

CTEPP

**HOUSE/BUILDING CHARACTERISTICS OBSERVATION SURVEY (FORM #3)
(CHILD'S DAY CARE CENTER)**

The House/Building Characteristics Observation Survey for the Child's Day Care Center (Form #3) is the same form used for the participant's home (Form #3). It is used to collect information on the characteristics of the participant's home or the child's day care center. It is an observation survey and will be completed by the project staff during a visit at the participant's home or at the child's day care center. The estimated time to complete this form is 60 minutes.

**CHILDREN'S TOTAL EXPOSURE TO PERSISTENT PESTICIDES
AND OTHER PERSISTENT ORGANIC POLLUTANTS**

“CTEPP”

House/Building Characteristics Observation Survey (CHILD'S DAY CARE CENTER)

(FORM #3)

Public reporting burden for this collection of information is estimated to average [60] minutes per response, and to require [0] minutes record keeping. This includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to the Director, OPPE Regulatory Information Division, U.S. Environmental Protection Agency (2137) , 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

PARTICIPANT ID#: - -

INTERVIEW INFORMATION

PARTICIPANT ID #: - -

RECORD:

SUBRECORD:

VERSION:

	STAFF ID #	DATE	TIME STARTED	TIME ENDED	RESULTS (IF INCOMPLETE, SPECIFY REASON)
01	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM DD YYYY	<input type="text"/> : <input type="text"/> AM / PM	<input type="text"/> : <input type="text"/> AM / PM	COMPLETE 1 INCOMPLETE . . . 2
02	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM DD YYYY	<input type="text"/> : <input type="text"/> AM / PM	<input type="text"/> : <input type="text"/> AM / PM	COMPLETE 1 INCOMPLETE . . . 2
03	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM DD YYYY	<input type="text"/> : <input type="text"/> AM / PM	<input type="text"/> : <input type="text"/> AM / PM	COMPLETE 1 INCOMPLETE . . . 2
04	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MM DD YYYY	<input type="text"/> : <input type="text"/> AM / PM	<input type="text"/> : <input type="text"/> AM / PM	COMPLETE 1 INCOMPLETE . . . 2
REASONS FOR NONCOMPLETION:					
01					
02					
03					
04					

SKETCH THE INTERIOR OF THE HOUSE/BUILDING AND MARK AREAS SAMPLED WITH AN "X." USE A COMPASS TO DETERMINE THE DIRECTIONS OF THE HOUSE AND MARK THE DIRECTIONS ON THIS SKETCH.

A1. ARE CEILING FANS USED IN THE HOUSE/BUILDING? IF YES, PLEASE INDICATE THE LOCATIONS OF THE CEILING FANS.	YES.....1 NO.....2
A2. ARE WINDOW AIR CONDITIONING UNITS USED IN THE HOUSE/BUILDING? IF YES, PLEASE INDICATE THE LOCATIONS OF WINDOW AIR CONDITIONING UNITS IN EACH ROOM.	YES.....1 NO.....2

B1.	TYPE OF BUILDING STRUCTURE:	ONE-STORY HOUSE 01 ONE-STORY DUPLEX 02 TWO-STORY HOUSE 03 TWO-STORY DUPLEX 04 TRAILER/MOBILE HOME 05 APARTMENT 06 OTHER (SPECIFY) 07 REFUSED 97 DK 98
		[SPECIFY OTHER:] _____ <input type="checkbox"/>
B2.	BUILDING MATERIALS - ROOF:	METAL 1 WOOD SHINGLES OR PLYWOOD 2 ASPHALT SHINGLES 3 OTHER (SPECIFY) 4
		[SPECIFY:] _____ <input type="checkbox"/>
B3.	BUILDING MATERIALS - SIDING:	VINYL SIDING ONLY 1 BRICK ONLY 2 BEADED SIDING 3 BLOCK 4 WOOD 5 BRICK AND VINYL/BEADED SIDING 6 BLOCK AND VINYL/BEADED SIDING 7 OTHER (SPECIFY) 8
		[SPECIFY:] _____ <input type="checkbox"/>
B4.	BUILDING FOUNDATION:	BLOCKS 1 SLAB 2 CRAWL SPACE 3 BASEMENT 4 OTHER (SPECIFY) 5
		[SPECIFY:] _____ <input type="checkbox"/>
B5.	IS THERE A FRONT PORCH/ BALCONY?	YES 1 NO 2

