






CPH FORM 3				REPUBLIC OF THE PHILIPPINES						3A																																																																																																								
Approval Number : PSA-1962-03		Expiry Date : 31 December 2020		PHILIPPINE STATISTICS AUTHORITY																																																																																																														
OBLIGATION TO PROVIDE INFORMATION: Section 25 of Republic Act 10625 (Obligation to Provide Information) stipulates that all respondents whether natural or legal persons are required to provide truthful and complete information to all statistical inquiries or surveys conducted by the Philippine Statistics Authority (PSA).			 SAMPLE HOUSEHOLD QUESTIONNAIRE				CONFIDENTIALITY: The PSA adheres and commits to the confidentiality of information as stipulated in Section 26 of RA 10625 (Confidentiality of Information) and Section 8 of RA 10173 (Confidentiality). All data obtained herein shall be held strictly confidential, and will not be used for taxation, investigation or law enforcement purposes.																																																																																																											
<p>Dear Sir/Madam:</p> <p>The Philippine Statistics Authority (PSA) is conducting the 2020 Census of Population and Housing (2020 CPH) to gather data on the demographic, socioeconomic, and housing characteristics of all persons, households, and institutional living quarters (ILQ) in all barangays nationwide. These data will be used by government planners, policy makers, and administrators in formulating their social and economic development plans, policies, and programs.</p> <p>The conduct of the 2020 CPH is in accordance with Republic Act (RA) No. 10625 (Philippine Statistical Act of 2013), which authorizes the PSA to prepare and conduct periodic censuses on population, housing, and other sectors of economy. Batas Pambansa Blg. 72 and Executive Order No. 352 also stipulate the conduct of a census of population and housing every ten (10) years.</p> <p>Section 25 of RA 10625, states that all respondents whether natural or legal persons are obliged to provide TRUTHFUL AND COMPLETE ANSWERS to the 2020 CPH. Hence, we are requesting you to please answer all the questions that will be asked by our census interviewer. Rest assured that the data that you will furnish in this census shall be considered PRIVILEGED COMMUNICATION and as such shall be inadmissible as evidence in any proceeding. Provisions on CONFIDENTIALITY OF INFORMATION are stipulated in Section 26 of RA 10625 and Section 4 of Commonwealth Act No. 591.</p> <p>Moreover, please be informed that Section 4(e) of RA 10173 (Data Privacy Act of 2012) states that data privacy does not apply to "information necessary in order to carry out the functions of public authority which includes the processing of personal data for the performance by the independent agencies of their constitutionally and statutorily mandated functions."</p> <p>We appreciate your utmost cooperation and support for the success of the 2020 CPH.</p> <p>Thank you very much.</p> <div></div> <p>CLAIRE DENNIS S. MAPA, Ph.D. Undersecretary National Statistician and Civil Registrar General</p>																																																																																																																		
CERTIFICATION			GEOGRAPHIC IDENTIFICATION																																																																																																															
I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by the PSA.			BOOKLET <input type="checkbox"/> OF <input type="checkbox"/> BOOKLETS																																																																																																															
_____ ENUMERATOR SIGNATURE OVER PRINTED NAME			PROVINCE _____ <input type="text"/>																																																																																																															
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_____ TEAM SUPERVISOR SIGNATURE OVER PRINTED NAME			BARANGAY _____ <input type="text"/>																																																																																																															
