Place a check mark (\checkmark) in \square beside the respondent.				
 HOUSEHOLD ROSTER What are the names of all persons living or staying here? Start with the ADULT who owns or rents this apartment (house). (Enter that name on line 1 below.) Include anyone staying here with no other home Include anyone who usually lives here but is temporarily away traveling or at school Include lodgers, boarders, babies, etc. Ismale or female? How old is? (Enter whole years ONLY.) 				
o1 ☐ PERSON 1 - Referen	ce Person (owner/renter)			
a. Last name				
First name	b. Sex 1 Male 2 Female			
02 PERSON 2				
a. Last name				
First name	b. Sex 1 Male 2 Female			
03 PERSON 3				
a. Last name				
First name	b. Sex 1 Male 2 Female			
04 🗆 PERSON 4				
a. Last name				
First name	b. Sex 1 Male 2 Female			
05 🗆 PERSON 5				
a. Last name				
First name	b. Sex 1 Male 2 Female			
06 □ PERSON 6				
a. Last name				
First name	b. Sex 1 Male 2 Female			
07 PERSON 7 a. Last name				
First name	b. Sex 1 Male 2 Female			
·				

Use continuation form for additional persons.

Census

U.S. DEPARTMENT OF COMMERCE

Economic and Statistics Administration
U.S. CENSUS BUREAU

ACTING AS COLLECTING AGENT FOR
NEW YORK CITY

NOTICE – Your answers will be held in strict confidence and will be seen only by persons sworn to uphold the confidentiality of Census Bureau information.

′	Duite	au iiiioiiiialioii.		
	A.	NAME	CODE	
	B.	DATE OF INTERVIEW		
	D.	DATE OF INTERVIEW		

(Additional spaces on page 24)					
Date	Time	Remarks			
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				

Bureau NEW YORK CITY HOU								1	
AND VACANCY SUF	RVEY	B.	DATE	OF II	VTE	RVIE	W		
QUESTIONNAIRE – 2	014			\		! !	20	14	
		G	BEC	ORD C)F V	ISIT	<u> </u>		
		<u> </u>		tional	spac	ces o	n page		
		Di	ate	7	Γime		F	Remarks	
						a.m. p.m.			
						a.m. p.m.			
						a.m.	+		
						p.m.			
						a.m. p.m.			
Fill items D through J by observing the condition of the building containing the sample unit as you approach it and walk inside. – Mark (X) all that apply in D through G.	K. OCCUPAN								
D. EXTERNAL WALLS	L. RESPOND	ENT							
001 1 ☐ Missing bricks, siding, or other outside wall material	Name								
2 Sloping or bulging outside walls									
 3 ☐ Major cracks in outside walls Loose or hanging cornice, roofing, or other material 	Occupied	unit –	Go to	М					
005 5 ☐ None of these problems with walls	1								
oo6 ☐ Unable to observe walls	Vacant un) one	7				
E. WINDOWS	1 Supe 2 Renta			nt]				
007 1 ☐ Broken or missing windows	₃ ☐ Real				er }			uestion 56	;
oos 2 Rotted/loose window frames/sashes	4 🗆 Owne				1	on	page 2	: 1	
 009 3 ☐ Boarded-up windows 010 4 ☐ None of these problems with windows 	5 🗆 Other	-Spe	ecity _Z	•	J	I			
011 5 ☐ Unable to observe windows									
F. STAIRWAYS (exterior and interior) 1 Loose, broken, or missing stair railings 2 Loose, broken, or missing steps 3 None of these problems with stairways 4 No interior steps or stairways	Ask– M. How man Include any	one v	vithout	t a usu	al ho	ome (elsewh	ere.	
o16 5 ☐ No exterior steps or stairways				uestior				alcan.	
035 6 ☐ Unable to observe stairways	Always mark (explain why in							акеп,	
G. FLOORS	N. SAMPLE U	NIT							
o17 1 ☐ Sagging or sloping floors	033 01 ☐ Ques	tionna	ire co	mplete)				
o18 2 ☐ Slanted or shifted doorsills or door frames o19 3 ☐ Deep wear in floors causing depressions	Questionn			-					
020 4 ☐ Holes or missing flooring	02 Refus		ot com	ipiete					
021 5 ☐ None of these problems with floors	03 ☐ No or								
022 6 ☐ Unable to observe floors	o4 ☐ Temp o5 ☐ Other								
H. CONDITION	06 ☐ Demo			11 1401	<i>50 a</i>	ii ca (on pag	<i>J</i> 11	
o23 1 ☐ Dilapidated – Go to I	07 🗌 Cond								
☐ Not dilapidated — ☐ If not dilapidated	08 □ Nonro 09 □ Merg			ther ur	nit –	Give	addres	ss below –	7
2 ☐ Sound								<i>x</i>	
з 🗆 Deteriorating									
■ Are there any buildings with broken or boarded-up	10 ☐ Unit o	damag	ged by	fire					
windows on this street? – Include sample unit building	11 🗌 Build								
024 1 ☐ Yes 2 ☐ No	12 ☐ List p 13 ☐ No st				e nu	ımha	r/street)	
J. WHEELCHAIR ACCESSIBILITY	14 🗌 Other								
1. Street entry and inner lobby entry (width 32")	Complete a	fter a	п оссі	ıpied u	 ınit ir	 nterv	iew.		
1 ☐ Accessible 3 ☐ Unable to observe building entrance	O. FORM TYP	Έ							
	034 1 □ One 1	form c	nly	2] Firs	st of	two for	ms	
2. Elevator (door width 36", cab depth 51")		0	FFICI	E USE	ON	ILY			
1 ☐ Accessible 3 ☐ Unable to observe elevator 2 ☐ Inaccessible 4 ☐ No elevator	026 TS)27	A			028	В	
_			_ _	-			_ _	•	
3. Residential unit entrance (width 32") 1 ☐ Accessible 3 ☐ Unable to observe									
1	1								

	Sectio	n I – OCCUPIED (JNITS				
d. How is related to (reference	ed to Hispanic origin? race? one or			questions may seem d before, but I must ble check.			
person) (person on Line 1)? Show Flashcard I and enter the appropriate code in the box below.	(If Yes, read the categories and mark the appropriate box, otherwise mark "No.")	categories from the flashcard. Show Flashcard and mark (X) al that apply, OR box 12 only and print race.	a spouse or unmarried	h. Does have a parent in the household?			
Reference person	1 No 2 Puerto Rican 3 Dominican 4 Cuban 5 South/Central American 6 Mexican-American, Mexican, Chicano 7 Other Spanish/Hispanic	01	number of spouse or partner; otherwise mark "No."	If yes, enter person number(s) of parent(s); otherwise mark "No."			
	1 ☐ No 2 ☐ Puerto Rican 3 ☐ Dominican 4 ☐ Cuban 5 ☐ South/Central American 6 ☐ Mexican-American, Mexican, Chicano 7 ☐ Other Spanish/Hispanic	01	number of spouse or partner; otherwise mark	If yes, enter person number(s) of parent(s); otherwise mark "No."			
	1 No 2 Puerto Rican 3 Dominican 4 Cuban 5 South/Central American 6 Mexican-American, Mexican, Chicano 7 Other Spanish/Hispanic	01	number of spouse or partner; otherwise mark "No."	If yes, enter person number(s) of parent(s); otherwise mark "No."			
	1 No 2 Puerto Rican 3 Dominican 4 Cuban 5 South/Central American 6 Mexican-American, Mexican, Chicano 7 Other Spanish/Hispanic	01	number of spouse or partner; otherwise mark "No."	If yes, enter person number(s) of parent(s); otherwise mark "No."			
	1 No 2 Puerto Rican 3 Dominican 4 Cuban 5 South/Central American 6 Mexican-American, Mexican, Chicano 7 Other Spanish/Hispanic	01	number of spouse or partner; otherwise mark "No."	If yes, enter person number(s) of parent(s); otherwise mark "No."			
	1 ☐ No 2 ☐ Puerto Rican 3 ☐ Dominican 4 ☐ Cuban 5 ☐ South/Central American 6 ☐ Mexican-American, Mexican, Chicano 7 ☐ Other Spanish/Hispanic	01	number of spouse or partner; otherwise mark "No."	If yes, enter person number(s) of parent(s); otherwise mark "No."			
	1 No 2 Puerto Rican 3 Dominican 4 Cuban 5 South/Central American 6 Mexican-American, Mexican, Chicano 7 Other Spanish/Hispanic	01	number of spouse or partner; otherwise mark "No."	If yes, enter person number(s) of parent(s); otherwise mark "No."			

