



Government of Nepal
National Planning Commission Secretariat
Central Bureau of Statistics

Household Registration for Housing Reconstruction Program

HOUSEHOLD QUESTIONNAIRE

Part 1: Detailed Information on Damage Assessment of Residential Buildings

(Strongly advised to ask this part of the questionnaire to the House Owner)

Introductory Details

Surveyor's Code:

Date of Survey: 2072/ /

House Address:

District Name	V.D.C. / Municipality	Ward No.	Sub Ward No.	Village/Locality	House Owner Serial No./Form Serial No.

1. House Owner Information

1.1 Number of households having the ownership in this house?

1.2 Please write the full name of the house owner/s:

Photograph/s of House Owner/s or Respondent
(Strongly advised to take photograph/s of House Owner)

S. No.	First Name	Middle Name	Last Name	Sex 1. Male 2. Female 3. Third Gender	Serial Number of VDC/Mun. certified list (For Verification Method only)
(1)	(2)	(3)	(4)	(5)	(6)

1.3 Are the House Owner and the respondent the same person?

1. Yes -> Q 1.6 2. No

1.4 Give the respondent's full name

First Name	Middle Name	Last Name	Sex 1. Male 2. Female 3. Third Gender	What is the relationship of the house owner to the respondent? 02. Husband/Wife 03. Son/Daughter 04. Daughter/Son-in-law 05. Father/Mother 06. Mother-in-law/Father-in-law 07. Brothers/Sisters 08. Grandson/Granddaughter 09. Others
(1)	(2)	(3)	(4)	(5)

1.5 Reason for not being able to interview the house owner

1. Absentee - Inside country

2. Absentee - Abroad

3. Too Old/Sick

4. Others...(Specify).....

1.6 How many residential buildings does the house owner owns?

1. What is the number of residential buildings owned by the house owner/s mentioned in Q 1.2 in this enumeration area?

2. What is the number of residential buildings owned by the house owner/s or his/her family members

outside this ward/Sub-ward/enumeration area? (If this is 0, do not fill Q. 1.7)

1.7 Details of the houses owned by the house owner outside this ward/Sub-ward/enumeration area.

Serial No.	Name of the house owner	District	V.D.C/ Municipality	Ward No.	Condition of the house
					1. Not Damaged 2. Partially damaged but possible to live 3. Completely damaged
(1)		(2)	(3)	(4)	(5)

1.8 What are the other building structures such as (sheds/machan) etc. not used for residential purpose?

Number (Not damaged)	Number (Partially damaged)	Number (Completely Collapsed)

1.9 Telephone Number of House Owner or Respondent

Name of District	V.D.C./Municipality	Ward No.	Sub Ward No.	Village/Locality	House Owner Serial No./Form No.

Note: Q. 2 to 14 of this section has to be filled for every residential building/s of the house owner serial mentioned in Q 1.6

Building Number:

2. Building Information

2.1 What is the legal ownership status of the plot of land of this house?

1. Personal 2. Institutional/Community(Guthi) 3. Governmental/Public 4. Others

2.2 What is the condition of the house after the earthquake and itsaftershocks?

1. Damaged, debris removed and premises cleared
2. Damaged but debris not removed
3. Building has been covered by landslide
4. Damaged, debris removed and rebuilt
5. Damaged, building is still there but no one is living
6. Damaged, building is still there and people are living there despite the risk
7. damaged, repaired and people are living/not living
8. No damage at all

2.3 Details of the house before earthquake

Number of storeys (Before Earthquake)	Number of storeys (Now)	Age of House (How many years old)	Plinth area of house (sq.ft.)	Height of house before earthquake (ft.)	Height of house after earthquake (ft.)	Slope of the land where house stands 1. Flat 2. Moderate Slope 3. Steep Slope
(1)	(2)	(3)	(4)	(5)	(6)	(7)

2.4 What is/was type of foundation of the building?

1. Fired brick/ stone in mud 2. Fired brick/ stone in cement 3. Reinforced concrete pads
4. Bamboo/ timber posts 5. Others

2.5 What is/was the roof made of?

1. Light roofing material (GI sheet, thatch, wood) on timber/ bamboo/steel structure
2. Heavy roofing materials (tile, slate, soil) on timber/ bamboo/ steel structure
3. RC/RB/RBC slab

