input type="text"/>

- no 2

b) double pane windows?

- yes 3

How many are... picture windows? (oversized)	<input type="text"/>
other size?	<input type="text"/>

- no 4

c) single pane windows with storm windows?

- yes 5

How many are... picture windows? (oversized)	<input type="text"/>
other size?	<input type="text"/>

- no 6

d) single pane windows without storm windows?

- yes 7

How many are... picture windows? (oversized)	<input type="text"/>
other size?	<input type="text"/>

- no 8

130. Excluding storm windows, what are most of your window frames made of?

metal (aluminum/steel) 1

wood 2

fibre glass/vinyl (PVC) 3

other 4

don't know 5

131. Do you feel there are any air leaks or drafts around your windows?

yes 1

no 2

don't know 3

▶ Do they ALL leak?

yes 4

no 5

132. Have any of your windows been replaced?

*Guide

yes 1

no 2

don't know 3

▶ When?
(Most recent replacement)

'77 or earlier 4

'78 - '83 5

'84 or later 6

don't know 7

133. Have any improvements been made to the caulking or weatherstripping of the windows?

*Guide

yes 01

no 02

don't know 03

▶ a) When?

'77 or earlier 04

'78 - '83 05

'84 or later 06

don't know 07

b) Was it done by a professional?

yes 08

no 09

don't know 10

134. Do you have a central ventilation system, also known as an air exchanger, which provides fresh air for the entire house?

*Guide

yes 01

no 02

don't know 03

▶ a) Does it have heat recovery?
(heat exchanger)

yes 04

no 05

don't know 06

b) When is it used?

all year 07

winter only 08

summer only 09

occasionally 10

never 11

135. Do you use a ...

yes no don't know

central vacuum cleaner? 1 2 3

septic pump? 4 5 6

water softener? 7 8 9

Swimming Pool

136. Do you have a swimming pool solely for the use of your household? (Exclude children's wading pool)

yes 1

no 2 ▶ Go to 141

137. Do you use a pool heater?

yes 3

no 4 ▶ Go to 141

138. What kind of pool heater do you use?

oil heater 1

gas heater 2

propane heater 3

electric heater 4

pool heat pump 5

solar panel 6

don't know 7

139. Do you use a timer with your pool heater?

yes 1

no 2

140. Do you use a solar blanket?

yes 3

no 4

Hot tub, Sauna

141. Do you have a hot tub/jacuzzi/whirlpool?

yes 5

no 6

▶ How many ...

indoor?

outdoor?

142. Do you have a sauna?

yes 7

no 8

GO TO SECTION E, 161, page 16

D. APARTMENT HEATING and SIZE

143. Approximately, what is the total HEATED living area of your apartment?

*Guide

- less than 600 sq. ft. 01
- 601 - 1000 02
- 1001 - 1500 03
- 1501 - 2000 04
- 2001 - 2500 05
- 2501 sq. ft. or more 06

OR

squares meters 07

OR inside measurements:

length 08 ft. width ft.

OR

length 09 m. width m.

OR

Total heated rooms 10
(Do not include bathrooms)

don't know 11

144. What is the heating equipment that heats most of your apartment?
Is it... (Mark one only)

*Guide

- hot air vents? 1
- hot water radiators? 2
- wood stove? 3
- electric baseboards? 4 Go to 146
- electric radiant heating? 5 Go to 146
- other? 6

145. What fuel or fuels does it use?
(If it uses two fuels, a dual fuel system, mark both fuels)

*Guide

- electricity 1 propane 5
- natural gas 2 coal 6
- oil 3 other 7
- wood 4 don't know 8

146. Do you have control over the temperature in your apartment?
(Exclude opening windows)

- yes 1
- no 2 Go to 148
- don't know 3

147. At what temperature do you usually maintain your apartment during the heating season...

*Guide

A) during the daytime (8am - 6pm)

- 16°C (61°F) or less 01
- 17°C (62 - 63°F) 02
- 18°C (64 - 65°F) 03
- 19°C (66 - 67°F) 04
- 20°C (68 - 69°F) 05
- 21°C (70 - 71°F) 06
- 22°C (72°F) 07
- 23°C (73 - 74°F) 08
- 24°C (75°F) or more 09
- don't know 10

B) during the evening (6pm - 10pm)

- 16°C (61°F) or less 11
- 17°C (62 - 63°F) 12
- 18°C (64 - 65°F) 13
- 19°C (66 - 67°F) 14
- 20°C (68 - 69°F) 15
- 21°C (70 - 71°F) 16
- 22°C (72°F) 17
- 23°C (73 - 74°F) 18
- 24°C (75°F) or more 19
- don't know 20

