M&E \_Base questionnaire

## End-User or livelihood site contact details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| AP 1 | | UID section | Number | Zone | Dist | FY |
| AP 2 | | MIS UID | XXX | Fy | State | Number |
| **Sl.No.** | **Question** | **Response** | **Skips** | **Source of Info** | **Remarks** |
| A01\_A | | Date and time of visit | Auto capture date |  |  |  |
| A02 | | Is the respondent of the study is also the end-user? | 01. Yes | Skip to A05 |  |  |
| 02. No |  |  |  |
| A03 | | If no,  What is the name of the respondent? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| A04 | | What is the relationship of the respondent with the end-user? | 1. *Spouse* 2. *Parent* 3. *In-law* 4. *Child* 5. *Family member* 6. *Neighbour* 7. *Friends* 8. *Group Member* 9. *Institution Staff/ Colleague*   77. Others Specify … |  |  |  |
| A04\_OTH | | Others specify | specify *text* |  |  |  |
| A05 | | Does the end user own the enterprise by himself/herself or along with a group or is it owned by the Institution? | 1. 01. Individual |  |  |  |
| 1. 02. Group |  |  |  |
| 1. 03. Institution |  |  |  |
|  |  |  |  |
| A06 | | Name of the individual end-user or Name of the group or institute (Please enter the name as per the records) | Specify the name…  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| A07 | | Name of POC if it is a Group or Institution | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Only appear if 2, 3 selected in A05 |  |  |
| A08 | | Designation of the POC  If information is not available write code – 998 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Only appear if 2, 3 selected in A05 |  |  |
| A08a | | Is the site address the same as the one provided in the respondent list? | 1.Yes, it is same  2.No, Site address has changed |  |  |  |
| A09 | | The contact number of the end-user / /Entrepreneur / POC | Contact No.1 …………………………….  If the number not available write- 6666666666  INSTRUCTIONS: RECORD A MINIMUM OF TWO CONTACT NUMBERS |  |  |  |
| A09a  (A09) | | The contact number of the end-user / /Entrepreneur / POC | 2. Contact No.2  …………………………….  If the number not available write- 6666666666 |  |  |  |
| A10 | | Pin Code  INSTRUCTIONS: VERIFY THE PIN CODE WITH LOCATION |  |  |  |  |
| A11 | | State | 1 Assam  2 Jharkhand  3 Karnataka  4 Meghalaya  5 Odisha |  |  |  |
| A12 | | Districts | ASSAM:   |  | | --- | | **Baksa** | | **Barpeta** | | **Biswanath** | | **Bongaigaon** | | **Cachar** | | **Charaideo** | | **Chirang** | | **Darrang** | | **Dhemaji** | | **Dhubri** | | **Dibrugarh** | | **Dima Hasao** | | **Goalpara** | | **Golaghat** | | **Hailakandi** | | **Hojai** | | **Jorhat** | | **Kamrup** | | **Kamrup Metro** | | **Karbi Anglong** | | **Karimganj** | | **Kokrajhar** | | **Lakhimpur** | | **Majuli** | | **Marigaon** | | **Nagaon** | | **Nalbari** | | **Sivasagar** | | **Sonitpur** | | **South Salmara Mancachar** | | **Tinsukia** | | **Udalguri** | | **West Karbi Anglong** | | JHARKHAND:   |  | | --- | | **Bokaro** | | **Chatra** | | **Deoghar** | | **Dhanbad** | | **Dumka** | | **East Singhbum** | | **Garhwa** | | **Giridih** | | **Godda** | | **Gumla** | | **Hazaribagh** | | **Jamtara** | | **Khunti** | | **Koderma** | | **Latehar** | | **Lohardaga** | | **Pakur** | | **Palamu** | | **Ramgarh** | | **Ranchi** | | **Sahebganj** | | **Saraikela Kharsawan** | | **Simdega** | | **West Singhbhum** |   MEGHALAYA:   |  | | --- | | **East Garo Hills** | | **East Jaintia Hills** | | **East Khasi Hills** | | **Eastern West Khasi Hills** | | **North Garo Hills** | | **Ri Bhoi** | | **South Garo Hills** | | **South West Garo Hills** | | **South West Khasi Hills** | | **West Garo Hills** | | **West Jaintia Hills** | | **West Khasi Hills** | | ODISHA:   |  | | --- | | **Anugul** | | **Balangir** | | **Baleshwar** | | **Bargarh** | | **Bhadrak** | | **Bhubaneswar** | | **Boudh** | | **Cuttack** | | **Deogarh** | | **Dhenkanal** | | **Gajapati** | | **Ganjam** | | **Jagatsinghapur** | | **Jajapur** | | **Jharsuguda** | | **Kalahandi** | | **Kandhamal** | | **Kendrapara** | | **Kendujhar** | | **Khordha** | | **Koraput** | | **Malkangiri** | | **Mayurbhanj** | | **Nabarangpur** | | **Nayagarh** | | **Nuapada** | | **Puri** | | **Rayagada** | | **Sambalpur** | | **Sonepur** | | **Sundargarh** |   KARNATAKA:   |  | | --- | | **Bagalkot** | | **Ballari** | | **Belagavi** | | **Bengaluru Rural** | | **Bengaluru Urban** | | **Bidar** | | **Chamarajanagar** | | **Chikballapur** | | **Chikkamagaluru** | | **Chitradurga** | | **Dakshin Kannad** | | **Davangere** | | **Dharwad** | | **Gadag** | | **Hassan** | | **Haveri** | | **Kalaburagi** | | **Kodagu** | | **Kolar** | | **Koppal** | | **Mandya** | | **Mysuru** | | **Raichur** | | **Ramanagara** | | **Shivamogga** | | **Tumakuru** | | **Udupi** | | **Uttar Kannad** | | **Vijayapura** | | **Yadgir** | |  |
| A13 | | Block / Tehsil/Taluk | Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| A14 | | Name of the Gram Panchayat / Municipality | Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| A15 | | Village/ City/town/Area | Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| A16 | | Door Number / Site number / Land mark  If door number/site number not available write -998 | Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| A17 | | Capture the GPS location- | Capture the GPS in the end-user site/home… |  |  |  |
| A17\_A | | Is this area come under any of the following categories? | 1. Remote location  2.Forest/hilly region  3.Conflict-prone area  88 none |  |  |  |
| A18 | | Name of Head of the family of the end-user | Specify the name… | Appear only if 1 in A05 |  |  |