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_____ CO/RSSO/PSO SUPERVISOR SIGNATURE OVER PRINTED NAME			HOUSEHOLD SERIAL NUMBER _____ <input type="text"/>																																																																																																															
_____ DATE REVIEWED (mm/dd)			LINE NUMBER OF THE RESPONDENT _____ <input type="text"/>																																																																																																															
			NAME OF THE HOUSEHOLD HEAD _____ LAST NAME FIRST NAME																																																																																																															
			ADDRESS _____ HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME																																																																																																															
INTERVIEW RECORD																																																																																																																		
<table><tr><th>VISIT NUMBER</th><th>1</th><th>2</th><th>3</th><th>SUMMARY OF VISIT</th></tr><tr><td>DATE MONTH/DAY</td><td>____ (mm/dd)</td><td>____ (mm/dd)</td><td>____ (mm/dd)</td><td>NUMBER OF VISIT/S MADE <input type="text"/></td></tr><tr><td>TIME BEGAN HOUR:MINUTE</td><td>____ AM/PM</td><td>____ AM/PM</td><td>____ AM/PM</td><td>RESULT OF FINAL VISIT * <input type="text"/></td></tr><tr><td>TIME ENDED HOUR:MINUTE</td><td>____ AM/PM</td><td>____ AM/PM</td><td>____ AM/PM</td><td>NUMBER OF HOUSEHOLD MEMBERS <input type="text"/></td></tr><tr><td>RESULT OF VISIT</td><td>____</td><td>____</td><td>____</td><td>NUMBER OF MALES <input type="text"/></td></tr><tr><td colspan="4">CODES FOR THE RESULT OF VISIT</td><td>NUMBER OF FEMALES <input type="text"/></td></tr><tr><td colspan="4">1 COMPLETED * 4 REFUSED</td><td>ENUMERATOR'S CODE <input type="text"/></td></tr><tr><td colspan="4">2 NOT YET COMPLETED (FOR CALLBACK)</td><td>MODE OF DATA COLLECTION <input type="text"/></td></tr><tr><td colspan="4">3 ENTIRE HOUSEHOLD IS ABSENT/AWAY DURING THE ENUMERATION PERIOD *</td><td>1 PAPER AND PENCIL PERSONAL INTERVIEW (PAPI)</td></tr><tr><td colspan="4"></td><td>2 SELF-ADMINISTERED QUESTIONNAIRE (SAQ)</td></tr><tr><td colspan="4"></td><td>3 COMPUTER-ASSISTED PERSONAL INTERVIEW (CAPI)</td></tr><tr><td colspan="12">APPOINTMENT FOR NEXT VISIT</td></tr><tr><td>VISIT NUMBER</td><td>1</td><td>2</td><td>3</td><td colspan="8"></td></tr><tr><td>DATE MONTH/DAY</td><td>____ (mm/dd)</td><td>____ (mm/dd)</td><td>____ (mm/dd)</td><td colspan="8"></td></tr><tr><td>TIME HOUR:MINUTE</td><td>____ AM/PM</td><td>____ AM/PM</td><td>____ AM/PM</td><td colspan="8"></td></tr></table>												VISIT NUMBER	1	2	3	SUMMARY OF VISIT	DATE MONTH/DAY	____ (mm/dd)	____ (mm/dd)	____ (mm/dd)	NUMBER OF VISIT/S MADE <input type="text"/>	TIME BEGAN HOUR:MINUTE	____ AM/PM	____ AM/PM	____ AM/PM	RESULT OF FINAL VISIT * <input type="text"/>	TIME ENDED HOUR:MINUTE	____ AM/PM	____ AM/PM	____ AM/PM	NUMBER OF HOUSEHOLD MEMBERS <input type="text"/>	RESULT OF VISIT	____	____	____	NUMBER OF MALES <input type="text"/>	CODES FOR THE RESULT OF VISIT				NUMBER OF FEMALES <input type="text"/>	1 COMPLETED * 4 REFUSED				ENUMERATOR'S CODE <input type="text"/>	2 NOT YET COMPLETED (FOR CALLBACK)				MODE OF DATA COLLECTION <input type="text"/>	3 ENTIRE HOUSEHOLD IS ABSENT/AWAY DURING THE ENUMERATION PERIOD *				1 PAPER AND PENCIL PERSONAL INTERVIEW (PAPI)					2 SELF-ADMINISTERED QUESTIONNAIRE (SAQ)					3 COMPUTER-ASSISTED PERSONAL INTERVIEW (CAPI)	APPOINTMENT FOR NEXT VISIT												VISIT NUMBER	1	2	3									DATE MONTH/DAY	____ (mm/dd)	____ (mm/dd)	____ (mm/dd)									TIME HOUR:MINUTE	____ AM/PM	____ AM/PM	____ AM/PM								
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LINE NUMBER	3B POPULATION CENSUS QUESTIONS							
	GENERAL INSTRUCTIONS: 1. WRITE THE DETAILED ANSWER/DESCRIPTION ON THE LINES PROVIDED. 2. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. 3. REFER TO THE CODES FOR ITEM P2 AT THE BOTTOM OF THIS PAGE.							