Page 2 FORM H-100 (3-19-2013)

	Section I - OCCUPIED UNITS - Continued												
2a.	Is there anyone now living in this apartment (house) that came here within the past five years from a homeless situation such as a shelter, transitional center, or hotel?			☐ Yes – ☐ No – <i>S</i>					_				
b.	Who are they? (Fill in the persons who answered "yes" to 2a above)	055	-	056		057		058		059		060	
	answered "yes" to 2a above) Refer to the roster, page 2, and enter the person	1	1		1		1		1		1		1
	number(s) starting in box 055.	2	2		2		2		2		2		2
		061	\neg	062		063		064		065		066	i
		1	1		1		1		1		1		1
		[2	2		2		2		2		2		2
C.	Was in the homeless situation mainly because he/she could not afford his/her own apartment (house) or mainly for other reasons?			ordability ner reaso	-				•). —
	The following questions (3 through 11c) refer to the	referenc	ce į	person	(thε	e persc	on lis	sted or	n line	∍ 1 <u>).</u>	_		_
3.	Where was the most recent place (reference person) lived for six months or more before moving into this apartment (house)?	1		NEW YO					<u>JUILE</u>	DING	_		
	(Show Flashcard III to respondent and have him/her select an answer. Then mark (X) the appropriate box.)			☐ Always ☐ Anothe					ouildi	ing			
			1 N	NEW Y(ORI	K CITY	∕. <u>0</u> 7	TH <u>ER</u>	B <u>UII</u>	LDI <u>NG</u>			
	NOTE – If the respondent indicates that the reference person has always lived in the SAME unit that he/she currently lives in, don't mark (X) box 01 unless you are certain. Many people may feel as though they have lived in a unit forever, but it's rare. The reference person had to live there since birth. Be sure to probe.	IN NEW YORK CITY, OTHER BUILDING 03											
	In what year did (reference person) move into this apartment (house)? Ask only if reference person moved here in 1971 Did (reference person) move here on or after		1	/ear		If - – – or after	f any — — r July	y 1 in 1	r year — — 1971	ar <i>– SKII</i> – – –	'P to 	5	
	July 1, 1971?	2	2 <u> </u>	□ No, be	efor	re July	1 in	1971	_		_		
5.	Are you the first occupant(s) of this apartment (house) since its construction, gut rehabilitation, or creation through conversion or sub-division?	2	2	☐ Yes, fi ☐ No, pr ☐ Don't I	revi	iously c							
	REFER TO QUESTION 4a ABOVE												
	☐ Moved here 2011 or later – GO to question☐ Moved here 2010 or earlier – SKIP to ques												

FORM H-100 (3-19-2013) Page 3

	Section I – C	OCCUPIE	D UNI	TS -	- Continued
6.	What is the main reason (reference per moved from his/her previous residence?	rson)	E	EMP	LOYMENT
	Mark (X) ONLY one box.	ŀ	110 0	1 🗆	Job transfer/new job
	man (N) CNET CHO DOX.	ļ.			Retirement
			0	з	Looking for work
					Commuting reasons
		1			To attend school
		ļ	0	6 🗌	Other financial/employment reason
			_		
				AM	
					Needed larger house or apartment Widowed
					Separated/divorced
		1	1	0 🗌	Newly married
				_	Moved to be with or closer to relatives
			1		Family size decreased (except widowed/ separated/divorced)
		i	1		Wanted to establish separate household
					Other family reason
			N	NEIG	SHBORHOOD
		1			Neighborhood overcrowded
				6 🗌	Change in racial or ethnic composition
					of neighborhood
		i	1	7 📙	Wanted this neighborhood/better neighborhood services
		- 1	1		Crime or safety concerns
					Other neighborhood reason
			F	HOU	SING
		i i			Wanted to own residence
		ĺ			Wanted to rent residence
			2	2 🗀	Wanted less expensive residence/difficulty paying rent or mortgage
			2		Wanted better quality residence
		 			Evicted
		i			Poor building condition/services
		1			Harassment by landlord
			2	7 🗀	Needed housing accessible for persons with mobility impairments
			2		Other housing reason
				ЭТН	ER
			2	9 🗌	Displaced by urban renewal, highway construction, or other public activity
		1			
					Displaced by private action (other than eviction) Schools
					Natural disaster/fire
					Any other – <i>Specify</i> ✓
		i			
No ⁻	les				

Page 4 FORM H-100 (3-19-2013)

	Section I - OCCUPIE	UNITS - Contin	uea			
7.	Place of birth SHOW Flashcard III to respondent.	a (reference person) born?	b's (reference person's)	C's (reference person's)		
	Where was—		father born?	mother born?		
	07. New York City (responses 01-07 on card)	111 07	112 ₀₇	113 07		
	09. U.S., Outside New York City (response 08 or 09 on card)	09 🗌	09 🗆	09 🗆		
	10. Puerto Rico	10 🗌	10 🗆	10 🗆		
	11. Dominican Republic	 11	11 🗆	11 🗆		
	12. Caribbean (other than Puerto Rico or Dominican Republic)	 	12 🗆	12 🗌		
	13. Mexico	13 🗌	13 🗌	13 🗌		
	14. Central America, South America	14 🗌	14 🗆	14 🗆		
	15. Canada	15 🗌	15 🗌	15 🗌		
	16. Europe	16 🗌	16 🗌	16 🗌		
	17. Russia/Successor States to Soviet Union (Ukraine, Georgia, etc.)	 17	17 🗆	17 🗆		
	18. China, Hong Kong, Taiwan	18 🗌	18 🗆	18 🗆		
	19. Korea	19 🗌	19 🗌	19 🗌		
	20. India	20 🗌	20 🗌	20 🗌		
	21. Pakistan, Bangladesh	21 🗌	21 🗌	21 🗆		
	22. Philippines	22 🗆	22 🗆	22 🗆		
	23. Southeast Asia (Burma, Cambodia, Laos, Malaysia, Singapore, Thailand, Vietnam)	 23	23 🗆	23 🗆		
	24. Other Asia	24 🗆	24 🗆	24 🗆		
	25. Africa	25 🗌	25 🗌	25 🗌		
	26. All other countries	26 🗆	26 🗆	26 🗆		
	Mark (X) box 07 above for categories 01-07 on Flashcard III. Mark (X) box 09 for categories 08 and 09. Categories 10-26 match exactly as shown on Flashcard III	 				
8.	Is this apartment (house) part of a condominium or cooperative building or development?	114 1 No 2 Yes, a cor				
	A condominium is a building or development with individually owned apartments or houses having commonly owned areas and grounds. A cooperative or "co-op" is a building or development that is owned by its shareholders.	¦ 3 □ Yes, a coo 4 □ Don't knov I				
9a.	Is this apartment (house) owned or being bought by (reference person) or someone else in this household?	1 Yes, owne	ed or being bought – S	SKIP to 11a		
b.	Does (reference person) or someone else in this household own cooperative shares for this apartment (house)?	129 1 Yes – <i>SKI</i> 2 No 3 Don't know				
C.	Does (reference person) pay cash rent for this apartment (house) or does he/she occupy it rent free?		rent – <i>GO to Check It</i> nt free – <i>SKIP to 20</i>	tem B		
	CK REFER TO QUESTION 8 ABOVE					
ITE	☐ Condominium (box 2 marked) ☐ Cooperative (box 3 marked) ☐ All other renter occupied (box 1 or 4 market)					
10a	Did (reference person) live here and pay cash rent at the time this building became a condominium or cooperative?	117 1 Yes 2 No 3 Don't know	V			
b.	When this apartment (house) became a condominium or cooperative was it done through a non-eviction plan? Under a non-eviction plan, tenants can NOT be evicted for NOT buying their unit.	+	SKIP to 20			