C) over night (10pm - 6am)

- 16°C (61°F) or less 21
- 17°C (62 - 63°F) 22
- 18°C (64 - 65°F) 23
- 19°C (66 - 67°F) 24
- 20°C (68 - 69°F) 25
- 21°C (70 - 71°F) 26
- 22°C (72°F) 27
- 23°C (73 - 74°F) 28
- 24°C (75°F) or more 29
- don't know 30

148. Do you have a wood burning fireplace in your apartment?

- yes 1 How many?
- no 2 Go to 153

Note: If more than one woodburning fireplace, ask about the one used most often.

149. Does it have glass doors?

- yes 3
- no 4
- don't know 5

150. Does it have a fireplace insert?

- yes 6
- no 7
- don't know 8

<p>151. How old is it? (Mark one only)</p> <p>*Guide</p> <p>0 - 5 years 1 <input type="radio"/></p> <p>6 - 10 years 2 <input type="radio"/></p> <p>11 years or more 3 <input type="radio"/></p> <p>don't know 4 <input type="radio"/></p>	<p>155. INTERVIEWER CHECK ITEM:</p> <p>If "NO" or "don't know" in supplementary heating in Q. 154 A, B, C and D 1 <input type="radio"/> ► Go to 157</p> <p>Otherwise continue 2 <input type="radio"/></p>
<p>152. About how often do you use the fireplace during the heating season? Is it... (Mark one only)</p> <p>never 5 <input type="radio"/></p> <p>not every week? 6 <input type="radio"/></p> <p>1 - 3 times per week? 7 <input type="radio"/></p> <p>more than 3 times per week 8 <input type="radio"/></p> <p>don't know 9 <input type="radio"/></p>	<p>156. During the last heating season, would you say you used your supplementary heating system... *</p> <p>*Guide</p> <p>less than 25% of the time? 1 <input type="radio"/></p> <p>25% to 75% of the time? 2 <input type="radio"/></p> <p>more than 75% of the time? 3 <input type="radio"/></p> <p>don't know 4 <input type="radio"/></p>
<p>153. Do you have a gas burning fireplace in your apartment?</p> <p>yes 1 <input type="radio"/> ► How many? <input type="checkbox"/></p> <p>no 2 <input type="radio"/></p>	
<p>154. Do you use any of the following types of supplementary heating... (Mark all that apply)</p> <p>*Guide</p> <p>A) wood stove(s)?</p> <p>yes 01 <input type="radio"/></p> <p>no 02 <input type="radio"/> ► Go to 154B</p> <p>don't know 03 <input type="radio"/></p> <p>i) How old is it?</p> <p>0 - 5 years 04 <input type="radio"/></p> <p>6 - 10 years 05 <input type="radio"/></p> <p>11 years or more 06 <input type="radio"/></p> <p>don't know 07 <input type="radio"/></p> <p>ii) On average, how often do you use your wood stove during the heating season? Is it...</p> <p>more than 4 hours per day 08 <input type="radio"/></p> <p>between 1 and 4 hours per day 09 <input type="radio"/></p> <p>less than 1 hour per day but more than 1 hour per week 10 <input type="radio"/></p> <p>less than 1 hour per week 11 <input type="radio"/></p> <p>B) electric baseboard(s)?</p> <p>yes 12 <input type="radio"/></p> <p>no 13 <input type="radio"/></p> <p>don't know 14 <input type="radio"/></p> <p>C) portable heater(s)?</p> <p>yes 15 <input type="radio"/></p> <p>no 16 <input type="radio"/> ► Go to 154D</p> <p>don't know 17 <input type="radio"/></p> <p>i) What fuel(s) does it use?</p> <p>electricity 18 <input type="radio"/></p> <p>natural gas 19 <input type="radio"/></p> <p>oil 20 <input type="radio"/></p> <p>other 21 <input type="radio"/></p> <p>D) other?</p> <p>yes 22 <input type="radio"/></p> <p>no 23 <input type="radio"/></p> <p>don't know 24 <input type="radio"/> ► Go to 155</p> <p>ii) What fuel does it use?</p> <p>electricity 25 <input type="radio"/></p> <p>natural gas 26 <input type="radio"/></p> <p>oil 27 <input type="radio"/></p> <p>other 28 <input type="radio"/></p>	<p>157. INTERVIEWER CHECK ITEM:</p> <p>*Guide</p> <p>If 145 is "wood" or 148 is "yes" (wood fireplace) or 154A is "yes" (supplementary wood stove) continue 0 <input type="radio"/></p> <p>Otherwise 5 <input type="radio"/> ► Go to 160</p>
	<p>158. How many cords of wood do you use in an average year?</p> <p>*Guide</p> <p>less than 1 1 <input type="radio"/></p> <p>1 - 3 2 <input type="radio"/></p> <p>4 - 6 3 <input type="radio"/></p> <p>more than 6 4 <input type="radio"/></p> <p>don't know 5 <input type="radio"/> ► Go to 160</p>
	<p>159. What type of cord is it?</p> <p>*Guide</p> <p>face or stove cords (less than 4 ft. X 4 ft. X 8 ft.) 6 <input type="radio"/></p> <p>full (bush) cord (4 ft. X 4 ft. X 8 ft.) 7 <input type="radio"/></p> <p>other 8 <input type="radio"/></p> <p>don't know 9 <input type="radio"/></p>
	<p>160. Do you have central air conditioning?</p> <p>yes 1 <input type="radio"/> ► Go to 164</p> <p>no 2 <input type="radio"/> ► Go to 165</p>