	FOR ALL PERSONS							
	Name	Relationship to the Household Head	Sex	Date of Birth	Age	Birth Registration		Marital Status
	P1	P2	P3	P4	P5	P6	P7	P8
	Who is the head of this household? Who are the persons usually residing here as of May 1, 2020? ORDER OF LISTING: • Head • Spouse of the head • Never-married children of the head/spouse, from the oldest to the youngest • Ever-married children of the head/spouse and their families, from the oldest to the youngest • Other relatives of the head • Nonrelatives of the head	What is ____'s relationship to the head of this household?	Is ____ male or female? 1 Male 2 Female	In what month and year was ____ born? Month (MM) Year (YYYY)	What is ____'s age as of his/her last birthday?	Was ____'s birth registered with the Local Civil Registry Office? 1 Yes 2 No 3 Don't know	Has ____ ever had a copy of his/her birth certificate? 1 Yes 2 No 3 Don't know	Is ____ single, married, common law/live-in, widowed, or divorced/separated/annulled? 1 Single 2 Married 3 Common-law/Live-in 4 Widowed 5 Divorced/Separated/Annulled 6 Unknown FOR CHILDREN "0" TO "9" YEARS OLD, WRITE CODE "1" (SINGLE) IN THE BOX.
	1	LAST NAME FIRST NAME	SPECIFY 	 MM YYYY	 	 	 	
	2	LAST NAME FIRST NAME	SPECIFY 	 MM YYYY	 	 	 	
	3	LAST NAME FIRST NAME	SPECIFY 	 MM YYYY	 	 	 	
	4	LAST NAME FIRST NAME	SPECIFY 	 MM YYYY	 	 	 	
5	LAST NAME FIRST NAME	SPECIFY 	 MM YYYY	 	 	 	 	
6	LAST NAME FIRST NAME	SPECIFY 	 MM YYYY	 	 	 	 	
CHECK FOR PERSONS NOT YET LISTED		INDICATOR FOR ADDITIONAL BOOKLET		CODES FOR ITEM P2 - RELATIONSHIP TO THE HOUSEHOLD HEAD				
Are there other persons in this household who were not yet listed, such as infants, small children, elderly persons, and overseas workers? 1 Yes, ADD TO THE LIST. 2 None		ARE THERE MORE THAN SIX (6) MEMBERS IN THIS HOUSEHOLD? 1 Yes, USE ADDITIONAL BOOKLET. 2 No		01 Head 02 Spouse 03 Son 04 Daughter 05 Stepson 06 Stepdaughter 07 Son-in-law 08 Daughter-in-law 09 Grandson 10 Granddaughter 11 Father 12 Mother 13 Father-in-law 14 Mother-in-law 15 Brother 16 Sister 17 Brother-in-law 18 Sister-in-law 19 Uncle 20 Aunt 21 Nephew 22 Niece 23 Boarder 24 Domestic helper 25 Other relative 26 Nonrelative				

	POPULATION CENSUS QUESTIONS										3C
LINE NUMBER	GENERAL INSTRUCTIONS: 1. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINES PROVIDED. 2. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. 3. REFER TO THE CODE BOOK FOR THE CODES IN ITEMS P9, P11, AND P12.										
	FOR ALL PERSONS					FOR ALL PERSONS 5 YEARS OLD AND OVER					
	Religious Affiliation	Citizenship		Ethnicity	Functional Difficulty						
	P9	P10	P11	P12	P13						
	What is _____'s religious affiliation?	Is _____ a citizen of the Philippines?		What is _____'s ethnicity by descent/ blood relation/ consanguinity?	The following questions ask about difficulties a person may have doing certain activities because of a HEALTH PROBLEM.						