Section I - OCCUPII	ED UNITS – Continued
11a. In what year did (reference person) acquire this apartment (house)?	Year 119
b. Before (reference person) acquired this apartment (house) was it owned and occupied by another household, rented by (reference person), rented by another household, or never previously occupied?	1 Owned and occupied by another household 2 Rented by reference person 3 Rented by another household 4 Never previously occupied 5 Don't know
C. Before (reference person) acquired this apartment (house) was it part of a condominium or cooperative building or development?	
REFER TO QUESTION 11a ABOVE Acquired 2009 or later – GO to 12a Acquired 2008 or earlier – SKIP to 13	
12a. What was the purchase price for this apartment (house)?	122 \$ 00 123 0 □ Don't know
b. What was the down payment for this apartment (house)?	124 \$ 00 125 0 □ Don't know
13. What is the value of this apartment (house), that is, in your opinion, how much would it currently sell for if it were on the market?	126 \$
14. Is there a mortgage, home equity loan, or similar loan on this apartment (house) or is this apartment (house) owned free and clear?	1 Mortgage, home equity, or similar loan 2 Owned free and clear – SKIP to Check Item D
15a. What are the current monthly mortgage or loan payments on this apartment (house)? Include payments on first, second, home equity loan, and any other mortgages.	128 \$ Per month
b. When did the most recent mortgage or loan on this apartment (house) originate?	Month Year 133 134
C. What is the current interest rate on the most recent mortgage or loan on this apartment (house)?	135 %
CHECK REFER TO QUESTION 8 ON PAGE 5 Condominium (box 2 marked) GO to 10 All other owner occupied (box 1 or 4 market)	
16. What are the monthly condominium or co-op maintenance fees for this apartment (house)? Exclude payments for any mortgages (loans) on this unit.	130 \$ 00
REFER TO QUESTION 1c ON PAGE 2 FOR E. With any household member age 62 or over — Some series of the	er – <i>GO to 17</i>
17. Is any household member receiving a Senior Citizen Carrying Charge Increase Exemption as part of the SCRIE program? (Senior Citizen Rent Increase Exemption)	140 1 Yes 2 No 3 Don't know
18a. Is the fire and liability insurance premium for this apartment (house) paid separately? (Separately means not included in the mortgage or loan payment or the condominium or co-op maintenance fee.)	141 1 ☐ Yes – GO to 18b 2 ☐ No, included in mortgage or loan payment – SKIP to 18c 3 ☐ No insurance – SKIP to 19a
b. What was the cost of fire and liability insurance for 2013?	142 \$
C. Does the fire and liability insurance for this apartment (house) also cover personal possessions?	143 1 Yes 2 No 3 Don't know

Page 6 FORM H-100 (3-19-2013)

	Section I – OCCUPII	ED UN	ITS -	- Continued
19a.	Are the real estate taxes for this apartment (house) paid separately?	144		Yes – <i>GO to 19b</i> No, included in mortgage
	(Separately means not included in the mortgage or loan payment or the condominium or co-op maintenance fee.)		з 🗆 — —	or loan payment No, included in condominium or maintenance fee
b.	What were the real estate taxes for 2013?	145	\$_	. 00
NOTE	E – Questions 20–22a, 23a and 23b pertain to the building question for all forms within the same building.	g. Be d	ertair	n to mark (X) the same box in each
20.	How many units are in this building?	146	01 🗆	1 unit without business
	If the respondent doesn't know, canvass the building and count the units.	146	02	1 unit with business 2 units without business 2 units with business 3 units 4 units 5 units 6 to 9 units 10 to 12 units 13 to 19 units 20 to 49 units 50 to 99 units 100 to 199 units 200 or more units
	If owner occupied, mark "Yes" without asking.	147	1 🗆	Yes
21.	Does the owner of this building live in this building?		2 🗌	
22a.	How many stories are in this building?	148	01 🗆	One – SKIP to 23c
	Count the basement if there are people living in it.	 	04	Three Four
b.	On what floor is this unit? Enter the 2-digit floor number or mark (X) box "0" if basement unit. Enter the lowest floor number if on more than one floor.	172	0 🗆	Basement Floor
23a.	Is there a passenger elevator in this building?	149		Yes No – <i>SKIP to 23c</i>
b.	Is it possible to go from the sidewalk to a passenger elevator without going up or down any steps or stairs?	173	2	Yes No Don't know
c.	Is it possible to go from the sidewalk to this unit without going up or down any steps or stairs?	171	2 🗌	Yes No Don't know
24a.	How many rooms are in this apartment (house)? Do not count bathrooms, porches, balconies, halls, foyers, or half-rooms.	150	2	One – SKIP to 25a Two Three Four Five Six Seven Eight or more
b.	Of these rooms, how many are bedrooms?	151	02	Two Three Four Five

Section I -	OCCUPIED UI	NITS – Continued
25a. Does this apartment (house) have concern plumbing facilities; that is, hot and concern piped water, a flush toilet, and a bat shower?	cold	o ☐ Yes, has complete plumbing facilities – <i>GO to 25b</i> 1 ☐ No, has some but not all facilities in this apartment (house) – <i>SKIP to 25c</i> 2 ☐ No plumbing facilities in this apartment (house) – <i>SKIP to 26a</i>
b. Are these facilities for the exclusive this household or are they also for u another household?		3 ☐ For the exclusive use of this household 4 ☐ Also for use by another household
C. Was there any time in the last three when all the toilets in this apartmen were not working for six consecutiv	ıt (house) ⊢ ¹⁵⁴	1 □ Yes 2 □ No 3 □ No toilet in this apartment (house)
26a. Does this apartment (house) have concern kitchen facilities? Complete kitchen facilities include a sink with piped with range or cookstove, and a refrigerat	vater, a	o ☐ Yes has complete kitchen facilities – GO to 26b ☐ No, has some but not all facilities in this apartment (house) – SKIP to 26c ☐ No kitchen facilities in this apartment (house), but facilities available in building ☐ No kitchen facilities in this building
b. Are these facilities for the exclusive this household or are they also for use another household?		↓ □ For the exclusive use of this household □ Also for use by another household
C. Are all the kitchen facilities in your apartment (house) functioning?	157	1 ☐ Yes, all are functioning 2 ☐ No, one or more is not working at all
27. How is this apartment (house) heate fuel oil, utility gas, electricity, or wit some other fuel?		1 Fuel oil 2 Utility gas 3 Electricity 4 Other fuel (including CON ED steam) 5 Don't know
28. I have some questions about utility of a. (1) Do you pay for your own electricity	139	 1 ☐ Yes - GO to 28a(2) 2 ☐ Yes, but combined with gas - Ask for separate estimates; if not possible SKIP to 28c 3 ☐ No, included in rent, condominium or other fee - SKIP to 28b(1)
(2) What is the average MONTHLY c	ost?	\$
b. (1) Do you pay for your own gas?	161	1 ☐ Yes – <i>GO to 28b(2)</i> 2 ☐ No, included in rent, condominium or other fee 3 ☐ No, gas not used SKIP to 28d(1)
(2) What is the average MONTHLY co	ost?	. 00
IMPORTANT - SKIP 28c unless the respond combined bill. If separate estimates are available		de separate estimates for electricity and gas, and pays a I 28b(2), leave 28c blank, and SKIP to 28d(1).
C. What is your combined average elec and gas payment each month?	tricity 163	Fill this <u>ONLY</u> when separate estimates cannot be given.
d. (1) Do you pay your own water and s charges?	sewer 164	1 ☐ Yes – <i>GO to 28d(2)</i> 2 ☐ No, included in rent, condominium or other fee or no charge – <i>SKIP to 28e(1)</i>
(2) What is the total YEARLY cost?	165	\$00
e. (1) Do you pay for your own oil, coal, kerosene, wood, steam, etc.?	166	1 ☐ Yes – GO to 28e(2) 2 ☐ No, included in rent, condominium or other fee 3 ☐ No, these fuels not used SKIP to 29a
(2) What is the total YEARLY cost?	167	\$