E. AIR CONDITIONING / COOLING

Central Air-conditioning

161. Do you have central air-conditioning in your house?

- yes 3
- no 4 ► Go to 166

162. INTERVIEWER CHECK ITEM:

- If "yes" in 78 (heat pump) 5 ► Go to 166
- Otherwise continue 6

163. What is its cooling capacity?

*Guide

7 BTU/hr

OR

8 ton(s)

don't know 9

164. How old is it? (Round up)

*Guide

- | | |
|---|---|
| 1 year or less 01 <input type="radio"/> | 8 - 10 years 07 <input type="radio"/> |
| 2 years 02 <input type="radio"/> | 11 - 15 years 08 <input type="radio"/> |
| 3 years 03 <input type="radio"/> | 16 - 20 years 09 <input type="radio"/> |
| 4 years 04 <input type="radio"/> | 21 years or more 10 <input type="radio"/> |
| 5 years 05 <input type="radio"/> | |
| 6 - 7 years 06 <input type="radio"/> | don't know 11 <input type="radio"/> |

165. How often did you use it last summer? Was it (Mark one only)

- never 1
- only a few days 2
- less than half of the summer 3
- about half of the summer 4
- more than half of the summer 5
- don't know 6

Window or Room Air-conditioners

166. Do you use window or room air conditioners?

*Guide

- yes 7 ► How many?
- no 8 ► Go to 171

167. What is the cooling capacity of your (first/second/third) window or room unit(s)?

*Guide

Note: Maximum of three. If more than one unit, the one used most often is "first".

a) First 1 BTU/hr

2 don't know

b) Second 3 BTU/hr

4 don't know

c) Third 5 BTU/hr

6 don't know

168. What are the make and model of your (first/second/third) unit? (Code "999" for "don't know" in Make or Model)

*Guide

First

Make: 1

OR Other (Specify): 2

Model number: 3

Second

Make: 4

OR Other (Specify): 5

Model number: 6

Third

Make: 7

OR Other (Specify): 8

Model number: 9

169. How old is your (first/second/third) window or room unit? (Round up)

*Guide

- | | First | Second | Third |
|---|--------------------------|--------------------------|-------|
| 1 year or less 01 <input type="radio"/> | 12 <input type="radio"/> | 23 <input type="radio"/> | |
| 2 years 02 <input type="radio"/> | 13 <input type="radio"/> | 24 <input type="radio"/> | |
| 3 years 03 <input type="radio"/> | 14 <input type="radio"/> | 25 <input type="radio"/> | |
| 4 years 04 <input type="radio"/> | 15 <input type="radio"/> | 26 <input type="radio"/> | |
| 5 years 05 <input type="radio"/> | 16 <input type="radio"/> | 27 <input type="radio"/> | |
| 6 - 7 years 06 <input type="radio"/> | 17 <input type="radio"/> | 28 <input type="radio"/> | |
| 8 - 10 years 07 <input type="radio"/> | 18 <input type="radio"/> | 29 <input type="radio"/> | |
| 11 - 15 years 08 <input type="radio"/> | 19 <input type="radio"/> | 30 <input type="radio"/> | |
| 16 - 20 years 09 <input type="radio"/> | 20 <input type="radio"/> | 31 <input type="radio"/> | |
| 21 years or more 10 <input type="radio"/> | 21 <input type="radio"/> | 32 <input type="radio"/> | |
| don't know 11 <input type="radio"/> | 22 <input type="radio"/> | 33 <input type="radio"/> | |