2.6 What is/was floor made of?

1. Mud 2. Bricks/Stone 3. Wood 4. Concrete Slab 5. Others

2.7 What are the other floors of the house (other than ground floor and roof) made of?

1. Wooden plank in wooden structure
2. Mud in Timber/Bamboo/Fired Brick
3. RCC/RB/RBC
4. Not applicable (Single Storey house)

2.8 What is/was construction material for superstructure (lateral and vertical load resisting system) (Multiple choices possible)

1. Adobe/ mud 2. Stone in mud 3. Dry stone
4. Stone in cement 5. Fired brick in mud 6. Brick/ block in cement
7. Timber frame 8. Bamboo frame 9. RC frame (non-engineered)
10. RC frame (engineered) 11. Other (Specify)

2.9 What is/was the position of house?

1. Detached house
2. Adjoining house on one side
3. Adjoining houses on two sides
4. Adjoining houses on three sides

2.10 What is/was the plan configuration of the house?

- | | |
|---------------------------------|----------------------|
| 1. Square | 2. Rectangular |
| 3. T-shape | 4. L-shape |
| 5. U-shape | 6. E-shape |
| 7. H-shape | 8. Multi projected |
| 9. House with central courtyard | 10. Others (specify) |

3. Building Damage Assessment

(To be filled only when Q 2.2 has the answers between 5 to 8). Please tick the appropriate answer. This should be filled by the surveyor by observing the building without asking the house owner.

>2/3: More than two third, **1/3 – 2/3:** Between one third to two third, **<1/3:** Below one third

S.N.	Details	Damage Level									None	Comment
		Severe - Extreme			Moderate - Heavy			Insignificant				
		>2/3	1/3-2/3	<1/3	>2/3	1/3-2/3	<1/3	>2/3	1/3-2/3	<1/3		
3.1	Overall hazard											
3.1.1	Collapse or Partial Collapse											
3.1.2	Building or storey leaning											
3.1.3	Adjacent building hazard											
3.2	Structural hazards											
3.2.1	Foundation											
3.2.2	Roof/Floor Collapse /Partial Collapse											
3.3	For Masonry Buildings											
3.3.1	Corner Separation											
3.3.2	Diagonal Cracking											
3.3.3	In-plane-failure of walls											
3.3.4	Out-of-plane failure-of walls carrying floor/roof											
3.3.5	Out - of - plane failure of walls not carrying floor/roof											
3.3.6	Gable wall damage/ collapse											
3.3.7	Delamination											
3.4	For Reinforced Concrete Buildings											
3.4.1	Column Failure											
3.4.2	Beam Failure											
3.4.3	Infill/partition walls damage/toppling											
3.5	Non-Structural Hazards											
3.5.1	Staircase											
3.5.2	Parapets											
3.5.3	Cladding/Glazing											
3.6	General Comments											

4. Does this place have Geo-Technical risks? 1. Yes 2. No -> Q. 6

5. What are the Geo-Technical risks in this place? (Multiple answers are possible)

1. Ground Displacement 2. Ground Fissures 3. Liquefaction 4. Landslide 5. Rock fall 6. Flood

6. What part of the building was inspected?

1. Exterior 2. Interior 3. Both 4. House cleared 5. Cannot be inspected

7. What is the Damage Grade of this building?

1. Grade 1 2. Grade 2 3. Grade 3 4. Grade 4 5. Grade 5

8. What is the Technical Solution of this building?

1. Not required 2. Minor Repair 3. Major Repair 4. To be rebuilt

9. Have you started rebuilding/repair due to damage caused by the April 25 earthquake and its aftershocks?

1. Yes 2. No

10. Is/was there any secondary use in this building?

1. Yes 2. No -> Q. 12

11. What is/was the secondary use of the building? (Multiple answers possible)

1. Shed/Agricultural purpose 2. Hotel/Restaurant/Shop 3. Rent
4. Institution 5. School 6. Industry
7. Health center 8. Government Office 9. Police Office 10. Others

12. Pictures of building (Maximum 6)

1. 4 sides of the building (if possible)
2. Damaged areas inside the building
3. If the building is completely collapsed, then take the photo of the building site

13. Location of house

Latitude	Longitude	Elevation

14. What is the number of households living now/at the time of earthquake in this building? Number:

(Note: All demographic and socio-economic details of the families mentioned in this house must be taken in the next section)

Part 2: Demographic and Socio-Economic Information

(To be asked to the Head of the household)

Name of District	V.D.C/Municipality	Ward Number	Sob-ward	Village/Locality	House Owner Serial No./Form No.