# Consent form

|  |
| --- |
|  |
| INTRODUCTION AND INFORMED CONSENT |
| Namaste. My name is\_\_\_\_\_\_\_\_\_\_. I am working with SELCO FOUNDATION. and have come here today to conduct a survey of the appliance and solar system provided to you. The questions will include information on current condition, functionality and the usage of solar system and appliance. It also includes basic details of End-user background, income, and other benefits related to the intervention by SELCO foundation.  The questions usually take about 20 - 40 minutes. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. Your participation in the survey is voluntary. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. If you have any questions about this survey, you may ask me.    Do you have any questions?  ANSWER ANY QUESTIONS AND ADDRESS RESPONDENT'S CONCERNS.    Are you willing to participate in the survey? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    001 Yes -  002 NO  998 End-user not available (Conduct the interview with a family member) |
| IC01 Provide details if refused: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# **A.** **Baseline Evaluation \_Before Intervention**

### G.e Individual End-user profile (Only for “Individual” end user)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| G.     Individual End-user profile (Only for “Individual” end user) | | | | | | |
| **Sl.No.** | **Question** | **Response** | | **Skips** | **Source of Info** | **Remarks** |
| G.1 | Name of Individual end-user as per the intervention documents  (registered) | ***Specify…………………*** | |  |  |  |
| G.2 | Name of Spouse / Father/Mother/ Head of HH  (Please enter name as per the records ) | ***Specify…………………*** | |  |  |  |
| G.3 | Age of End-user | Completed years ***Specify…………………*** | |  |  |  |
| G.4 | Gender of End-user  *Do not ask* | 1.       Male | |  |  |  |
| 2.       Female | |  |  |  |
| 3.       Transgender | |  |  |  |
| G.5A | What is the Current marital status of the end-user? | 1. Married 2. Widowed/ Divorced/ Separated 3. Unmarried/ Single | |  |  |  |
| G.5B | Is the end-user physically challenged by any means? | 1. YES 2. NO | | ADD SKIP |  |  |
| G.5C | Is it by birth or by accident? | 1. By Birth 2. By Accident | |  |  |  |
| G.5D | Provide details of disability | Specify………………………………. | |  |  |  |
| G.5E | Does the end-user falls under any of the following social vulnerability categories? | Yes | No |  |  |  |
|  | 1. None | Yes | No |  |  |  |
|  | 1. Single parent   - | Yes | No |  |  |  |
|  | 1. Reverse migrant | Yes | No |  |  |  |
|  | 1. Tribal community | Yes | No |  |  |  |
|  | 1. Victim of communal violence or war | Yes | No |  |  |  |
|  | 1. Others ..specify…… | Yes | No |  |  |  |
| G.6 | How many members are there in end-users family? | Number  …………….. | |  |  |  |
| G.7 | Is the end-users only earner of the family? | 1. Yes | |  |  |  |
| 2. No | |  |  |  |
| G.8 | Is there any other source of income other than intervened activity for end-user or for end-users ? | 1. Yes | |  |  |  |
| 2.No, this is the only source of income  , | |  |  |  |
| G.9 | What is end-users overall family income from all sources per month?    NOTE: PROBE TO GET AT | Rs……………………………………….. | |  |  |  |
| 999. Don't want to reveal / Don’t know/ prefer not to answer | |  |  |  |
| G.10 | Is this end-users first livelihood activity? | 1. Yes | |  |  |  |
| 2. No | |  |  | Skip to Section J |

### H.e  Group End User Profile (Only for “Group” end user)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| H.     Group End User Profile (Only for “Group” end user) | | | | | |
| **Sl.No.** | **Question** | **Response** | **Skips** | **Source of Info** | **Remarks** |
| H01 | What is the type of group?  समूह का प्रकार क्या है? | 1. FPO -Farmer Producer organisation      1. SHG -Self Help Group   -   1. Cooperatives 2. FPC - Farmer Producer Company   -   1. JLG -Joint Liability Group   -   1. Pottery Associations      1. Village Group      1. User Group      1. Village Forest Committee     77. Others |  |  |  |
| Specify …………….... |  |  |  |
| H02 | What is the total member in the group? | Number ………. |  |  |  |
| H03 | What are the different services offered by the group? | a. Specify…………………………….  b. Specify…………………………….  c. Specify…………………………….  d. Specify…………………………….  e. Specify……………………………. |  |  |  |
| H04 | How old is the Group (in years)? | Specify……………………………. |  |  |  |
| H05 | Did the group have any income generation activities? | Yes  No | If no Skip to Section J |  | If no Skip to Section J |
| H06 | What are the different kinds of Incomce generation acttiivites done by the Group? | a. Specify…………………………….  b. Specify…………………………….  c. Specify…………………………….  d. Specify……………………………. |  |  |  |
| H07 | If coded 2 in A05  What was the overall income of the group from all sources per month? | Rs………………………………………..  999. Don't want to reveal / Don’t know/ prefer not to answer |  |  | Skip to Section J |