					Does _____ have any difficulty/problem in...?						
					a	b	c	d	e	f	
					Seeing, even if wearing glasses	Hearing, even if using hearing aid	Walking or climbing steps	Remembering or concentrating	Self-caring (such as washing all over or dressing)	Communicating using his/her usual (customary) language	
					MENTION THESE CATEGORIES:						
					1 – NO, no difficulty	2 – YES, some difficulty	3 – YES, a lot of difficulty	4 – Cannot do it at all			
1	SPECIFY <div></div>		SPECIFY <div></div>	SPECIFY <div></div>	a	b	c	d	e	f	
2	SPECIFY <div></div>		SPECIFY <div></div>	SPECIFY <div></div>							
3	SPECIFY <div></div>		SPECIFY <div></div>	SPECIFY <div></div>							
4	SPECIFY <div></div>		SPECIFY <div></div>	SPECIFY <div></div>							
5	SPECIFY <div></div>		SPECIFY <div></div>	SPECIFY <div></div>							
6	SPECIFY <div></div>		SPECIFY <div></div>	SPECIFY <div></div>							
REMARKS											

LINE NUMBER	3D POPULATION CENSUS QUESTIONS							
	GENERAL INSTRUCTIONS: 1. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINES PROVIDED. 2. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. 3. REFER TO THE CODE BOOK FOR THE CODES IN ITEMS P14, P15, AND P19.							
	FOR ALL PERSONS 5 YEARS OLD AND OVER				FOR ALL PERSONS 5 TO 24 YEARS OLD		FOR ALL PERSONS 15 YEARS OLD AND OVER	
	Residence of Mother at the Time of Birth of the Household Member	Residence Five (5) Years Ago	Literacy	Highest Grade/Year Completed	School Attendance	Place of School	Overseas Worker	
	P14	P15	P16	P17	P18	P19	P20	
	In what province and city/municipality did _____'s mother reside at the time of _____'s birth?	In what province and city/ municipality did _____ reside on May 1, 2015?	Can _____ read and write a simple message in any language or dialect? 1 Yes 2 No	What is the highest grade/year completed by _____ ? REFER TO THE CODES AT THE BOTTOM OF THIS PAGE, EXCEPT FOR THE CODES FOR SPECIFIC COURSES.	Did _____ attend school at anytime from June 2019 to May 2020? 1 Yes 2 No IF NO, GO TO ITEM P20.	In what province and city/ municipality did _____ attend school?	Is _____ an overseas worker? 1 Yes 2 No	
	1	PROVINCE CITY/MUNICIPALITY <div><div></div><div></div><div></div><div></div></div> <div>PROV CITY/MUN</div>	PROVINCE CITY/MUNICIPALITY <div><div></div><div></div><div></div><div></div></div> <div>PROV CITY/MUN</div>	<div></div>	SPECIFY <div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div></div>	PROVINCE CITY/MUNICIPALITY <div><div></div><div></div><div></div><div></div></div> <div>PROV CITY/MUN</div>	<div></div>
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CODES FOR ITEM P17 – HIGHEST GRADE/YEAR COMPLETED								
00000 No grade completed								
K TO 12 PROGRAM		K TO 12 PROGRAM	OLD CURRICULUM	OLD CURRICULUM	INCLUSIVE/SPECIAL NEEDS EDUCATION PROGRAM	COLLEGE		
PRESCHOOL		JUNIOR HIGH SCHOOL	PRESCHOOL	HIGH SCHOOL	10002 Elementary	68100 1st Year		
01000 Kindergarten		24100 Grade 7	02000 Preschool	21000 1st Year	24002 High School	68200 2nd Year		
ELEMENTARY		24200 Grade 8	ELEMENTARY	22000 2nd Year	CONTINUING/SECOND-CHANCE EDUCATION PROGRAM	68300 3rd Year		
11100 Grade 1		24300 Grade 9	11000 Grade 1	23000 3rd Year	10003 Elementary	68400 4th Year		
12100 Grade 2		24400 Grade 10 graduate	12000 Grade 2	24000 4th Year	24003 High School	68500 5th Year		
13100 Grade 3		SENIOR HIGH SCHOOL	13000 Grade 3	25000 High school graduate	POST SECONDARY	68600 6th Year		
14100 Grade 4		IF GRADE 11 COMPLETER	14000 Grade 4		48880 Post secondary undergraduate	IF COLLEGE GRADUATE, SPECIFY COURSE.		