Building Structure S.N.:

Household S. N.:

If there are two or more than two families, then the family serial number of the head of the family should be 1

1. Details of Household Head

<p>1.1 Name of Household Head First Name Middle Name Sur Name</p> <p>1.2 Gender of Household Head 1. Male 2. Female 3. Third Gender</p> <p>1.3 Date of birth of Household Head:YearMonth.....Day</p> <p>1.4 Age completed by Household Head (No. of Years): <input style="width: 50px;" type="text"/></p>	<p>1.5 Is the respondent Household Head? 1. Yes -> Q1.8 2. No</p> <div style="text-align: right; border: 1px solid black; padding: 2px; width: fit-content;"> Photograph of Household Head </div> <p>1.6 Name of the respondent:</p> <p>1.7 What is the relationship of the Household Head to the respondent?</p>
<p>1.8 Type of ID card of Household Head 1. Nepali Citizenship 2. Driver's License 3. Voter's ID card 4. Social Security ID Card 5. Foreigner (Name of the country.....) -> Q 2.1 6. None -> Q 1.11</p> <div style="text-align: right; border: 1px solid black; padding: 2px; width: fit-content;"> Picture of ID card of HH Head (Front side only.) of Q. 1.8 </div> <p>1.9 Identity card number:</p> <p>1.10 District from where the ID card is issued(Code)</p>	<p>1.11 Caste/Ethnicity of Household Head (Code).....</p> <p>1.12 Completed Educational level of Household Head (Code of educational level)</p> <p>1.13 Does Household Head have a bank account?</p> <p>1. Yes -> Name of the bank & address 2. No</p>
<p>1.14 Where is your Household staying after earthquake? 1. Own house 2. Rented house 3. Organization/Relative/Friend's house 4. Temporary settlement/Tent 5. Others</p> <p>1.15 What is your usual place of residence before earthquake? 1. The same V.D.C/Municipality 2. The Same district, but another V.D.C/Municipality 3. Another district (Please Specify).....</p> <p>1.16 What is your present place of residence? 1. The same V.D.C/Municipality 2. The Same district, but another V.D.C/Municipality 3. Another district (Please Specify).....</p> <p>1.17 Which of the following Victim Relief Cash distributed by the Government of Nepal has your Household received? (Multiple options possible) 1. Rs 15,000 2. Rs. 10,000 3. 1st Installment of Rs. 2lakhs. 4. Rs. 3000 as social security allowance (additional amount) 5. Did not receive any afore mentioned money 6. Not Applicable</p>	<p>1.18. What category of Earthquake Victim Identity Card has your family received from the Government of Nepal? 1. ID card showing full damage 2. ID card showing partial damage 3. No ID card received 4. Not applicable</p> <div style="text-align: right; border: 1px solid black; padding: 2px; width: fit-content;"> Picture of ID card. (Front side) </div> <div style="text-align: right; border: 1px solid black; padding: 2px; width: fit-content; margin-top: 10px;"> Picture of ID card. (Back Side) </div> <p><u>If the answer is 1 or 2</u></p> <p>1. Identity Card Number</p> <p>1.19 What is the average monthly income of your household?</p> <p>1. Less than Rs. 10,000 2. Between Rs 10,000 – Rs 20,000 3. Between 20,000 – Rs 30,000 4. Between 30,000 – Rs 50,000 4. Above Rs. 30,000</p> <p>1.18 Contact telephone number of Household Head</p>

2.1 Total number of members in the HH including the Household head:

[illegible]

S. No	Does (.....Name) have any kind of Disability? 1. No 2. Yes/Received red card 3. Yes/Received blue card 4. Yes/Received yellow card 5. Yes/Received white card 6. Yes/No card	≤ 5 years	≥ 5 years	≥ 10 years	What kind of social security allowance has (.....Name) received ? 1. Elderly Citizen 2. Single Woman 3. Disabled 4. Endangered Ethnicity 5. Child Protection 6. Pension 7. Others 8. Not received -> Next person 9. Not applicable -> Next person	Since when has (.....Name) been receiving such kind of allowance?			What is the name of father or husband of (....Name)?	What is the name of mother or wife of (....Name)?
		Has (....Name's) birth been registered at V.D.C./Municipality? 1.Yes 2.No	What is the Level of education Completed by (....Name)? (Code for Level of education)	What is the marital status of (.....Name)? 1. Unmarried 2. Married 3. Widow/ Widower 4. Divorced 5. Separated		YY	MM			
(1)	(8)	(9)	(10)	(11)	(12)	(13)			(14)	(15)