### I.e Institutional End User Profile (Only for “Institutional” end user)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| I.   Institutional End User Profile (Only for “Institutional” end user) | | | | | | | |
| **Sl.No.** | **Question** | **Response** | | | **Skips** | **Source of Info** | **Remarks** |
| I01 | What is the type of institution?  संस्था किस प्रकार की है? | 01.Training Centre | | |  |  |  |
| 02.School | | |  |  |  |
| 03.Community Centre | | |  |  |  |
| 04.NGO | | |  |  |  |
| 05.Rehabilitation centre- PWD  - | | |  |  |  |
| 06.Anganwadi Centre | | |  |  |  |
| 07.Art school | | |  |  |  |
| 08.Old age home | | |  |  |  |
| 09.Special School | | |  |  |  |
| 1. Orphanage | | |  |  |  |
| 1. Hostel | | |  |  |  |
| 77. Others  Specify ...... | | |  |  |  |
| I02  (I07) | How old is the institution or centre?  (In years) | ………………. | | |  |  |  |
| I03  (I06) | What are the different services offered by the Institution? | a. Specify …………………. | | |  |  |  |
| b. Specify …………………. | | |  |  |  |
| c. Specify …………………. | | |  |  |  |
| d. Specify …………………. | | |  |  |  |
|  | | |  |  |  |
| I04  (I03) | Who are the beneficiaries of the institution?    Mention the all the names | a. Specify …………………. | | |  |  |  |
| b. Specify …………………. | | |  |  |  |
| c. Specify …………………. | | |  |  |  |
| d. Specify …………………. | | |  |  |  |
| e. Specify …………………. | | |  |  |  |
| I04a  (I03a) | Total Number of beneficiaries availing services. | ………. | | |  |  |  |
| I05 | Total number of service providers / staff in the institution.  / | ………. | | |  |  |  |
| I06  (I02) | Does the centre / institute provide residential services?  / | 01.Yes, Residential services  , | | |  |  |  |
| 02. No, Day services only  , | | | Skip to I07 |  |  |
| I07  (I04) | Total Number of beneficiaries availing residential services. | ………. | | |  |  |  |
| I08 (I07) | What kind of services or activities are supported through the solar intervention ? | Specify … Specify … Specify … | | |  |  |  |
| I08a  (I07a) | Who are the targeted beneficiaries for solar intervention? | 1. All beneficiaries of the institution      1. All staff of the institution      1. Few beneficiaries of the institution | | |  | if coded A and B skip to I09 |  |
| I09  (I08) | specify the targeted beneficiaries for solar intervention | a. Specify…………………………….  b. Specify…………………………….  c. Specify……………………………. | | |  | If coded C in I08a  (If coded C in I07a) |  |
| I10  (I011) | Is this activity or service a new addition to the institution with the support of solar intervention or existing activity or service of the institution? | 1. New addition      1. Existing | | |  |  |  |
| I11  (I09) | Does this activity generate income either to Beneficiaries of the institution or to the institution it-self? | 1. Yes, income generation activities to the Beneficiaries   ,   1. Yes, income generation activities of the Institution   ,   1. Both 2. None | | |  |  |  |
| I12  (IO12) | If coded 2, in I.10  Before intervention What is the Income earned through this activity? | Income of | INR | Per -  day/wk/motn/cycle/season/anum |  |  | Move to Section K |
| a.Beneficiary | …. | … | If coded 1 or 3 in I.11  (If coded 1 or 3 in I09) |
| b. Institution | … | …. | If coded 2 or 3 in I.11  (If coded 2 or 3 in I09) |