Page 8 FORM H-100 (3-19-2013)

Section I - OCCUPIED UNITS - Continued				
29a. In 2013, did this household receive any payments from the Home Energy Assistance Program (HEAP) or any other federal, state, or city program to help pay for some home heating costs?	174 1 ☐ Yes – <i>GO to 29b</i> 2 ☐ No – <i>SKIP to Check Item F</i>			
b. Altogether, how much energy assistance was received in 2013?	175 \$ 00 Annual Amount			
CHECK REFER TO QUESTION 9 ON PAGE 5 Owner occupied (question 9a, box 1 marks Owns co-op shares (question 9b, box 1 marks Occupy rent free (question 9c, box 3 marks Pay cash rent (question 9c, box 2 marked)	arked) SKIP to 32a ed)			
30a. What is the MONTHLY rent? (If rent is paid other than monthly, refer to the manual on how to convert it.)	182 \$ Per month			
b. What is the length of the lease on this apartment (house) – – that is, the total time from when the lease began until it will expire?	181 1 ☐ Less than 1 year 2 ☐ 1 year 3 ☐ More than 1 but less than 2 years 4 ☐ 2 years 5 ☐ More than 2 years 6 ☐ No lease 7 ☐ Don't know			
31a. Is any part of the monthly rent for this apartm government programs, either to a member of				
(1) Federal Section 8 certificate or voucher program	541 1 Yes 2 No 3 Don't know			
(2) Senior Citizen Rent Increase Exemption (SCRIE)	184 1 Yes 2 No 3 Don't know			
(3) Public assistance shelter allowance	542 1 Yes 2 No 3 Don't know			
(4) Another Federal housing subsidy program	543 1 Yes 2 No 3 Don't know			
(5) Another state or city housing subsidy program	544 1 Yes 2 No 3 Don't know			
b. Of the (amount from question 30a above) rent you reported, how much is paid out of pocket by this household?	547 \$00			
(Out of pocket means the money your household pays for rent over and above any shelter allowance or other government housing subsidy.)	l o □ None			
32a. Now, I would like to ask some questions about the condition of this apartment (house).				
At any time during this winter was there a breakdown in your heating equipment; that is, was it completely unusable for 6 consecutive hours or longer?	185 0 ☐ Yes – <i>GO</i> to 32b 1 ☐ No – <i>SKIP</i> to 33			
b. How many times did that happen?	186 2 One 3 Two 4 Three 5 Four or more times			

FORM H-100 (3-19-2013)

	Section I - OCCUPIED UNITS - Continued		
33.	During this winter 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? Additional sources may be the kitchen stove, a fireplace, or a portable heater.	187 1 Yes 2 No	
34a.	Does your apartment (house) have functioning air conditioning? Would you say no, one or more window air conditioners, or central air conditioning?	197 1 No 2 One or more window air conditioners 3 Central air conditioning 4 Don't know/Not sure	
b.	Do you have a working carbon monoxide detector inside your apartment (house)?	198 1 Yes 2 No	
35a.	At any time in the last 90 days have you seen any mice or rats or signs of mice or rats in this building?	188 1 ☐ Yes 2 ☐ No	
b.	During the past month, about how many cockroaches did you see in this apartment (house) on a typical day?	571 1 None 2 1 to 5 3 6 to 19 4 20 or more 5 Don't know/Not sure	
c.	Is this building serviced by an exterminator regularly, only when needed, irregularly, or not at all?	189 1 Regularly 2 Only when needed 3 Irregularly 4 Not at all 5 Don't know	
36a.	Does this apartment (house) have open cracks or holes in the interior walls or ceiling? Do not include hairline cracks.	190 1 Yes 2 No	
b.	Does this apartment (house) have holes in the floors?	191 1 Yes 2 No	
37a.	Is there any broken plaster or peeling paint on the ceiling or inside walls?	192 0 ☐ Yes – <i>GO to 37b</i> 1 ☐ No – <i>SKIP to 38a</i>	
b.	Is the area of broken plaster or peeling paint larger than 8½ inches by 11 inches? Show unfolded flashcard.	193 2 Yes 3 No	
38a.	Has water leaked into your apartment (house) in the last 12 months, excluding leaks resulting from your own plumbing fixtures backing up or overflowing?	194 1 Yes 2 No	
b.	In the last 12 months, how often have you noticed any musty or moldy smells inside your apartment (house)? Would you say daily, weekly, monthly, a few times, or never?	199 1 Daily 2 Weekly 3 Monthly 4 A few times 5 Never	
	We are also interested in the condition of your neighborhood.		
39.	How would you rate the physical condition of the residential structures in this NEIGHBORHOOD – would you say they are on the whole excellent, good, fair, or poor?	196	
	Now in order to better understand the housin something about the income, employment, a	ng situation in the city, we need to learn and education level of each household member.	
	INTERVIEWER: Continue with questions for each person on page 12.		

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	Section I - OCCUPIED UNITS - Continued	
Notes		
	FWFD. Continue with acceptions for each continue to	
FORM H-100 (3-19-2013)	EWER: Continue with questions for each person on page 12.	Page 11