3. Has there been any deaths in your family in the last 12 months?

1. Yes, Number:

2. No -> Q. 5

4. Details of deceased person

S. No.	Full Name of the deceased person	Gender 1. Male 2. Female 3. Third Gender	Date of Death			What was the completed age of (....Name) when s/he died?	Reasons of death 1. April 25 Earthquake & it's aftershocks 2. Others	Has the death been registered? 1. Yes 2. No
			YY	MM	DD			
(1)	(2)	(3)	(4)			(5)	(6)	(7)

5. Has any of your family been severely injured/handicapped or missing due to the April earthquake and its aftershocks ?

1. Yes Number:

2. No -> Q.7

6. If yes, please give the details of the severely injured/handicapped or missing family members.

S. No.	Name of the severely injured/handicapped or missing family members	Gender 1. Male 2. Female 3. Third Gender	Age in completed years	Type of injury 1. Severely injured 2. Handicapped 3. Missing

7. Has there been any changes to any of your household members due to earthquake?

S. No.	Details	1. Yes 2. No 3. Not applicable	If yes, number of people
7.1	Has any of the students attending up to class 10 dropped out of school?		
7.2	Did the pregnant woman had to quit going for regular checkup?		
7.3	Did the children below 5 years had to miss taking regular immunization?		
7.4	Has any members in the HH aged 10 or more had to quit their job or changed the job due to earthquake?		

8. What was/is the use of the following utilities in your HH before/after the earthquake?

S. No.	Source/Facilities	Before Earthquake	After Earthquake
8.1	What was/is the main source of drinking water?	1. Tap/Pipe Water 2. Tubewell/Hand Pump 3. Covered well 4. Open Well/Kuwa 5. Source water 6. River/Rivulets 7. Others	1. Tap/Pipe Water 2. Tubewell/Hand Pump 3. Covered well 4. Open Well/Kuwa 5. Source water 6. River/Rivulets 7. Others
8.2	What did/do you use mostly to cook food?	1. Wood 2. L.P.G 3. Kerosene 4. Biogas 5. Electricity 6. Others	1. Wood 2. L.P.G 3. Kerosene Biogas 5. Electricity 6. Others
8.3	What did/do you use mostly to light in your HH?	1. Electricity 2. Kerosene 3. Biogas 5. Generator 6. Others	1. Electricity 2. Kerosene 3. Biogas 5. Generator 6. Others
8.4	What kind of toilet did/does your family use?	1. With flush (connected to publicsewage) 2. With flush (septic tank) 3. Simple 4. No toilet	1. With flush (connected to publicsewage) 2. With flush (septic tank) 3. Simple 4. No toilet

11. What are the following facilities does your family had/have? (Multiple options possible)

Before Earthquake	After Earthquake
1. Land 2. TV 3. Cable TV 4. Computer/Laptop 5. Internet 6. Telephone 7. Mobile Phone 8. Refrigerator 9. Motorcycle 10. Four wheeled Vehicle/Car/Jeep/Van for personal use 11. Four wheeled Vehicle/Car/Jeep/Van for business use 12. None of the above	1. Land 2. TV 3. Cable TV 4. Computer/Laptop 5. Internet 6. Telephone 7. Mobile Phone 8. Refrigerator 9. Motorcycle 10. Four wheeled Vehicle/Car/Jeep/Van for personal use 11. Four wheeled Vehicle/Car/Jeep/Van for business use 12. None of the above

I declare that I have provided accurate and true information related to me, my household and the details of the damage of my house by earthquake. I fully agree to let Nepal Government use the information related to my household for Social Security and Housing Reconstruction. Likewise, I assure you that neither I nor any of my HH members has enrolled twice in this data collection program. Should it happen, I am ready to be punished as per law.

Central Bureau of Statistics would like to thank you for providing us your truthful information and cooperating with us in the survey.