### J.e  Enterprise / Livelihood profile

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| J.      Enterprise / Livelihood profile | | | | | | | |
| **Sl.No.** | **Question** | **Response** | | | | **Skips** | **Remarks** |
| J.1 | Specify the enterprise or business for which end-user has get or availed solar energy unit or solar powered appliance by SF | CHOOSE FROM THE OPTIONS GIVEN | | | |  |  |
|  | **Agriculture** | 1. Farming | | | |  |  |
| 2. Cold Storage Units | | | |  |  |
| 3. Food processing-Puffed Rice unit | | | |  |  |
| 4. Groundnut Oil mill | | | |  |  |
| 5. Millet processing unit | | | |  |  |
| 6. Rice mill | | | |  |  |
| 7. Spice processing unit | | | |  |  |
| **Animal Husbandry** | 8. Dairy farm | | | |  |  |
| 9. Khova Making Unit | | | |  |  |
| 10. Chicken meat Shop | | | |  |  |
| 11. Milk supplier | | | |  |  |
| 12. Pig Farming | | | |  |  |
| 13. Poultry Farm | | | |  |  |
| 14. Vaccination center | | | |  |  |
| 15. Others (Specify…….) | | | |  |  |
| **RMB** | 16. Aggarbatthi making Unit | | | |  |  |
| 17. Barber shop or Salon or Beauty Parlor | | | |  |  |
| 18. Black smithy | | | |  |  |
| 19. Dall mill | | | |  |  |
| 20. Dokra unit | | | |  |  |
| 21. Eatery or Juice Shop or Bakery | | | |  |  |
| 22. Flour Mill or Spice Grinding Unit | | | |  |  |
| 23. Food processing-Bhujia Making | | | |  |  |
| 24. Food processing-Chakli making | | | |  |  |
| 25. Food processing-Jam & Jelly processing unit | | | |  |  |
| 26. Food processing-Pani puri unit | | | |  |  |
| 27. Food processing-Papad making unit | | | |  |  |
| 28. Food processing-Puffed Rice unit | | | |  |  |
| 29. Food processing-Roti Making Unit | | | |  |  |
| 30. Gold smithy | | | |  |  |
| 31. Silver smithy | | | |  |  |
| 32. Grocery Shop / Provision store / Vegetable shop | | | |  |  |
| 33. Integrated Energy Centers (IEC) | | | |  |  |
| 34. Looms | | | |  |  |
| 35. Paper/Leaf plate making | | | |  |  |
| 36. Petty shop / LSK/Photocopy/Studios/Pan shop | | | |  |  |
| 37. Pottery Unit | | | |  |  |
| 38. Puncture shop | | | |  |  |
| 39. Rice mill | | | |  |  |
| 40. Rope-making Unit | | | |  |  |
| 41. Silk Reeling and Spinning Unit | | | |  |  |
| 42. Spice processing unit | | | |  |  |
| 43. Tailoring Unit | | | |  |  |
| 44. Veterinary medical store | | | |  |  |
| 45. Weaving/Spinning | | | |  |  |
|  | 77. Others  Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |  |  |
| 88. None | | | |  |  |
| 99. NA | | | |  |  |
| J.2  (J.3) | Whether the livelihood unit /Enterprise is a home-based or independent unit  / | 1.       Home based | | | |  |  |
| 2.Non-home based -Independent unit  – | | | |  |  |
| 3. Farm based | | | |  |  |
| 4. Mobile Unit | | | |  |  |
| J.3  (J.4) | Is this occupation a primary/secondary/tertiary source of livelihood?  // | 1.       Primary (Highest Income source) | | | |  |  |
| 2.       Secondary | | | |  |  |
| 3.       Tertiary | | | |  |  |
| J.4  (J.5) | Is it a New or Existing livelihood /Enterprise?  / ? | 1.       Old- Existed before deployment of solar energy or solar appliances by SF  - | | | |  |  |
| 2.       New- Started the enterprise with solar energy or solar appliances by SF  - | | | | Skip to  J.5 |  |
| J.4a  (J.5a) | If it is existing /old enterprise  Is the intervened activity a new addition to the enterprise? | 1. New activity at the enterprise | | | |  |  |
| 1. Existed earlier | | | |  |
| J.5  (J.2) | When did the intervened livelihood /Enterprise start?  / | DD/MM/YYYY | | | |  |  |
| J.6 | Type of intervened livelihood enterprise | 1. Production Unit | | | | Skipt to J.6a |  |
| 1. Retail/Sales Unit   / | | | | Skipt to J.7f |
| 1. Services Unit | | | | Skipt to J.8d |
| ***IF CODED 2-* *New- Started the enterprise with solar energy or solar appliances by SF in J4 then skip to K1*** | | | | | | | |
| If it is a production unit – J.6 a)    Production Unit | | | | | | | |
| J.6a | How many types of products were produced in the enterprise? | Specify number……. | | | | Open **only** when “a) production” is coded in J.6 |  |
| J.7 | What were the different products produced and what is the quantity of production ? | **I Average Quantity**  मात्रा | **II Unit Of measure** | | **III Time period per….** |  |
| J.7.A | Name of product……………… | Number  ……………… | **Grams/KG/LITRES/ Pieces /Number /Qunitle/ Bags/Customers)** | | **Per day/week/month/quarter/cycle/Season / year/ batch/ others)** |  |
| J.7.B | Name of product……………… | Number  ……………… | As above | | As above |  |
| J.7.C | Name of product\_\_\_\_\_\_\_\_\_\_ | Number  ……………… | As above | | As above |  |
| J.7.D | Name of product……………… | Number  ……………… | As above | | As above |  |
| J.7.E | Average time taken to produce one Unit? | ……………...Minutes per unit | | | |  |
| If it is a Retail/Sales unit – J.6 b)    Retail/Sales Unit | | | | | | | |
| J.7F | How many types of products are sold in the enterprise? | Specify NUMBER …………. | | | | Open **only** when “ b)    Retail/Sales Unit” is coded in Q J.5 |  |
| J.8 | What were the different products sold and what is the average quantity of sales? | **I Average Quantity**  मात्रा | **II Unit Of measure (Grams/KG/LITRES/ Pieces /Number /Qunitle/ Bags/Customers)** | | **III Time period per….**  **(Per day/week/month/quarter/cycle/Season / year/ batch/ others)** |  |
| J.8.A | Name of product\_\_\_\_\_\_\_\_\_\_ | Number  …………… | \_\_\_\_\_\_\_\_ | | Per\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| J.8.B | Name of product\_\_\_\_\_\_\_\_\_\_ | Number  …………… | \_\_\_\_\_\_\_\_ | | Per\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| J.8.C | Name of product\_\_\_\_\_\_\_\_\_\_ | Number  …………… | \_\_\_\_\_\_\_\_ | | Per\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| If it is a Services Unit unit – J.6 c)       Services Unit | | | | | | | |
| J.8D | How many types of service provided in the enterprise? | specify number………………. | | | | Open **only** when “c) Services” is coded in Q J.5 |  |
| J.9 | What were the different services provided and what is the average quantity of services? | **I Average Quantity**  मात्रा | **II Unit Of measure (Grams/KG/LITRES/ Pieces /Number /Qunitle/ Bags/Customers)** | | **III Time period per….**  **(Per day/week/month/quarter/cycle/Season / year/ batch/ others)** |  |
| J.9.A | Name of service\_\_\_\_\_\_\_\_\_\_ | Number  …………… | \_\_\_\_\_\_\_\_ | | Per\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| J.9.B | Name of service\_\_\_\_\_\_\_\_\_\_ | Number  …………… | \_\_\_\_\_\_\_\_ | | Per\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| J.9.C | Name of service\_\_\_\_\_\_\_\_\_\_ | Number  …………… | \_\_\_\_\_\_\_\_ | | Per\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| J.10A  (J.11.A) | Who were the targeted customers / Beneficiaries ? | **Type of customer** | **Number of customers served per month** | | |  |  |
| a-Individual / local consumer  (villagers, farmers, the general public, tourists, students)  / (, ) | …............ | | |  |  |
| b-retailers or shops | …............ | | |  |  |
| c-contractor or wholesalers | …............ | | |  |  |
| 66. Information not available |  | | |  |  |
| J.11  (J.12) | What was your average **revenue** from the intervened livelihood/enterprise?  ( ) | Specify INR…………………… | | *Per Day / Per week/ Per month /Per quarter /Per cycle /Per Season /Per year / Per Batch / others…. (Specify..* | | |  |
| 66. Information not available | | | | |  |
| J.12  (J.13) | What was your average **expenditure** (Inclusive of Raw materials + HR + Rent + Operation costs) for the intervened livelihood/enterprise?  + + + | Specify INR…………………… | | *Per Day / Per week/ Per month /Per quarter /Per cycle /Per Season /Per year / Per Batch / others…. (Specify..* | | |  |
| 66. Information not available | | | |  |  |
| J.13  (J.14) | What was your average **profit** (take home) from the intervened livelihood/enterprise?  ( ) | Specify INR…………………… | | *Per Day / Per week/ Per month /Per quarter /Per cycle /Per Season /Per year / Per Batch / others…. (Specify..* | | |  |
| 66. Information not available | | | |  |  |
| J.13a  (J.14a) | Remove this qn |  | | | |  |  |
| J.14  (J.15) | Does the daily operations of the enterprise include any drudgeries activities? | 1)      Yes | | | |  |  |
| 2)      No | | | | Skip to J17 |  |
| J.14a  (J.15a) | To what extent the work in this enterprise is physically demanding?    ‌ | 1. Not at all physically demanding      1. Slightly physically demanding      1. Moderately physically demanding      1. Very physically Demanding      1. Extremely physically demanding | | | |  |  |
| J.14b  (J.15b) | To what extent does the labour feel exhausted after completing their work in this enterprise?    ‌ | 1. Not all exhausted      1. Slightly exhausted      1. Moderately exhausted      1. Very exhausted      1. Extremely exhausted | | | |  |  |
| J.14c  (J.15c) | How do you rate the pain due to posture assumed while doing the activities on this enterprise? | 1. No pain      1. Low pain      1. Moderate pain      1. Very Painful      1. Extremely painful | | | |  |  |
| J.14d  (J.15d) | How do you rate the level of difficulty involved in the daily activities of this enterprise? | 1. Very easy      1. Easy 2. Moderately difficult      1. Difficult 2. Very difficult | | | |  |  |
| J16a | Did you have fixed working hours for this livelihood activity? | 1.Yes, daily fixed working hours  ,  2.No- working hours are not fixed | | | |  |  |
| J.15  (J.17) | Average Working hours per day    NOTE: SPENT ON INTERVENED ACTIVITY | ………………….…………..Hours per day | | | |  |  |
| J.16  (J.19) | To what extent does the current energy infrastructure of enterprise provide you flexible working hours? | 1. Almost always      1. Most of the occasions      1. Very little      1. Not at all     99. NA | | | |  |  |
| J.17  (J.18) | Average Working days in a month    NOTE: SPENT ON INTERVENED ACTIVITY | ………………………………Days per month | | | |  |  |