B6.	IS THERE A DECK OR PORCH/ BALCONY IN THE BACK OF THE HOUSE/BUILDING?	YES 1 NO 2
B7.	IS THERE A DRIVEWAY?	YES 1 NO 2
B7A.	SPECIFY THE DRIVEWAY. [SPECIFY OTHER:]	ASPHALT 1 CONCRETE 2 GRAVEL 3 DIRT 4 OTHER [SPECIFY] 5
B8.	IS THERE A WALKWAY FROM THE DRIVEWAY TO THE HOUSE/BUILDING?	YES 1 NO 2
B8A.	SPECIFY THE WALKWAY. [SPECIFY OTHER:]	ASPHALT 1 CONCRETE 2 GRAVEL 3 DIRT 4 OTHER [SPECIFY] 5
B9.	CONDITION OF EXTERIOR STRUCTURE:	
		<u>YES</u> <u>NO</u>
a.	WELL MAINTAINED	1 2
b.	PEELING PAINT	1 2
c.	SIDING IN DISREPAIR	1 2
d.	PARTS OF SIDING OR ROOFING LYING IN YARD	1 2
e.	BROKEN WINDOWS	1 2
f.	BROKEN DOORS	1 2
g.	GENERALLY DETERIORATED	1 2

B10. DESCRIBE THE AREA OUTSIDE IN
FRONT OF THE HOUSE/BUILDING
(> = MORE THAN):

YARD > 50% COVERED WITH LAWN, TREES,
ETC. 1
YARD > 50% BARE DIRT/MUD 2
YARD > 50% PAVED 3
OTHER (SPECIFY) 4

[SPECIFY:] ☐

B10A MUDDY YARD?

YES. 1
NO 2

B10B. IF YARD > 50% PAVED, SPECIFY.
[SPECIFY OTHER:]

ASPHALT 1
CONCRETE 2
GRAVEL 3
OTHER [SPECIFY] 4

B11. DESCRIBE THE AREA OUTSIDE IN
THE BACK OF THE
HOUSE/BUILDING
(> = MORE THAN):

YARD > 50% COVERED WITH LAWN, TREES,
ETC. 1
YARD > 50% BARE DIRT/MUD 2
YARD > 50% PAVED 3
OTHER (SPECIFY) 4

[SPECIFY:] ☐

B11A MUDDY YARD?

YES. 1
NO 2

B11B. IF YARD > 50% PAVED, SPECIFY.
[SPECIFY OTHER:]

ASPHALT 1
CONCRETE 2
GRAVEL 3
OTHER [SPECIFY] 4

B12. DESCRIBE THE AREA OUTSIDE ON
THE LEFT SIDE (YOUR LEFT WHEN
YOU FACE THE BUILDING) OF
THE HOUSE/BUILDING
(> = MORE THAN):

YARD > 50% COVERED WITH LAWN, TREES,
ETC. 1
YARD > 50% BARE DIRT/MUD 2
YARD > 50% PAVED 3
OTHER (SPECIFY) 4

[SPECIFY:] ☐

B12A MUDDY YARD?