15100 Grade 5		OR GRADE 12 GRADUATE, SPECIFY GRADE LEVEL AND TRACK/STRAND	15000 Grade 5		IF GRADUATE OF POST SECONDARY, SPECIFY COURSE.	POST BACCALAUREATE		
16100 Grade 6 graduate			16000 Grade 6		58880 Short-cycle tertiary undergraduate	78880 Master's degree undergraduate		
			17000 Grade 6 graduate		IF GRADUATE OF SHORT-CYCLE TERTIARY, SPECIFY COURSE.	IF GRADUATE OF MASTER'S DEGREE, SPECIFY COURSE.		
			18000 Grade 7 graduate			88880 Doctorate degree undergraduate		
						IF GRADUATE OF DOCTORAL DEGREE, SPECIFY COURSE		

3F			HOUSING/HOUSEHOLD CENSUS QUESTIONS		
GENERAL INSTRUCTIONS:			1. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. 2. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINE PROVIDED FOR "OTHERS, SPECIFY" IN ITEMS B1 AND B3 TO B6 AND H2.		
ITEMS B1 TO B4 AND B7 ARE TO BE ANSWERED THROUGH OBSERVATION. IF DOUBTFUL, ASK THE RESPONDENT.			CODE		
B1 Type of building 1 Single house 2 Duplex 3 Apartment/accessoria/rowhouse 4 Condominium/condotel 5 Other multi-unit residential 6 Commercial/industrial/agricultural (e.g. office, factory, barn) 7 Institutional living quarter (e.g. hotel, hospital, convent, jail) 8 Other types of building (e.g. bus/trailer, boat, tent), SPECIFY _____ GO TO ITEM H5. 9 None (e.g. homeless, cart), END INTERVIEW.			<div></div>		
B2 Number of floors of the building 1 One floor (e.g. bungalow, including basement/mezzanine floor) 2 Two floors 3 Three floors 4 Four floors 5 Five to 10 floors 6 11 floors or more			<div></div>		
B3 Construction materials of the roof 1 Galvanized iron/aluminum 2 Concrete/clay tile 3 Half galvanized iron and half concrete 4 Wood/bamboo 5 Cogon/nipa/anhaw 6 Asbestos 7 Makeshift/salvaged/improvised materials 8 Others, SPECIFY _____			<div></div>		
B4 Construction materials of the outer walls 01 Concrete/brick/stone 02 Wood 03 Half concrete/brick/stone and half wood 04 Galvanized iron/aluminum 05 Bamboo/sawali/cogon/nipa 06 Asbestos 07 Glass 08 Makeshift/salvaged/improvised materials 09 Others, SPECIFY _____ 10 None			<div></div> <div></div>		
B5 Finishing materials of the floor of the housing unit 1 Ceramic tile/marble/granite 2 Cement/brick/stone 3 Wood plank 4 Wood tile/parquet 5 Vinyl/carpet tile 6 Linoleum 7 Others, SPECIFY _____ 8 None			<div></div>		
B6 Construction materials of the floor of the housing unit 1 Concrete 2 Wood 3 Coconut lumber 4 Bamboo 5 Earth/sand/mud 6 Makeshift/salvaged/improvised materials 7 Others, SPECIFY _____			<div></div>		
B7 State of repair of the building 1 Needs no repair/needs minor repair 2 Needs major repair 3 Dilapidated/condemned 4 Under renovation/being repaired 5 Under construction (ongoing) 6 Unfinished construction			<div></div>		
B8 Year building was built <i>When was this building built?</i> 01 2020 02 2019 03 2018 04 2017 05 2016 06 2011 – 2015 07 2001 – 2010 08 1991 – 2000 09 1981 – 1990 10 1980 or earlier 11 Don't know			<div></div> <div></div>		
D1 Floor area of the housing unit <i>What is the estimated floor area of this housing unit?</i> 01 Less than 5 sq.m. or Less than 54 sq.ft. 02 5 – 9 sq.m. or 54 – 107 sq.ft. 03 10 – 19 sq.m. or 108 – 209 sq.ft. 04 20 – 29 sq.m. or 210 – 317 sq.ft. 05 30 – 49 sq.m. or 318 – 532 sq.ft. 06 50 – 69 sq.m. or 533 – 748 sq.ft. 07 70 – 89 sq.m. or 749 – 963 sq.ft. 08 90 – 119 sq.m. or 964 – 1,286 sq.ft. 09 120 – 149 sq.m. or 1, 287 – 1,609 sq.ft. 10 150 – 199 sq.m. or 1, 610 – 2,147 sq.ft. 11 200 sq.m. and over or 2,148 sq.ft. and over			<div></div> <div></div>		