### K.e  Operation, Energy consumption and Energy disruption

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| K.      Operation, Energy consumption and Energy disruption | | | | | | |
| **Sl.No.** | **Question** | **Response** | | **Skips** | **Source of Info** | **Remarks** |
| K.1 | Does the village/locality have grid electricity connection?  / | 1.       Yes | |  |  |  |
| 2.       No | |  |  |  |
| ***IF CODED 2-* *New- Started the enterprise with solar energy or solar appliances by SF in J4 then skip to*** | | | | | | |
| K.2 | Did the the enterprise have a grid electricity connection? | 1.       Yes | |  |  |  |
| 2.       No | |  |  |  |
| K.3a | Did you have any machinery for the production or for the daily operations of the livelihood/Enterprise which is operated by electricity or any other source of energy? | 1.       Yes  . | |  |  |  |
| 2.       No, all operations are carried out manually  , | | To K.5 |  |
| K.3C | How many machine were available in the enterprise? | Specify number… | |  |  |  |
| K.4 | What were the different types of machines employed by the enterprise? | **Name of the Machine** | **Total number of machines** |  |  |  |
| A-Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | No. ……………….. |  |  |  |
| B-Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | No. ……………….. |  |  |  |
| C-Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | No. ……………….. |  |  |  |
| D-Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | No. ……………….. |  |  |  |
| E-Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | No. ……………….. |  |  |  |
| K.5 | Did the enterprise has Electric lights? | 1. Yes  Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | NA if K2 is no |
| 2. No | |  |  |  |
| K.6 | Did the enterprise have Electric fans? | 1. Yes  Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | NA if K2 is no |
| 2. No | |  |  |  |
| K.7 | What was sources of energy **for the intervened activity in** the livelihood/Enterprise? | ***I. Primary source of energy for production / daily operation or machinery***  / | ***II. Primary source of energy for for lighting and ventilation?*** | III.Secondary Source of Energy | IV.Average cost per month | V.Average units consumed per month |
| 1)      Grid Electricity | 1)      Grid Electricity | A.Grid Electricity | Specfy… | Specfy… |
| 2)      Diesel / Petrol -DG sets | 2)      Diesel / Petrol -DG sets | B.Diesel / Petrol -DG sets |  |  |
| 3)      Kerosene | 3)      Kerosene | C.  Kerosene |  |  |
| 4)      Solar | 4)      Solar | D.  Solar |  |  |
| 5)      Wind | 5)      Wind | E.   Wind |  |  |
| 6)      Biogas / Gobar gas | 6)      Biogas / Gobar gas | G.   Biogas / Gobar gas |  |  |
| 7)      Firewood | 7)      Firewood | H.   Firewood |  |  |
| 8)      LPG | 8)      LPG | I.    LPG |  |  |
|  | 9)      CANDLES |  |  |  |
| 77. Others  Specify …………….. | 77. Others  Specify …………….. | J. Others  Specify …………….. |  |  |
| 88. None | 88. None | K. None |  |  |
| 99. NA | 99. NA | L. NA |  |  |
| K.8 A  (K.10.A) | On average, how frequently did your enterprise experience power outages or blackouts in a typical month?  ( 4  *Power outage for full day or night or for more than 4 hours continuously* | 1. No power outage blackout | | Open only if “grid electricity or Solar” option is selected in K.7 |  |  |
| 1. Once a month | |  |  |
| 1. Two to 4 days a month   04 | |  |  |
| 1. Five to 9 days a month   9 | |  |  |
| 1. Around 10 to 14 days a month   10 14 | |  |  |
| 1. More than 15 days a month   15 | |  |  |
| 1. Every alternative day | |  |  |
| 1. Every day | |  |  |
| K.8 B  (K.10.B) | On average, how many times did you experience power cuts or dropouts in a day?  *FREQUENT SHORT PERIOD POWER OUTAGE* | 1. No power cuts or dropout | | Open only if “grid electricity or Solar” option is selected in K.7 |  |  |
| 1. 1 to 2 times a day   1 2 | |  |  |
| 1. <2 to 5 times a day   2 5 | |  |  |
| 1. >6 times a day | |  |  |
| K.9  (K.11) | When your enterprise faces power outages, blackouts, or cuts, what were the implications or consequences? | 1. Do other works in the livelihood centre which does not need energy | | Open only if “grid electricity or Solar” option is selected in K.7 |  |  |
|
| 1. Continue the livelihood activity manually | |  |  |  |
| 1. Use the secondary source of energy (DG set)   ( ) | |  |  |  |
| 1. Stop the livelihood activity till the power comes back | |  |  |  |
| 1. Extend the working hours | |  |  |  |
| 1. Close the enterprise early | |  |  |  |
| 1. Wastage of labour | |  |  |  |
| 1. Wastage of raw materials | |  |  |  |
| 1. Wastage of products | |  |  |  |
| 1. Leads to poor quality of finished products | |  |  |  |
| 77. Others  Specify …………….. | |  |  |  |
| K.10  (K.12) | In a typical month, how frequently did your enterprise experience power (voltage) fluctuations on average?    *voltage dips* | 01 No power (voltage) fluctuation  () | | Open only if “grid electricity or Solar” option is selected in K.7 |  |  |
| 02 Once a month | |  |  |  |
| 03 Two to 4 days a month  04 | |  |  |  |
| 04 Five to 9 days a month  9 | |  |  |  |
| 05 Around 10 to 14 days a month  10 14 | |  |  |  |
| 06 More than 15 days a month  15 | |  |  |  |
| 07 Every alternative day | |  |  |  |
| 08 Every day | |  |  |  |
| K.10A  (K.12.A) | How do the power (voltage) fluctuations affect daily operation or production or Services?  () | 1. Machines may not work | | Open only if “grid electricity” option is selected in K.7 |  |  |
| 1. Machine damages | |  |  |  |
| Others | |  |  |  |
| K.11  (K.13) | To what degree is Electricity disruption was an obstacle to the operations of this enterprise? | 1. No obstacle | | Open only if “grid electricity” option is selected in K.7 |  |  |
| 2.Minor obstacle | |  |  |  |
| 3.Moderate obstacle | |  |  |  |
| 4.Major obstacle | |  |  |  |
| 5.Very Severe Obstacle | |  |  |  |
| 999. Don't know | |  |  |  |
| Not Applicable | |  |  |  |