YES. 1
NO 2

B12B. IF YARD > 50% PAVED, SPECIFY.
[SPECIFY OTHER:]

ASPHALT 1
CONCRETE 2
GRAVEL 3
OTHER [SPECIFY] 4

- B13. DESCRIBE THE AREA OUTSIDE ON THE RIGHT SIDE (YOUR RIGHT WHEN YOU FACE THE BUILDING) OF THE HOUSE/BUILDING (> = MORE THAN):
- YARD > 50% COVERED WITH LAWN, TREES, ETC. 1
 YARD > 50% BARE DIRT/MUD 2
 YARD > 50% PAVED 3
 OTHER (SPECIFY) 4

[SPECIFY:]

☐

- B13A MUDDY YARD?
- YES. 1
 NO 2

- B13B. IF YARD > 50% PAVED, SPECIFY. [SPECIFY OTHER:]
- ASPHALT 1
 CONCRETE 2
 GRAVEL 3
 OTHER [SPECIFY] 4

- B14. IS THERE ANY ODOR OUTSIDE? IF YES, DESCRIBE IT.

YESNO

- | | | |
|--------------------------------------|---|---|
| a. FRONT OF HOUSE/BUILDING | 1 | 2 |
| b. BACK OF HOUSE/BUILDING | 1 | 2 |
| c. LEFT SIDE OF HOUSE/BUILDING . . . | 1 | 2 |
| d. RIGHT SIDE OF HOUSE/BUILDING . . | 1 | 2 |

[DESCRIPTION:]

☐

- B15. IS THERE STANDING WATER OR ANY DISCHARGE INTO THE YARD OR AROUND THE HOUSE/BUILDING? (SUCH AS DISCOLORED WATER/ MUD, ETC. FROM INDUSTRIAL, SEWAGE, OR HOUSEHOLD WASTE)
- YES 1
 NO 2

[IF YES, CAN YOU SEE WHERE IT'S COMING FROM:]

☐

- B16. IS THERE EVIDENCE THAT RUBBISH BURNING WAS DONE ON THE PROPERTY?
- YES 1
 NO 2

[IF YES, DESCRIBE:]

☐

- B17. IS THERE EVIDENCE THAT GARBAGE WAS DUMPED IN THE YARD?
- YES 1
 NO 2

[IF YES, DESCRIBE:]

☐

- B18. IS GARBAGE STORED IN CONTAINERS IN THE YARD OR AROUND THE HOUSE/BUILDING?
- YES 1
 NO 2

[IF NO, DESCRIBE WHAT/HOW:]

☐

B19. ARE THERE ANIMALS LIVING IN
THE YARD OR AROUND THE
HOUSE/BUILDING?

YES 1
NO 2

[IF YES, DESCRIBE:]

☐

B20. DO YOU SEE ANIMAL FOOD
AND/OR DROPPINGS/FECES IN THE
YARD OR AROUND THE
HOUSE/BUILDING?

YES 1
NO 2

[IF YES, DESCRIBE:]

☐

B21. DO YOU SEE ANY CHEMICALS IN
THE YARD OR AROUND THE
HOUSE/BUILDING?

YES 1
NO 2

B22. IS THERE ANY NOTICEABLE
CHEMICAL STORAGE PLACE
OUTSIDE THE HOUSE?

[IF YES, DESCRIBE:]

☐

C1. DISTANCE TO STREET: FRONT OF HOUSE/BUILDING: FT/YD/ML
 [NOT APPLICABLE= 996] BACK OF HOUSE/BUILDING: FT/YD/ML
 PLEASE CIRCLE FT (FEET), LEFT SIDE OF HOUSE/BUILDING: FT/YD/ML
 YD(YARDS), OR ML(MILES). RIGHT SIDE OF HOUSE/BUILDING: FT/YD/ML

C2. ESTIMATED DISTANCE TO NEAREST NEIGHBORS (HOUSE/BUILDING): FRONT OF HOUSE/BUILDING: FT/YD/ML
 [NOT APPLICABLE= 996] BACK OF HOUSE/BUILDING: FT/YD/ML
 PLEASE CIRCLE FT (FEET), LEFT SIDE OF HOUSE/BUILDING: FT/YD/ML
 YD(YARDS), OR ML(MILES). RIGHT SIDE OF HOUSE/BUILDING: FT/YD/ML