Section I - OCCUPIED UNITS - Continued				
Ask questions 40a–50b of ALL household members age 15 and above. Refer to question 1c on page 2 for each person's age.	40a. Did work at any time last week?	b. How many hours did work last week at all jobs? (Subtract time off; add overtime or extra hours worked)	41. Was TEMPORARILY absent or on layoff from a job last week?	42. Has been doing anything to find work during the last four weeks?
601	201	211	221	231
1 ☐ 15 years or older – Ask questions 40a–50b 2 ☐ Under 15 – SKIP to Check Item H on page 19	 1 ☐ Yes – Full or part-time (includes helping without pay in family business) 2 ☐ No – Did not work (or did only own housework, school work, or volunteer work) – SKIP to 41 	Hours – SKIP to 45a	1 ☐ Yes, on layoff 2 ☐ Yes, on vacation, temporary illness, labor dispute, etc. – SKIP to 45a 3 ☐ No	1 ☐ Yes – SKIP to 44 2 ☐ No
602	202	212	222	232
1 ☐ 15 years or older – Ask questions 40a–50b 2 ☐ Under 15 – SKIP to Check Item H on page 19	Yes – Full or part-time (includes helping without pay in family business) No – Did not work (or did only own housework, school work, or volunteer work) – SKIP to 41	Hours – SKIP to 45a	1 ☐ Yes, on layoff 2 ☐ Yes, on vacation, temporary illness, labor dispute, etc. – SKIP to 45a 3 ☐ No	1 ☐ Yes – SKIP to 44 2 ☐ No
603	203	213	223	233
1 ☐ 15 years or older – Ask questions 40a–50b 2 ☐ Under 15 – SKIP to Check Item H on page 19	Yes – Full or part-time (includes helping without pay in family business) No – Did not work (or did only own housework, school work, or volunteer work) – SKIP to 41	Hours – SKIP to 45a	1 ☐ Yes, on layoff 2 ☐ Yes, on vacation, temporary illness, labor dispute, etc. – SKIP to 45a	1 ☐ Yes – <i>SKIP</i> to 44 2 ☐ No
604	204	214	224	234
1 ☐ 15 years or older – Ask questions 40a–50b 2 ☐ Under 15 – SKIP to Check Item H on page 19	1 Yes – Full or part-time (includes helping without pay in family business) 2 No – Did not work (or did only own housework, school work, or volunteer work) – SKIP to 41	Hours – SKIP to 45a	1 ☐ Yes, on layoff 2 ☐ Yes, on vacation, temporary illness, labor dispute, etc. – SKIP to 45a 3 ☐ No	1 ☐ Yes – <i>SKIP</i> to 44 2 ☐ No
605	205	215	225	235
1 ☐ 15 years or older – Ask questions 40a–50b 2 ☐ Under 15 – SKIP to Check Item H on page 19	 1 ☐ Yes – Full or part-time (includes helping without pay in family business) 2 ☐ No – Did not work (or did only own housework, school work, or volunteer work) – SKIP to 41 	Hours – SKIP to 45a	1 ☐ Yes, on layoff 2 ☐ Yes, on vacation, temporary illness, labor dispute, etc. – SKIP to 45a 3 ☐ No	1 ☐ Yes – SKIP to 44 2 ☐ No
606	206	216	226	236
1 ☐ 15 years or older – Ask questions 40a–50b 2 ☐ Under 15 – SKIP to Check Item H on page 19	Yes – Full or part-time (includes helping without pay in family business) No – Did not work (or did only own housework, school work, or volunteer work) – SKIP to 41	Hours – SKIP to 45a	1 ☐ Yes, on layoff 2 ☐ Yes, on vacation, temporary illness, labor dispute, etc. – SKIP to 45a 3 ☐ No	1 ☐ Yes – SKIP to 44 2 ☐ No
607	207	217	227	237
1 ☐ 15 years or older – Ask questions 40a–50b 2 ☐ Under 15 – SKIP to Check Item H on page 19	 1 ☐ Yes – Full or part-time (includes helping without pay in family business) 2 ☐ No – Did not work (or did only own housework, school work, or volunteer work) – SKIP to 41 	Hours – SKIP to 45a	1 ☐ Yes, on layoff 2 ☐ Yes, on vacation, temporary illness, labor dispute, etc. – SKIP to 45a 3 ☐ No	1 ☐ Yes – SKIP to 44 2 ☐ No
			1	1

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42 \		on I - OCCUPIED UNITS - C			
43. What is the main reason	44. When did last work at his/her job or	The following questions ask about the job worked last week. If had more than one job, describe the one worked the most hours. If didn't work, refer to the most recent job since 2009.			
is not looking for work?	business?	45a. For whom did work? Print the name of the company, employer, business, or branch of armed services if on active duty.	b. What kind of business or industry is this? For example: hospital, newspaper publishing, garment manufacturing, stock brokerage.	C. Is this mainly manufacturing, wholesale trade, retail trade, or something else?	
Show Flashcard IV and enter the code.	241 1		Describe the main activity at location where employed.	251 1 ☐ Manufacturing 2 ☐ Wholesale trade 3 ☐ Retail trade 4 ☐ Other (service, construction, government, etc.)	
Show Flashcard IV and enter the code.	242 1 □ 2014		Describe the main activity at location where employed.	1 ☐ Manufacturing 2 ☐ Wholesale trade 3 ☐ Retail trade 4 ☐ Other (service, construction, government, etc.)	
Show Flashcard IV and enter the code.	243 1		Describe the main activity at location where employed.	253 1 Manufacturing 2 Wholesale trade 3 Retail trade 4 Other (service, construction, government, etc.)	
Show Flashcard IV and enter the code.	244 1		Describe the main activity at location where employed.	1 Manufacturing 2 Wholesale trade 3 Retail trade 4 Other (service, construction, government, etc.)	
Show Flashcard IV and enter the code. 635	245 1		Describe the main activity at location where employed.	255 1 Manufacturing 2 Wholesale trade 3 Retail trade 4 Other (service, construction, government, etc.)	
Show Flashcard IV and enter the code. 636	246 1		Describe the main activity at location where employed.	256 1 ☐ Manufacturing 2 ☐ Wholesale trade 3 ☐ Retail trade 4 ☐ Other (service, construction, government, etc.)	
Show Flashcard IV and enter the code. 637	247 1		Describe the main activity at location where employed.	1 Manufacturing 2 Wholesale trade 3 Retail trade 4 Other (service, construction, government, etc.)	

		Section I – OCCUPIED U	JNITS -	- Continued
46a.	. What kind of work was doing, that is what's his/her occupation?	b. What are's usual activities at this job?	47.	What type of business or organization does work at?
	For example: registered nurse, personnel manager, seamstress, stockbroker.	For example: patient care, directing hiring policies, stitching pants, selling stock.		Read all categories unless the answer is apparent from the information given in question 45, then mark (X) the appropriate box.
261		271	-	 □ Private FOR PROFIT company, business, or individual for wages, salary, or commission □ Private NOT-FOR-PROFIT, tax-exempt, or charitable organization □ Government – Federal □ Government – State or local (city, borough, etc.) □ Self-employed in own incorporated or unincorporated business or professional practice □ Working without pay in family business
			-	 □ Private FOR PROFIT company, business, or individual for wages, salary, or commission □ Private NOT-FOR-PROFIT, tax-exempt, or charitable organization □ Government – Federal □ Government – State or local (city, borough, etc.) □ Self-employed in own incorporated or unincorporated business or professional practice □ Working without pay in family business
263		273	-	□ Private FOR PROFIT company, business, or individual for wages, salary, or commission □ Private NOT-FOR-PROFIT, tax-exempt, or charitable organization □ Government – Federal □ Government – State or local (city, borough, etc.) □ Self-employed in own incorporated or unincorporated business or professional practice □ Working without pay in family business
264		274	-	 □ Private FOR PROFIT company, business, or individual for wages, salary, or commission □ Private NOT-FOR-PROFIT, tax-exempt, or charitable organization □ Government – Federal □ Government – State or local (city, borough, etc.) □ Self-employed in own incorporated or unincorporated business or professional practice □ Working without pay in family business
265			-	 □ Private FOR PROFIT company, business, or individual for wages, salary, or commission □ Private NOT-FOR-PROFIT, tax-exempt, or charitable organization □ Government – Federal □ Government – State or local (city, borough, etc.) □ Self-employed in own incorporated or unincorporated business or professional practice □ Working without pay in family business
266		276	-	 □ Private FOR PROFIT company, business, or individual for wages, salary, or commission □ Private NOT-FOR-PROFIT, tax-exempt, or charitable organization □ Government – Federal □ Government – State or local (city, borough, etc.) □ Self-employed in own incorporated or unincorporated business or professional practice □ Working without pay in family business
267		277	-	 □ Private FOR PROFIT company, business, or individual for wages, salary, or commission □ Private NOT-FOR-PROFIT, tax-exempt, or charitable organization □ Government – Federal □ Government – State or local (city, borough, etc.) □ Self-employed in own incorporated or unincorporated business or professional practice □ Working without pay in family business

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48a. How many weeks did work in 2013? b. How many hours did usually work each week in 2013?	
Week in 2013?	
Count paid vacation, paid sick leave, and military service.	
military service.	
291 301	
Weeks	
or ∞ □ None – <i>SKIP to 49b</i>	
292 302	
Weeks	
or ∞ □ None − <i>SKIP to 49b</i>	
293 303	
Weeks	
or ∞ □ None – <i>SKIP to 49b</i>	
294 304	
Weeks	
or oo □ None − <i>SKIP to 49b</i>	
295 305	
Weeks	
or on □ None − <i>SKIP to 49b</i>	
296 306	
Weeks	
or ∞ □ None – <i>SKIP to 49b</i>	
297 307	
Weeks	
or None – SKIP to 49b	

