



Department of Social Welfare and Development

National Household Targeting Office HOUSEHOLD ASSESSMENT FORM

Page 1 of 4



Time Started: : :
Time Ended: : :

I. IDENTIFICATION

1. Household ID: 0943984073946 4PS ID: 097332008-4036-0001 GRANTEE: ARA, HULMA A. ENCODED: VERIFIED:

2. Address: IX Region ZDS Province ZAMBANGA City / Municipality Barangay

Homeless: Purok / Sitio / Zone / District _____ Street Address (Bldg. Name / Bldk. / Lot / House / Unit No.) _____

3. Number of Households in the housing unit: _____

4. Contact Number: _____

II. SOCIO ECONOMIC INFORMATION

5. In what type of building / house does the household reside? (check one)

- 1. Single House
- 2. Duplex
- 3. Multi Residential (three units or more)
- 4. Commercial / Industrial / Agricultural building
- 5. Institutional living quarters
- 6. Other housing unit, specify _____

6. What type of construction materials are the roofs made of? (check one)

- 1. Strong materials
- 2. Light materials
- 3. Salvaged / makeshift materials
- 4. Mixed but predominantly strong materials
- 5. Mixed but predominantly light materials
- 6. Mixed but predominantly salvaged materials
- 7. Not applicable

7. What type of construction materials are the outer walls made of? (check one)

- 1. Strong materials
- 2. Light materials
- 3. Salvaged / makeshift materials
- 4. Mixed but predominantly strong materials
- 5. Mixed but predominantly light materials
- 6. Mixed but predominantly salvaged materials
- 7. Not applicable

8. How many bedrooms are there in the housing unit?

9. What is the tenure status of the housing unit occupied by the household? (Check one)

- 1. Own house and lot, or owner-like possession
- 2. Rented house/room, including lot
- 3. Own house, rented lot
- 4. Own house, rent-free lot with consent of owner
- 5. Own house, rent-free lot without consent of owner
- 6. Rent-free house and lot with consent of owner
- 7. Rent-free house and lot without consent of owner
- 8. Not applicable

10. What kind of toilet facility does the household use? (check one)

- 1. Water-sealed, sewer / septic tank, used exclusively by the household
- 2. Water-sealed, sewer / septic tank, shared with other households
- 3. Water-sealed, other depository, used exclusively by the household
- 4. Water-sealed, other depository, shared with other households
- 5. Closed pit
- 6. Open pit
- 7. Others, specify _____

11. Is there electricity in the building/house? (check one)

- 1. Yes
- 2. No

12. In the past month, what did the household use as a source of light? (Let respondent enumerate; if the response is solely kerosene, check Yes.)

- 1. Yes
- 2. No

13. What is the household's main source of water? (check one)

- 1. Own use, faucet, community water system
- 2. Shared faucet, community water system
- 3. Own use, tubed / piped deep well
- 4. Shared, tubed / piped deep well
- 5. Tubed / piped shallow well
- 6. Dug Well
- 7. Protected Spring
- 8. Unprotected Spring
- 9. Lake, river, rain
- 10. Peddler
- 11. Others

14. How many of each of the appliances / durables does the household own?

- 1. Radio / Radio Cassette
- 2. Television Set
- 3. CD / VCD / DVD Player
- 4. Audio Component / Stereo Set
- 5. Refrigerator / Freezer
- 6. Washing Machine
- 7. Air Conditioning
- 8. Car / Jeep
- 9. Landline
- 10. Cellular Phone
- 11. Personal Computer
- 12. Stove with Oven / Gas Range
- 13. Motorized Boat / Banca
- 14. Motorcycle / Tricycle

15. In the past month, what did the household use for cooking? (Let respondent enumerate; if the response is solely fuel wood, check Yes.)

- 1. Yes
- 2. No

16. What are the programs and services received by the household from 2009 up to present?

- Yes No
- 1. Scholarship
 - 2. Day Care Service / ECCD
 - 3. Supplementary Feeding
 - 4. SLP/SEA-K
 - 5. Skills / Livelihood Training
 - 6. Housing
 - 7. Microcredit
 - 8. Pantawid Pamilya Pilipino Program (4Ps)
 - 9. Philhealth
 - 10. Subsidized Rice
 - 11. Unconditional Cash Transfer (UCT) Program
 - 12. Social Pension
 - 13. KALAHI-CIDSS
 - 14. Disaster Relief Assistance
 - 15. Emergency Financial Assistance
 - 16. Others, specify _____

17. Does the household rent out lands, spaces, buildings, or other properties?

- 1. Yes
- 2. No

18. Is the property being rented out non-agricultural or agricultural?

- 1. Non-Agricultural
- 2. Agricultural
- 3. Not applicable

19. Did the household receive income from these rentals in the past six (6) months?

- 1. Yes
- 2. No
- 3. Not applicable

20. In the past six (6) months did any member of the household receive income in cash any gifts, support, relief, or other forms of assistance from abroad?

- 1. Yes
- 2. No

21. Do you consider your household as part of an indigenous People's Group?

- 1. Yes, please specify: _____
- 2. No

ahanan
MILYANG NANGAILANGAN

for this household, the
National Household

by us.

integrity and protected

provisions

024
YYYY

020
YYYY