H1 Tenure status of the housing unit/lot <i>What is the tenure status of the housing unit and lot occupied by this household?</i> 1 Own or owner-like possession of the house and lot 2 Own house, rent lot 3 Own house, rent-free lot with consent of owner 4 Own house, rent-free lot without consent of owner 5 Rent house/room, including lot, GO TO ITEM H4 6 Rent-free house and lot with consent of owner, GO TO ITEM H5 7 Rent-free house and lot without consent of owner, GO TO ITEM H5			<div></div>		
H2 Acquisition of the housing unit <i>How did this household acquire this housing unit?</i> 1 Inherited, GO TO ITEM H5 2 Gift, GO TO ITEM H5 3 Company benefit, GO TO ITEM H5 4 Purchased 5 Others, SPECIFY _____, GO TO ITEM H5			<div></div>		

HOUSING/HOUSEHOLD CENSUS QUESTIONS			3G
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			CODE
<div>H3 Source of financing of the housing unit</div> <div>Did this household avail of the following sources of financing in the construction/purchase of this housing unit?</div> <div>WRITE CODE "1" IF THE ANSWER IS "YES"; OTHERWISE, WRITE CODE "2" IF THE ANSWER IS "NO". THEN GO TO ITEM H5.</div> <div><div>a) Own resources/interest-free loans from relatives/friends</div><div>b) Government assistance, PAG-IBIG, GSIS, SSS, LBP, and others</div><div>c) Private bank/foundation/cooperative</div><div>d) Employer assistance</div><div>e) Private persons</div><div>f) Others, SPECIFY</div></div>			<div><div></div><div></div><div></div><div></div><div></div><div></div></div>
<div>H4 Monthly rental of the housing unit</div> <div>How much is the monthly rental of this housing unit?</div> <div><div><div>1 PhP 500 or less</div><div>2 PhP 501 – 1,000</div><div>3 PhP 1,001 – 1,500</div></div><div><div>4 PhP 1,501 – 2,000</div><div>5 PhP 2,001 – 4,000</div><div>6 PhP 4,001 – 6,000</div></div><div><div>7 PhP 6,001 – 7,500</div><div>8 PhP 7,501 – 10,000</div><div>9 PhP 10,001 and over</div></div></div>			<div><div></div></div>
<div>H5 Usual manner of kitchen garbage disposal</div> <div>How does this household usually dispose kitchen garbage such as leftover food, peeling of fruits and vegetables, fish and chicken entrails, and others?</div> <div><div><div>1 Picked up by garbage truck</div><div>2 Dumping in individual pit (not burned)</div><div>3 Burning</div></div><div><div>4 Composting</div><div>5 Burying</div><div>6 Feeding to animals</div></div><div><div>7 Others, SPECIFY</div></div></div>			<div><div></div></div>
<div>H6 Kind of toilet facility</div> <div>What type of toilet facility does this household use?</div> <div><div><div>01 Flush to piped sewer system</div><div>02 Flush to septic tank</div><div>03 Flush to pit latrine</div><div>04 Flush to open drain</div><div>05 Flush to unknown depository/place</div></div><div><div>06 Ventilated improved latrine</div><div>07 Pit latrine with slab</div><div>08 Pit latrine without slab/open pit</div><div>09 Composting toilet</div><div>10 Bucket/pail system</div></div><div><div>11 Hanging toilet/hanging latrine</div><div>12 No facility/bush/field</div><div>13 Others, SPECIFY</div></div></div>			<div><div><div></div><div></div></div></div>