	The following questions are about income received during 2013? If an exact amount is not known,				
49a. Did earn income from wages, salary, commissions, bonuses, or tips?	b. Did earn any income from (his/her) own farm or nonfarm business, proprietorship, or partnership?	C. Did receive any interest, dividends, net rental or royalty income, or income from estates and trusts? Include even small amounts credited to an account.			
Yes – How much from all jobs? Report the amount before deductions for taxes, bonds, dues or other items 311 \$	Yes - How much? Report net income after business expenses \$00 Annual amount - Dollars 1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ Yes - How much?			
Yes – How much from all jobs? Report the amount before deductions for taxes, bonds, dues or other items 313 \$	Yes - How much? Report net income after business expenses \$00 Annual amount - Dollars 1 \[\text{No} \] 2 \[\text{Loss} \]	☐ Yes - How much?			
Yes - How much from all jobs? Report the amount before deductions for taxes, bonds, dues or other items 315 \$	Yes - How much? Report net income after business expenses \$00 Annual amount - Dollars 1 \ \text{No} \ 2 \ \text{Loss}	☐ Yes - How much?			
Yes - How much from all jobs? Report the amount before deductions for taxes, bonds, dues or other items 317 \$ 00 Annual amount - Dollars	Yes - How much? Report net income after business expenses \$00 Annual amount - Dollars 1 \[No \] 2 \[Loss \]	☐ Yes - How much?			
Yes - How much from all jobs? Report the amount before deductions for taxes, bonds, dues or other items 319 \$00 Annual amount - Dollars	Yes - How much? Report net income after business expenses 339 \$00 Annual amount - Dollars 1 \[\] No 2 \[\] Loss	☐ Yes – How much?			
Yes - How much from all jobs? Report the amount before deductions for taxes, bonds, dues or other items 321 \$	Yes - How much? Report net income after business expenses \$00 Annual amount - Dollars 1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ Yes - How much?			
Yes – How much from all jobs? Report the amount before deductions for taxes, bonds, dues or other items	Yes - How much? Report net income after business expenses \$00 Annual amount - Dollars 1 \ \text{No} 2 \ \text{Loss}	☐ Yes - How much?			

Section I - OCCUPIED UNITS - Continued			
49d. Did receive any Social Security or Railroad Retirement payments? Include payments as a retired worker, dependent, or disabled worker.	e. Did receive any income from government programs for Supplemental Security Income (SSI), Family Assistance/Temporary Assistance for Needy Families (TANF), Safety Net, or any other public assistance or public welfare payments, including shelter allowance?	f. Did receive any income from retirement, survivor, or disability pensions? Include payments from companies, unions, Federal, State, or local governments and the U.S. military. Do NOT include Social Security.	
☐ Yes – How much? \$ 00 Annual amount – Dollars 372 1 ☐ No	□ Yes - How much? \$ 00 Annual amount - Dollars 392 1 □ No	☐ Yes - How much? 411 \$ 00 Annual amount - Dollars 412 1 ☐ No	
☐ Yes – How much? 373 \$ 00 Annual amount – Dollars	□ Yes - How much? 393 \$00 Annual amount - Dollars 394 ₁ □ No	Yes – How much? 413 \$ 00 Annual amount – Dollars 414 1 \[\text{No} \]	
☐ Yes - How much? \$ 00 Annual amount - Dollars 376 1 ☐ No	□ Yes - How much? 395 \$ 00 Annual amount - Dollars 396 1 □ No	☐ Yes - How much? 415 \$00 Annual amount - Dollars 416 1 ☐ No	
Yes – How much? \$ 00 Annual amount – Dollars	□ Yes – How much? ✓ \$ 00 Annual amount – Dollars	Yes – How much? \$ 00 Annual amount – Dollars	
378 1 □ No □ Yes - How much? 379 \$ 00 Annual amount - Dollars	398 1 □ No □ Yes - How much? \$ Annual amount - Dollars	418 1 □ No □ Yes − How much? 419 \$. 00 Annual amount − Dollars	
380 1 □ No □ Yes – How much? \$00 Annual amount – Dollars	400 1 □ No □ Yes - How much? 401 \$00 Annual amount - Dollars	420 1 □ No □ Yes - How much? 421 \$00 Annual amount - Dollars	
382 1 □ No □ Yes – How much?	402 1 □ No □ Yes - How much? □	422 1 □ No □ Yes - How much? ✓	
\$ 00 Annual amount – Dollars 384 1 _ No	\$ 00 Annual amount – Dollars	\$ 00 Annual amount – Dollars 424 1 □ No	

	Section I - OCCUPIED UNITS - Continued		
49g.	Did receive any income from Veterans' (VA) payments, unemployment compensation, child support, alimony, or any other regular source of income? Do NOT include lump-sum payments such as money from an inheritance or the sale of a home.	50a. Are you/Is currently enrolled, either part-time or full time in any of these? (Read categories and mark all that apply)	
431	□ Yes – How much? \$00 Annual amount – Dollars	1 GED program 2 High school 3 College 4 Graduate or professional degree program 5 Occupational, vocational, or apprenticeship program 6 Literacy or ESL program 7 No, not enrolled	
433	□ Yes – How much? \$ Annual amount – Dollars	1 GED program High school College Graduate or professional degree program Occupational, vocational, or apprenticeship program Literacy or ESL program No, not enrolled	
435	□ Yes – How much? \$ 00 Annual amount – Dollars	1 GED program High school College Graduate or professional degree program Occupational, vocational, or apprenticeship program Literacy or ESL program No, not enrolled	
437	□ Yes – How much? \$ 00 Annual amount – Dollars	666 1 GED program 2 High school 3 College 4 Graduate or professional degree program 5 Occupational, vocational, or apprenticeship program 6 Literacy or ESL program 7 No, not enrolled	
439	□ Yes – How much? \$ 00 Annual amount – Dollars	667 1 ☐ GED program 2 ☐ High school 3 ☐ College 4 ☐ Graduate or professional degree program 5 ☐ Occupational, vocational, or apprenticeship program 6 ☐ Literacy or ESL program 7 ☐ No, not enrolled	
441	□ Yes – How much? \$ Annual amount – Dollars	1 ☐ GED program ☐ High school ☐ College ☐ Graduate or professional degree program ☐ Occupational, vocational, or apprenticeship program ☐ Literacy or ESL program ☐ No, not enrolled	
443	□ Yes – How much? \$ Annual amount – Dollars	1 GED program High school Ged College Graduate or professional degree program Occupational, vocational, or apprenticeship program Literacy or ESL program No, not enrolled	