# A1. Verification

### L.      Intervention deployment verification (Call / Visit)

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| L.      Intervention deployment verification (Call / Visit) Instructions:  If it is New enterprise -Collect this information along with baseline data | | | | | | | | | | |
| **Sl. No.** | **Question** | **Response** | | | | | | **Skips** | **Source of Info** | **Remarks** |
| **Solar Energy Unit** | | | | | | | |  |  |  |
| L.1 | Did the end-user receive the Solar Energy Unit?    *NOTE: SOLAR ENERGY UNIT CONSIST SOLAR PANELS, BATTERY, INVERTER* | 1. Yes | | | | | |  |  |  |
| 2. No | | | | | | Skip To L.13 |  |  |
| 99. NA | | | | | | Skip To L.13 |  |  |
| L.1a | What is the status of solar Eenegy unit installation? | 1.Installed | | | | | | Skip To L.1c |  |  |
| 2.Not Installed/ Partially installed – parts are stored  / - | | | | | | Picture |  |  |
| 3.Dismantled - parts are stored  - | | | | | | Picture |  |  |
| *4.Given or Sold to some-one else* | | | | | |  |  |  |
| *5.Stolen* | | | | | |  |  |  |
| *7.Kept or Installed some-where else* | | | | | |  |  |  |
| 7.Abandoned or Discarded | | | | | |  |  |  |
| L.1b | Provide details | Specify……………………………  …………………………………………. | | | | | | Skip To L.13 |  |  |
| L.1c | When was the Solar Energy Unit Installed? | DD/MM/YYYY | | | | | |  |  |  |
|  | Solar Unit Component | Yes Or No  (if no skip to next) | | | | Total Number | | If Yes Take Picture | |  |
| L.2 | Have solar panels been provided? | Yes No  - skip to L3 | | | | Specify…. | | Picture | |  |
| L2a | Where are the solar panels installed currently? | 1. Roof   02. Ground | | | | | | Picture | | If coded 2 Skip to L2c |
| L2b | How is the panel are mounted on the roof? | 01.MMS-  02.Aluminium gladding    03.Placed on the roof without any metal frame | | | | | | Picture | | Skip to L2d |
| L2c | If it is Ground  How are /is the panel/s are mounted on the Ground?    / | 01.MMS   1. Placed on the ground without any metal frame | | | | | |  | |  |
| L2d | Take picture of the specification label (Spec label)  ( ) | Yes .. Picture taken  666. spec label is Inaccessible | | | | | | Picture | |  |
| L2e | What is the capacity of any one panel | ………….Wp/w | | | | …………….V | |  | |  |
| 666. spec label is Inaccessible | | | | | |  | |  |
| L3 | Have batteries been provided? | Yes No - skip to L4 | | | | Specify…. | | Picture | |  |
| L3a | Where are the batteries or battery bank placed? | 01.on the ground    02.On the shelf    03.Battery box    04.Battery Rack | | | | | | Picture | |  |
| L3b | Are the batteries places on acid absorbent mats or wooden plate? | 1. Rubber mats     02.Wooden plate     1. None     77. Others Specify …………….. | | | | | |  | |  |
| L3c | Take picture of the specification label (Spec label) | Yes .. Picture taken  666. spec label is Inaccessible | | | | | | Picture | |  |
| L3d | What is the capacity of any one Battery? | ………… Ah | | | | | |  | |  |
| 666. spec label is Inaccessible | | | | | |  | |  |
| L3e | What is the Brand of the Battery? | Specify …………….. | | | | | |  | |  |
| L4 | Have solar lights been provided? | Yes No - skip to L5 | | | | Specify…. | | Picture | |  |
| L5 | Have solar fans been provided? | Yes No - skip to L6 | | | | Specify…. | | Picture | |  |
| L6 | Have power sockets been provided? | Yes No - skip to L7 | | | | Specify…. | | Picture | |  |
| L7 | Have AJBs (**ARRAY JUNCTION BOX**​ been provided?  ( ) | Yes No - skip to L8 | | | | Specify…. | | Picture | |  |
| L.8 | Have Lighting Arrester been provided? | Yes No - skip to L9 | | | | Specify…. | | Picture | |  |
| L.9 | Have GIPB (**GRID INPUT PROTECTION Box)** been provided?  ( ) | Yes No - skip to L10 | | | | Specify…. | | Picture | |  |
| L.10 | Have Inverter been provided? | Yes No - skip to L11 | | | | Specify…. | | Picture | |  |
| L.10a | What is the type if inverter installed? | 01.SPCU    02. Micro inverter    03 Hybrid Inverter | | | |  | |  | |  |
| L.11 | Have Charge controller been provided? | Yes No - skip to L12 | | | | Specify…. | | Picture | |  |
| L.12 | Have Earthing pit been provided?  " | Yes No - skip to L13 | | | | Specify…. | | Picture | |  |
| Solar powered livelihood appliances | | | | | | | |  |  |  |
| L.13  (L.7) | Did the end-user receive solar powered livelihood appliances from Selco Foundation? | 1. Yes | | | | | |  |  |  |
| 2. No | | | | | | To L.21 |  |  |
| 99. NA | | | | | | To L.21 |  |  |
| L.14  (L.8) | If yes…  The total types of Livelihood appliances provided | Specify No…… | | | | | |  |  |  |
| L.14a | Does the end-user still have the solar-powered appliances provided? | 1.Yes, All appliances are found  , | | | | | | Skip to L.15 |  |  |
| 2.No*ne of the appliances are found* | | | | | |  |  |  |
| 3.Yes, Few appliances are found  , | | | | | |  |  |  |
| L.14b | what happened to Solar powered appliances provided? | *4.Given or Sold to some-one else* | | | | | |  |  |  |
| *5.Stolen* | | | | | |  |  |
| *7.Kept or Installed some-where else* | | | | | |  |  |
| 7.Abandoned or Discarded | | | | | |  |  |
| L.14c | Provide details | Specify……………………. | | | | | | To L.21 |  |  |
| L.15  (L.9) | Details of DLS deployed | DLS 1 | | DLS 2 | | | DLS 3 |  |  |  |
| L.16  (L.10) | Name of the Appliance | Choose from the list | | Choose from the list | | | Choose from the list |  |  |  |
| L.16 | Variant of the Appliance | Specify… | | Specify… | | | Specify… |  |  |  |
| L.17 | Name of the Brand - solar powered livelihood appliances  - | Specify… | | Specify… | | | Specify… |  |  |  |
| L.19  (L.11) | When was the DLS Appliance installed? | DD /MM/YYYY | | DD /MM/YYYY | | | DD /MM/YYYY |  |  |  |
| L.19a | Take Picture of the *Complete Appliance* | *Complete Appliance* | | *Complete Appliance* | | | *Complete Appliance* |  |  |  |
| L.19b | Take Picture of the *Spec Label* | *Spec Label* | | *Spec Label* | | | *Spec Label* |  |  |  |
| L.20 | Removed |  | | | | | |  |  |  |
| **BE/Productive work space** | | | | | | | |  |  |  |
| L.21  (L.12) | Did the end-user get any types of building infrastructure support by SELCO foundation for better cooling, ventilation and safety?    *Cool roof, Storage, whole structure, Floor* | 1)      Yes | | | | | |  |  |  |
| 2)      No | | | | | | To L.24 |  |  |
| 99. NA | | | | | | To L.24 |  |  |
| L.22  (L.13) | What kind of built environment or productive work space infrastructure services were provided? |  | | | | | | | | |
| a.1)New enterprise buidling or structure  or | | Yes | | | No | If yes Take Picture |  |  |
| a)Improved roofing | | Yes | | | No | If yes Take Picture |  |  |
| b)Improved walls | | Yes | | | No | If yes Take Picture |  |  |
| c)Improved hight of the building | | Yes | | | No | If yes Take Picture |  |  |
| d)Provisions for natural lighting and natural ventilation | | Yes | | | No | If yes Take Picture |  |  |
| e)External shading | | Yes | | | No | If yes Take Picture |  |  |