C3A. TRAFFIC CONDITIONS AT TIME OF OBSERVATION IN FRONT OF THE HOUSE/BUILDING: [SPECIFY # OF CARS/2 MINUTES:]
 [TIME & DATE OF OBSERVATION:] DATE: / /
 FROM: : AM/PM TO: : AM/PM

PLEASE ALSO NOTE THE NEARBY TRAFFIC CONDITIONS:

C3B. TRAFFIC CONDITIONS AT TIME OF OBSERVATION IN FRONT OF THE HOUSE/BUILDING: [SPECIFY # OF CARS/2 MINUTES:]
 [TIME & DATE OF OBSERVATION:] DATE: / /
 FROM: : AM/PM TO: : AM/PM

PLEASE ALSO NOTE THE NEARBY TRAFFIC CONDITIONS:

C3C. TRAFFIC CONDITIONS AT TIME OF OBSERVATION IN FRONT OF THE HOUSE//BUILDING: [SPECIFY # OF CARS/2 MINUTES:]
 [TIME & DATE OF OBSERVATION:] DATE: / /
 FROM: : AM/PM TO: : AM/PM

PLEASE ALSO NOTE THE NEARBY TRAFFIC CONDITIONS:

C4.	FRONT ENTRANCE OF BUILDING:	AT STREET LEVEL	1
		BELOW STREET LEVEL	2
		ABOVE STREET LEVEL	3
C5.	ARE THERE STAIRS AT THE FRONT ENTRANCE?	YES	1
		NO	2
C6.	SURROUNDING AREA:	RESIDENTIAL	1
		RECREATIONAL	2
		COMMERCIAL	3
		INDUSTRIAL	4
		WOODED	5
		MIXED (SPECIFY)	6

[SPECIFY:]

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C7.	HOUSE/BUILDING SURROUNDING AREA:	<u>YES</u>	<u>NO</u>	
a.	CONSTRUCTION SITE	1	2	
b.	DEMOLITION SITE	1	2	
c.	VACANT/LITTER/DUMP SITE	1	2	
d.	UNINHABITED BUILDINGS	1	2	
e.	ADJACENT HOMES IN POOR CONDITION	1	2	
f.	PUBLIC HOUSING PROJECT	1	2	
g.	FARM OR AGRICULTURAL AREA	1	2	
h.	LAGOON OR DRAINAGE DITCH	1	2	
i.	NEAR RESIDENTIAL POWER LINES	1 *	2	(*VISIBLE ELECTRIC POLE)
j.	NEAR HIGH-VOLTAGE POWER LINES	1 *	2	(*VISIBLE ELECTRIC TOWER)
k.	NEAR UNDERGROUND POWER LINES	1 *	2	(*NO VISIBLE ELECTRIC POLE, BUT VISIBLE ELECTRIC BOX)
l.	MANUFACTURING FACILITIES	1	2	
m.	INDUSTRIAL STORAGE FACILITIES	1	2	
n.	IRRIGATION DITCHES/CANALS	1	2	
o.	GARBAGE DUMPS	1	2	
p.	STANDING WATER	1	2	
q.	RAILROAD/RAILROAD STATION	1	2	
r.	SHOPPING CENTER(S)	1	2	
s.	GAS STATION	1	2	
t.	GREENHOUSE/NURSERY/GARDEN	1	2	

LOCATION & SURROUNDINGS OF THE HOUSE

SKETCH THE LOCATION AND SURROUNDINGS OF THE HOUSE/BUILDING. MEASURE THE APPROXIMATE DIMENSIONS OF THE HOUSE/BUILDING AND THE SIZE OF THE YARD (FRONT/BACK/SIDES).

C8. RECORD THE GPS READINGS: (LOCATION: IN FRONT OF THE HOUSE)	LATITUDE:	
	LONGITUDE:	

PLEASE MARK THE CHILD'S USUAL PLAY AREA AND SAMPLING LOCATIONS.