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		Section I - OCCUPIED UNITS -	Continued
50	b. How much school have completed?	you/has	CHECK ITEM H Is this the last person listed?
471	01 ☐ No school completed 02 ☐ Up to 6th grade 03 ☐ 7th or 8th grade 04 ☐ 9th, 10th, 11th, or 12th grade but no H.S. diploma 05 ☐ H.S. diploma	o6 ☐ Some college but no degree o7 ☐ Associate degree o8 ☐ College graduate o9 ☐ Some graduate/professional training 10 ☐ Graduate/professional degree	☐ Yes – GO to 51 ☐ No – Return to Check Item G on page 12 for the next person
472	o1 ☐ No school completed o2 ☐ Up to 6th grade o3 ☐ 7th or 8th grade o4 ☐ 9th, 10th, 11th, or 12th grade but no H.S. diploma o5 ☐ H.S. diploma	o6 ☐ Some college but no degree o7 ☐ Associate degree o8 ☐ College graduate o9 ☐ Some graduate/professional training 10 ☐ Graduate/professional degree	☐ Yes – GO to 51 ☐ No – Return to Check Item G on page 12 for the next person
473	o1 ☐ No school completed o2 ☐ Up to 6th grade o3 ☐ 7th or 8th grade o4 ☐ 9th, 10th, 11th, or 12th grade but no H.S. diploma o5 ☐ H.S. diploma	o6 ☐ Some college but no degree o7 ☐ Associate degree o8 ☐ College graduate o9 ☐ Some graduate/professional training 10 ☐ Graduate/professional degree	☐ Yes – GO to 51 ☐ No – Return to Check Item G on page 12 for the next person
474	01 ☐ No school completed 02 ☐ Up to 6th grade 03 ☐ 7th or 8th grade 04 ☐ 9th, 10th, 11th, or 12th grade but no H.S. diploma 05 ☐ H.S. diploma	o6 ☐ Some college but no degree o7 ☐ Associate degree o8 ☐ College graduate o9 ☐ Some graduate/professional training 10 ☐ Graduate/professional degree	☐ Yes – GO to 51 ☐ No – Return to Check Item G on page 12 for the next person
475	01 ☐ No school completed 02 ☐ Up to 6th grade 03 ☐ 7th or 8th grade 04 ☐ 9th, 10th, 11th, or 12th grade but no H.S. diploma 05 ☐ H.S. diploma	o6 ☐ Some college but no degree o7 ☐ Associate degree o8 ☐ College graduate o9 ☐ Some graduate/professional training 10 ☐ Graduate/professional degree	☐ Yes – GO to 51 ☐ No – Return to Check Item G on page 12 for the next person
476	 01 ☐ No school completed 02 ☐ Up to 6th grade 03 ☐ 7th or 8th grade 04 ☐ 9th, 10th, 11th, or 12th grade but no H.S. diploma 05 ☐ H.S. diploma 	oo ☐ Some college but no degree or ☐ Associate degree os ☐ College graduate os ☐ Some graduate/professional training on ☐ Graduate/professional degree	☐ Yes – GO to 51 ☐ No – Return to Check Item G on page 12 for the next person
477	01 ☐ No school completed 02 ☐ Up to 6th grade 03 ☐ 7th or 8th grade 04 ☐ 9th, 10th, 11th, or 12th grade but no H.S. diploma 05 ☐ H.S. diploma	o6 ☐ Some college but no degree o7 ☐ Associate degree o8 ☐ College graduate o9 ☐ Some graduate/professional training 10 ☐ Graduate/professional degree	☐ Yes – GO to 51 ☐ No – Return to Check Item G on page 12 for the next person

apartment (house)? Do not count cellular phones, or any phone line that is used only for a computer or fax machine. b. How many adults (age 18 and over) in this household have a cell phone for personal use? If an individual shares a cell phone, count the adult if he or she has it for at least one-third of the time. 3. Would you say that, in general, your health is excellent, very good, good, fair, or poor? ST4			
CHECK Chec		children under age 15) receive public assistance or welfare payments from any	
C. Supplemental Security Income (SSI), including ald to the bilind or disabled 5550 1 Yes 2 No 3 Don't know d. Other - Specify 7 5511 Yes 2 No 3 Don't know 52a. Is there a land-line telephone in this apartment (house)? Do not count cellular phones, or any phone line that is used only for a computer or fax machine. b. How many adults (age 18 and over) in this household have a cell phone for personal use? 770 Persons If an individual shares a cell phone, count the adult if he or she has it for at least one-third of the time. 3. Would you say that, in general, your health is excellent, very good, good, fair, or poor? 2 No None CHECK REFER TO QUESTION 7a ON PAGE 5 FOR THE REFERENCE PERSON Persons Pers	a.	Temporary Assistance for Needy Families (TANF), or Family Assistance	548 1 ☐ Yes 2 ☐ No 3 ☐ Don't know
including aid to the blind or disabled d. Other - Specify 7 Specify Sp	b.	Safety Net Assistance	549 1 ☐ Yes 2 ☐ No 3 ☐ Don't know
Signature Sign			550 1 ☐ Yes 2 ☐ No 3 ☐ Don't know
apartment (house)? Do not count cellular phones, or any phone line that is used only for a computer or fax machine. Do not computer or fax machine.	d.	Other – Specify д	551 1 ☐ Yes 2 ☐ No 3 ☐ Don't know
apartment (house)? Do not count cellular phones, or any phone line that is used only for a computer or fax machine. Do not computer or fax machine.			
household have a cell phone for personal use? If an individual shares a cell phone, count the adult if he or she has it for at least one-third of the time. 3. Would you say that, in general, your health is excellent, very good, good, fair, or poor? 3. Good 4 Fair 5 Poor 6 Don't know CHECK REFER TO QUESTION 7a ON PAGE 5 FOR THE REFERENCE PERSON		apartment (house)? Do not count cellular phones, or any phone line that is used only	2 🗆 No
33. Would you say that, in general, your health is excellent, very good, good, fair, or poor? CHECK REFER TO QUESTION 7a ON PAGE 5 FOR THE REFERENCE PERSON Good	b.	How many adults (age 18 and over) in this household have a cell phone for personal use?	570 Persons
excellent, very good, good, fair, or poor? 2 Very good 3 Good 4 Fair 5 Poor 6 Don't know Born in New York City (box 07 marked) - SKIP to Closing Statement Born in U.S. outside New York City (box 09 or 10 marked) - SKIP to 55 Born outside U.S. (box 11-26 marked) - GO to 54a States as an immigrant? Don't know Born in New York City (box 09 or 10 marked) - SKIP to 55 Born outside U.S. (box 11-26 marked) - GO to 54a States as an immigrant? Don't know Born in New York City (box 09 or 10 marked) - SKIP to 55 Born outside U.S. (box 11-26 marked) - GO to 54a States as an immigrant? Don't know Born in New York City (box 09 or 10 marked) - SKIP to 55 Born outside U.S. (box 11-26 marked) - GO to 54a States as an immigrant? States as an immigrant States as an immigrant			l oo □ None
Born in New York City (box 07 marked) – SKIP to Closing Statement Born in U.S. outside New York City (box 09 or 10 marked) – SKIP to 55 Born outside U.S. (box 11–26 marked) – GO to 54a 54a. Did (reference person) move to the United States as an immigrant? b. In what year did (reference person) move to the United States? 55. In what year did (reference person) move to New York City? (most recent move if more than one) CLOSING STATEMENT Thank you for answering the survey questions. Before I turn it in, I'll review this form to make certain I didn't skip anything. If I did, it would be easier to call you back rather than return here. Would you please give me your phone number in case I need to follow-up? Area code Number			2
Born in New York City (box 07 marked) – SKIP to Closing Statement Born in U.S. outside New York City (box 09 or 10 marked) – SKIP to 55 Born outside U.S. (box 11–26 marked) – GO to 54a 54a. Did (reference person) move to the United States as an immigrant? b. In what year did (reference person) move to the United States? 55. In what year did (reference person) move to New York City? (most recent move if more than one) CLOSING STATEMENT Thank you for answering the survey questions. Before I turn it in, I'll review this form to make certain I didn't skip anything. If I did, it would be easier to call you back rather than return here. Would you please give me your phone number in case I need to follow-up? Area code Number	CHE	CK REFER TO QUESTION 72 ON PAGE 5 FOR TH	LE REFERENCE PERSON
b. In what year did (reference person) move to the United States? 55. In what year did (reference person) move to New York City? (most recent move if more than one) CLOSING STATEMENT Thank you for answering the survey questions. Before I turn it in, I'll review this form to make certain I didn't skip anything. If I did, it would be easier to call you back rather than return here. Would you please give me your phone number in case I need to follow-up? Area code Number		□ Born in New York City (box 07 marked) – S□ Born in U.S. outside New York City (box 09)	or 10 marked) – SKIP to 55
55. In what year did (reference person) move to New York City? (most recent move if more than one) CLOSING STATEMENT Thank you for answering the survey questions. Before I turn it in, I'll review this form to make certain I didn't skip anything. If I did, it would be easier to call you back rather than return here. Would you please give me your phone number in case I need to follow-up? Area code Number	4a.	Did (reference person) move to the United States as an immigrant?	
CLOSING STATEMENT Thank you for answering the survey questions. Before I turn it in, I'll review this form to make certain I didn't skip anything. If I did, it would be easier to call you back rather than return here. Would you please give me your phone number in case I need to follow-up? Area code Number O29	b.	In what year did (reference person) move to the United States?	561
Thank you for answering the survey questions. Before I turn it in, I'll review this form to make certain I didn't skip anything. If I did, it would be easier to call you back rather than return here. Would you please give me your phone number in case I need to follow-up? Area code Number O29	,	to New York City? (most recent move if more	562
Thank you for answering the survey questions. Before I turn it in, I'll review this form to make certain I didn't skip anything. If I did, it would be easier to call you back rather than return here. Would you please give me your phone number in case I need to follow-up? Area code Number O29		CLOSING STATEMENT	
029			. Before I turn it in. I'll review this form to
END INTERVIEW. Fill items N and O on the front cover.		make certain I didn't skip anything. If I did, it w return here. Would you please give me your ph	vould be easier to call you back rather than
		make certain I didn't skip anything. If I did, it we return here. Would you please give me your photographic Area code Number	vould be easier to call you back rather than
Notes		make certain I didn't skip anything. If I did, it we return here. Would you please give me your photographic Area code Number	vould be easier to call you back rather than one number in case I need to follow-up?
		make certain I didn't skip anything. If I did, it we return here. Would you please give me your photographic Area code Number	vould be easier to call you back rather than one number in case I need to follow-up?
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	Section II – V	ACANT UNITS
56.	If this apartment (house) is occupied, will it be the first occupancy since its construction, gut rehabilitation, or creation through conversion?	1 ☐ Yes, first occupancy 2 ☐ No, previously occupied 3 ☐ Don't know
нот	E - Questions 57–59a, 60a and 60b pertain to the build form in the same building.	ding. Be certain to mark (X) the same box for each
57.	How many units are in this building? If the respondent doesn't know, canvass the building and count the units.	519 01
58.	Does the owner of this building live in this building?	520 1 Yes 2 No 3 Don't know
59a.	How many stories are in this building? Count the basement if there are people living in it.	521 01 One - SKIP to 60c 02 Two 03 Three 04 Four 05 Five 06 6 to 10 07 11 to 20 08 21 to 40 09 41 or more
b.	On what floor is this unit? Enter the 2-digit floor number or mark (X) box "0" if basement unit. Enter the lowest floor number if on more than one floor.	0 ☐ Basement
60a.	Is there a passenger elevator in this building?	522 1 ☐ Yes 2 ☐ No − SKIP to 60c
b.	Is it possible to go from the sidewalk to a passenger elevator without going up or down any steps or stairs?	553 1 Yes 2 No 3 Don't know
C.	Is it possible to go from the sidewalk to this unit without going up or down any steps or stairs?	555 1 Yes 2 No 3 Don't know
61a.	How many rooms are in this apartment (house)? Do not count bathrooms, porches, balconies, halls, foyers, or half-rooms.	523
	Of these rooms, how many are bedrooms?	524 01 None 02 One 03 Two 04 Three 05 Four 06 Five 07 Six 08 Seven 09 Eight or more
Notes		