<div>H7 Fuel for lighting</div> <div>What type of fuel does this household use for lighting?</div> <div><div><div>1 Electricity</div><div>2 Kerosene (gaas)</div><div>3 Liquefied petroleum gas (LPG)</div><div>4 Oil (vegetable, animal, and others)</div></div><div><div>5 Solar panel/solar lamp</div><div>6 Others, SPECIFY</div><div>7 None</div></div></div>			<div><div></div></div>
<div>H8 Fuel for cooking</div> <div>What type of fuel does this household use most of the time for cooking?</div> <div><div><div>1 Electricity</div><div>2 Kerosene (gaas)</div><div>3 Liquefied petroleum gas (LPG)</div><div>4 Charcoal</div></div><div><div>5 Wood</div><div>6 Others, SPECIFY</div><div>7 None</div></div></div>			<div><div></div></div>
<div>H9 Source of water supply for drinking</div> <div>What is this household's main source of water supply for drinking?</div> <div><div><div>01 Own use faucet, community water system</div><div>02 Shared faucet, community water system</div><div>03 Own use tubed/piped deep well</div><div>04 Shared tubed/piped deep well</div><div>05 Tubed/piped shallow well</div><div>06 Protected well</div><div>07 Unprotected well</div><div>08 Protected spring</div></div><div><div>09 Unprotected spring</div><div>10 Rainwater</div><div>11 Surface water (river, dam, lake, pond, stream, canal, irrigation channel)</div><div>12 Peddler (includes tanker-truck and cart with small tank)</div><div>13 Water refilling station</div><div>14 Bottled water</div><div>15 Others, SPECIFY</div></div></div>			<div><div><div></div><div></div></div></div>
<div>H10 Source of water supply for cooking</div> <div>What is this household's main source of water supply for cooking?</div> <div><div><div>01 Own use faucet, community water system</div><div>02 Shared faucet, community water system</div><div>03 Own use tubed/piped deep well</div><div>04 Shared tubed/piped deep well</div><div>05 Tubed/piped shallow well</div><div>06 Protected well</div><div>07 Unprotected well</div><div>08 Protected spring</div></div><div><div>09 Unprotected spring</div><div>10 Rainwater</div><div>11 Surface water (river, dam, lake, pond, stream, canal, irrigation channel)</div><div>12 Peddler (includes tanker-truck and cart with small tank)</div><div>13 Water refilling station</div><div>14 Bottled water</div><div>15 Others, SPECIFY</div></div></div>			<div><div><div></div><div></div></div></div>
<div>H11 Land ownership</div> <div>Does any member of this household own the following...?</div> <div>WRITE CODE "1" IF THE ANSWER IS "YES"; OTHERWISE, WRITE CODE "2" IF THE ANSWER IS "NO".</div> <div><div>a) Other residential land/s</div><div>b) Agricultural land/s</div><div>c) Agricultural land/s acquired through Comprehensive Agrarian Reform Program, as an agrarian reform beneficiary</div><div>d) Other land/s, SPECIFY</div></div>			<div><div><div></div><div></div><div></div><div></div></div></div>

3H

HOUSING CENSUS QUESTIONS

GENERAL INSTRUCTIONS:

1. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINE PROVIDED FOR "OTHERS, SPECIFY" IN ITEM H12 AND SPECIFIC ANSWER ON ITEMS H13 AND H14.
2. WRITE CODE "1" IF THE ANSWER IS "YES"; OTHERWISE, WRITE CODE "2" IF THE ANSWER IS "NO" FOR ITEMS H15, H16, AND H17.

[illegible]