| f)Windows and doors | | Yes | | | No | If yes Take Picture |  |  |
| g)Interior finishing | | Yes | | | No | If yes Take Picture |  |  |
| h)Heat or smoke extractors | | Yes | | | No | If yes Take Picture |  |  |
| i)Storage – Cupboard, Shelves  - | | Yes | | | No | If yes Take Picture |  |  |
| j)Shop front portion / Display area  / | | Yes | | | No | If yes Take Picture |  |  |
| k)Workstation counters Partitions | | Yes | | | No | If yes Take Picture |  |  |
| l)Ramps | | Yes | | | No | If yes Take Picture |  |  |
| m)Toilets | | Yes | | | No | If yes Take Picture |  |  |
| n)Portable sheds | | Yes | | | No | If yes Take Picture |  |  |
| o)Customer waiting area | | Yes | | | No | If yes Take Picture |  |  |
| Other specify ……………. | |  | | |  | If yes Take Picture |  |  |
| L.23  (L13a) | When was the Built environment infrastructure installed? | DD/MM/YYYY | |  | | |  |  |  |  |
| **Training** | | | | | | | | |  |  |
| L.24  (L.14) | Did the end-user receive any training on Appliance operation and maintenance the following subjects? |  |  | |  | |  |  |  |  |
|  |  | |  | |  |  |  |  |
|  |  | |  | |  |  |  |  |
|  | Subjects |  | **Removed** | | **II. Trained by**  **परीक्षण किसने दिया** | | **III. Training location**  **परीक्षण की जगह** |  |  |  |
| L.25A  (L.14.A) | General operation of the Solar Unit | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| L.25B  (L.14.B) | Cleaning Solar panels | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| L.25C  (L.14.C) | Distilled water level checking and refilling | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| L.25D  (L.14.D) | General operation of the DLS | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| L.25E  (L.14.E) | General maintenance of the DLS | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| L.25F  (L.14.F) | Reporting the issues to the concerned agency | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| L.25G  (L.14.G) | Other Specify ……………… . | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| L.25H  (L.14.H) | Other Specify ………………. | Y/N/NA |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | ……………………. |  |  |  |
| **Financial Leverage** | | | | | | | |  |  |  |
| L.26  (L.15) | Does the end-user know what was the total cost of the intervention provided (-Solar Energy unit, appliances and BE infrastructure)?  (- ) | 1)      Yes, Specify Rs………….. | | | | | |  |  |  |
| 2. No | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.27  (L.16) | Did the end-user take any loan to avail the intervention? (solar energy unit, appliance, BE) from financial Institutes @(MFIs/SHGs / Banks/ Cooperative Societies) ?  (/// ) (- ) /? | 1 Yes | | | | | |  |  |  |
| 2 No | | | | | | To L.34 |  |  |
| L.27A  (L.16.A) | How much loan amount has been availed? | Specify………………………….. | | | | | |  |  |  |
| L.28  (L.17) | Did any-one help the end-user to avail the loan? | 1 Yes | | | | | |  |  |  |
| 2 No | | | | | | To L.29 |  |  |
| L.28A  (L.17.A) | If yes,  Who helped the end-user to avail the loan? | Name of the person / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |
| Name of Organisation /   : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.29  (L.18) | Where did the end-user take the loan from? | Financial Institute / Bank / Micro finance name: / / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |
| Branch name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.30  (L.19) | What is the rate of interest (in %)?  ( )? | Specify ………….% | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.31  (L.20) | What kind of installments does the end-user have? | 1. Monthly | | | | | |  |  |  |
| 2.Fortnightly | | | | | |  |  |  |
| 3.Weekly | | | | | |  |  |  |
| Daily | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.32  (L.21) | How much the end-user have to pay per installment? | INR……………………… | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.33  (L.22) | When is the loan likely to be paid completely ? | MM/YYYY | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.34  (L.23) | Did the end-user receive any subsidies or financial support from any other entities to avail the solar energy appliance? | 1 Yes | | | | | |  |  |  |
| 2 No | | | | | | To L.36 |  |  |
| 999. Don't know | | | | | |  |  |
| L.35  (L.24) | If yes,  How much subsidy or financial support received? | Rs…………………….. | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.36  (L.25) | Name of the entity | SpecifY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |
| 999. Don't know | | | | | |  |  |  |
| L.37  (L.26) | Did the end-user pay any amount **directly**? | 1. Yes  Specify amount Rs…………………………………………… | | | | | |  |  |  |
| 2. No | | | | | | To Sec. L.38a |  |  |
| 999. Don’t know | | | | | |  |  |
| L.38.1  (L.28.1) | How did the end-user arrange this amount? | 1. From savings | | | | | |  |  |  |
| 1. Through a hand loan | | | | | |  |  |  |
| 1. Pledged the assets (jewellery / vehicles)   ( / ) | | | | | |  |  |  |
| 1. Sold the assets (jewellery / vehicles / animals)   ( / / ) | | | | | |  |  |  |
| 77. Others Specify …………….. | | | | | |  |  |  |
| 999. Don't want to reveal / Don’t know/ prefer not to answer | | | | | |  |  |  |
| L.38a  (L.28a) | Who is actually using/operating the machine/appliance?  / / | 1. Self 2. Others | | | | | | if “self” skip to L29a |  |  |
| L.38b  (L.28b) | What is the end-user relationship with the user? | 1. *Spouse*   */*   1. *Parent*   */*   1. *In-law* 2. *Child* 3. *Family member*      1. *Neighbour* 2. *Friends*     7. Others -  Specify …………….. | | | | | |  | Next section |  |
| No Intervention Deployed if the end-user had not received any appliances (No in L1, L13 and L21) But made payments though loan or direct investment (Yes in L27 or L37) – Ask | | | | | | | | |  |  |
| L.29a | When does the end-user likely to receive the livelihood solution?  / | a) DD-MMM-YY | | | | | | Skip to S SECTION |  |  |
| b) I don’t want the intervention-refused | | | | | | Skip to L.31a |
| 999. Don’t know | | | | | | Skip to S SECTION |
|  | if the end-user had not received any appliances (No in L1, L13 and L21) But did not make any payments though loan or direct investment (No -in L27 or L37) – Ask | | | | | | | | |  |
| L.30a | Did anyone talk to the end-user about the solar powered livelihood solution for the enterprise before this visit? | 1)Yes, Only a formal talk till now  , | | | | | | Skip to S SECTION |  |  |
| 2) Yes, I am getting livelihood appliances specified by you soon, but I haven't made any payments  , | | | | | | Skip to S SECTION |
| 3) Yes, i refused the offer later stage  , | | | | | | Skip to L.31a |
| 4)No, No one has spoken to me about such things so far. I know nothing about it  , | | | | | | Skip to S SECTION |
| 77. Others Specify …………….. | | | | | | Skip to S SECTION |
|  |
| L.31a | What is the reason for refusing the offer? | Specify…………….. | | | | | | Skip to S SECTION |  |  |