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	Section II - VACAN	T UNIT	rs –	Continued
62a.	Does this apartment (house) have complete plumbing facilities; that is, hot and cold piped water, a flush toilet, and a bathtub or shower?	525	1 🗌	Yes, has complete plumbing facilities – <i>GO to 62b</i> No, has some but not all facilities in this apartment (house) No plumbing facilities in this apartment (house) SKIP to 63a
	Are these facilities for the exclusive use of the intended occupants of this apartment (house) or are they also intended for use by the occupants of another apartment (house)?	526		For the exclusive use of the intended occupants of this apartment (house) Also intended for use by the occupants of another apartment (house)
	Does this apartment (house) have complete kitchen facilities? Complete kitchen facilities include a sink with piped water, a range or cookstove, and a refrigerator.	527	1 🗌	Yes, has complete kitchen facilities – <i>GO to 63b</i> No, has some but not all facilities in this apartment (house) No kitchen facilities in this apartment (house), but facilities available in building No kitchen facilities in this building
	Are these facilities for the exclusive use of the intended occupants of this apartment (house) or are they also intended for use by the occupants of another apartment (house)?	 528 		For the exclusive use of the intended occupants of this apartment (house) Also intended for use by the occupants of another apartment (house)
64.	How is this apartment (house) heated – by fuel oil, utility gas, electricity, or with some other fuel?	529	2	Fuel oil Utility gas Electricity Other fuel (including CON ED steam) Don't know
65.	Is this apartment (house) part of a condominium			
	or cooperative building or development? A condominium is a building or development with individually owned apartments or houses having commonly owned areas and grounds. A cooperative or co-op is a building or development that is owned by its shareholders.	530	з 🔲	No Yes, a condominium Yes, a cooperative Don't know
66.	How long has this apartment (house) been vacant?	531	2	Less than 1 month 1 up to 2 months 2 up to 3 months 3 up to 6 months 6 up to 12 months 1 year or more
67a.	Before this apartment (house) became vacant was it owner or renter occupied?	532	2 3	Owner occupied Renter occupied Never previously occupied Don't know
b.	Before this apartment (house) became vacant was it part of a condominium or cooperative building or development?	533	3 🗌	No Yes, a condominium Yes, a cooperative Don't know
Notes				

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	Section II - VACA	N 1 ON 119 - Continued
68.	Is this apartment (house) -	1 ☐ Available for rent? – SKIP to 70 2 ☐ Available for sale only? – SKIP to closing statement below.
		3 ☐ Not available for rent or sale? – <i>GO to 69</i>
69.	What are the reasons that this apartment (house) is not available for sale or rent? List all reasons mentioned, and then be sure to mark (X) ONLY one box for the primary reason.	Sold, not yet occupied 02 Sold, not yet occupied 03 Unit or building is undergoing renovation 04 Unit or building is awaiting renovation 05 Being converted to nonresidential purposes 06 There is a legal dispute involving the unit 07 Being converted or awaiting conversion to condominium or cooperative 08 Held for occasional, seasonal, or recreational use 09 The owner cannot rent or sell at this time due to personal problems (e.g. age or illness) 10 Being held pending sale of building 11 Being held for planned demolition 12 Held for other reasons − Specify Held for other reasons − Specify Held for other reasons − Specify
	What is the MONTHLY asking rent?	J
	(If rent is paid other than monthly, refer to the manual on how to convert it.) INTERVIEWER: If the respondent indicates that the monthly rent for the vacant unit is based upon the income of the tenant – ask for a rent range such as \$700–\$800. Then enter the midpoint of the range; in this case \$750.	536 \$ Per month
	CLOSING STATEMENT Thank you for answering the survey question to make certain I didn't skip anything. If I didn't skip anything.	ons. Before I turn it in, I'll review this form
	rather than return here. Would you please g to follow-up?	ive me your phone number in case I need
	Area code Number	
	029	i 1
	END INTERVIEW. Fill	item N on the front cover.
Note	es	
I		

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C. RECORD OF VISITS (Continued from page 1)					
Date	Time	Remarks			
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				
	CREW LEADER/ASSISTANT				
	a.m. p.m.				
	a.m. p.m.				
	a.m. p.m.				

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