170. How often did you use your first window or room air conditioner last summer? (The one used most often or "first" in 167)

never? 1

only a few days? 2

less than half of the summer? 3

about half of the summer? 4

most of the summer? 5

don't know 6

171. Do you use ceiling fans?

yes 1 **How many?**

no 2

172. Do you use portable electric fans?

yes 3 **How many?**

no 4

F. HOT WATER

173. What fuel is used to heat the running water?

*Guide

electricity 1 oil 2

natural gas 3 propane 4

other 5 don't know 6

no hot running water 7 **Go to SECTION G, 181, page 18**

174. Does the water heating system serve your dwelling only or is it shared with other dwellings?

dwelling only 1

shared 2 **Go to 180**

don't know 3

175. Do you use a hot water tank (separate from furnace)?

yes 4 **How many?**

no 5 **Go to 180**

don't know 6

176. What are the make and model of the hot water heater? (Code "999" for "don't know" in Make or Model)

*Guide

Make 7

OR Other (Specify) 8

Model number 9

177. How old is your water heater? (Round up)

*Guide

1 year or less 01 6 - 7 years 06

2 years 02 8 - 10 years 07

3 years 03 11 - 15 years 08

4 years 04 16 years or more 09

5 years 05 don't know 10

178. What size is the hot water tank?

*Guide

small (30 gal.(1140L) or less) 1

medium (40 gal.(180L)) 2

large (50 gal.(230L)) 3

very large (60 gal.(270L) or more) 4

don't know 5

179. Does your hot water system have...

*Guide

add-on insulation around the outside of the hot water tank? 1 2 3

insulation around pipes? 4 5 6

yes no don't know

180. Are any of the following energy saving devices used in your house/apartment?

a) low-flow shower head?

yes 1 **How many?**

no 2

don't know 3

b) an attachment on hot water faucet to reduce water flow? (aerator)

yes 4 **How many?**

no 5

don't know 6

G. LIGHTING

H. DWELLING and HOUSEHOLD

Now, I'd like to ask about the type and number of light bulbs used in your (house/apartment). Please count all the light bulbs in fixtures.

181. Do you use any halogen light bulbs indoors or outdoors? (include spot lights)

*Guide

yes 1

▶ How many... (if none, enter "0")

indoor?

outdoor?

no 2

don't know 3

182. Do you use any fluorescent lighting indoors or outdoors?

*Guide

yes 4

▶ How many... (if none, enter "0")

indoor?

outdoor?

no 5

don't know 6

To arrive at the total number of ordinary (incandescent) light bulbs used, I'll ask about each room separately.

183. How many ordinary (incandescent) light bulbs do you have in your...

*Guide

(Enter "0" if not applicable)

kitchen? 01

living/dining area? 02

bedrooms/closets? 03

family room? 04

bathrooms? 05

hallways? 06

basement? (if applicable) 07

attic? (if applicable) 08

other areas inside the house? 09

garage? (if applicable) 10

outdoors? (include spot lights) 11

184. In what year was your dwelling built?

*Guide

Before 1941 1 1953 - 1958 5

1941 - 1960 2 1969 or later 6

1961 - 1977 3

1978 - 1982 4 don't know 7

185. In what year did you or your household move in? (if not all at the same time, give the earliest year)

Before 1960 1

1960 - 1970 2

1971 - 1980 3

1981 - 1991 4

1992 5 month?

(01 - Jan, 02 - Feb, ... 12 - Dec)

1993 6

186. To better understand the energy use in your home, please tell me how many of the people living here are usually at home during the day, on an average weekday? Please include children.

(Enter "0" if "nobody")

number

187. Do you own and use a vacation home (cottage, chalet, trailer home) in Canada?

yes

no 2 ▶ Go to 192

188. How often do you usually heat it during the heating season? (Mark one only)

never? 1

only a few days? 2

less than half of the season? 3

about half of the season? 4

most of the season? 5

don't know 6

189. Do you use a refrigerator there?

yes

no

190. What is your best estimate of the total income of all household members from all sources in 1992 before taxes and deductions? Was the total household income...

less than \$10,000? 01

\$10,000 to under \$15,000 02

\$15,000 to under \$20,000 03

\$20,000 to under \$25,000 04

\$25,000 to under \$30,000 05

\$30,000 to under \$35,000 06

\$35,000 to under \$40,000 07

\$40,000 to under \$50,000 08

\$50,000 to under \$60,000 09

\$60,000 to under \$80,000 10

\$80,000 or more 11

don't know 12

refusal 13