### M. Satisfaction scores

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| M. Satisfaction scores | | | | | |
| **Sl.No.** | **Question** | **Response** | **Skips** | **Source of Info** | **Remarks** |
| M.1 | If “yes“ in L.27  How satisfied the end-user is with the financial assistance received from financial institutions? | 1. Not at all satisfied |  |  |  |
| 2. Slightly satisfied |  |  |  |
| 3. Moderately satisfied |  |  |  |
| 4. Very satisfied |  |  |  |
| 5. Extremely satisfied |  |  |  |
| M.2 | If “yes“ in L1 orL13 or L21  How satisfied the end-user is with the Installation services of solar energy unit or Livelihood appliances or BE infrastructure? | 1. Not at all satisfied |  |  |  |
| 2. Slightly satisfied |  |  |  |
| 3. Moderately satisfied |  |  |  |
| 4. Very satisfied |  |  |  |
| 5. Extremely satisfied |  |  |  |
| M.3 | If “yes“ in L1 orL13 or L21  In the end-user’s opinion, to what extent intervention (solar energy units or Livelihood appliances or BE infrastructure) has been delivered as per the committed timeline? | 1.Before committed time |  |  |  |
| 2.On committed time |  |  |  |
| 3.Moderately delayed beyond committed time |  |  |  |
| 4Highly delayed beyond committed time |  |  |  |

## B. Present Situation

### N.e1 Monitoring SECTION- Solar / DLS / BE Intervention functionality

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| N.     Monitoring SECTION- Solar / DLS / BE Intervention functionality ASK IF, L.1a is “1.Installed” Or L.14a is “1.Yes, All appliances are found or 3.Yes, Few appliances are found” or L.21 is “Yes” | | | | | | | |
| **Sl.No.** | **Question** | **Response** | | **Skips** | **Source of Info** | **Remarks** | |
| N.1 | Whether the livelihood or enterprise was active since the installation? | 1. Yes | | To N.3 |  |  | |
| 2. No | |  |  |  | |
| N.2 | If No,  Specify the reason for not being active | Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  | |
| N.3 | ASK IF, L.1a is “1.Installed  Whether the solar energy unit (Panels +Battery) is functional since the installation?  ( + ) | 1. Yes | | To N.9 |  |  | |
| 2. No | |  |  |  | |
| 99. NA- Solar unit is not provided | | To N.9 |  |  | |
| N.4 | If solar energy unit is not functional, Specify the problems faced | A. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  | |
| B. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  | |
| C. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  | |
| N.9  (N.5) | ASK if L.14a is “1.Yes, All appliances are found or 3.Yes, Few appliances are found  Whether the livelihood appliance /s provided is/are functional in the since the installation? | 1. Yes, all are functional | | To N.6 |  |  | |
| 2. Only few are functional | |  |  |  | |
| 3. No, nothing is functional | |  |  |  | |
| 99. NA- Appliance not provided | | To N.6 |  |  | |
| N.9a  (N.5.A) | If No,  Specify the problems faced | A. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Skip to N 10 |  |  | |
| B. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| C. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | |
| N.6 | Is the end-user currently using Solar Energy unit and solar powered appliances? | 01.Yes, Using both  , | | Skip to N8 |  |  | |
| 02.Yes, Using only Solar energy unit  , | |  |  |  | |
| 03.Yes, Using only the Appliance  , | |  |  |  | |
| 04. Not using any of the intervention | |  |  |  | |
| N.7 | Why does the end-user not using Solar energy unit or solar powered appliance? | 1. No demand for the product      1. Enterprise or business activity is stopped      1. Health Issues      1. Don’t know how to use solar intervention      1. Operator has moved to another place      1. Plans to shift the enterprise     77 Other specify | |  | If no in |  | |
| N.8 | Others specify | Specify ………………………………… | |  |  |  | |
| N.10  (N.6) | ASK if “YES” IN L.21  Did the end-user encounter any problem with the Built environment infrastructure provided since the installation? | 1.Yes | |  |  |  | |
| 2. No | | To N.11 |
| 99. NA | | To N.11 |
| N.10a  (N.6a) | If yes,  Specify the problems faced  , | Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  | |
| Open only when N.3 is “2. No”, N.9 is “2. Only few are functional or 3. No, nothing is functional” or N.10 is “1.Yes” | | | |  |  |  | |
| N.11  (N.9) | Did the end-user contact anyone to resolve the problem he/she has encountered in the since the installation? | 1.Yes | |  |  |  | |
| 2.No | | To N.11C |  |  | |
| 3. No- resolved the issue by my-self or locally | | To N.11D |  |  | |
| N.11A  (N.9.A) | If yes, whom did the end-user contact? | Specify name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  | |
| 999. Don't know | |  |  |  | |
| N.11B  (N.9.B) | When did the end-user contact the service provider approximately? | DD/MM/YYYY  999. Don't know | |  |  |  | |
| N.11C  (N.9.C) | When did the service provider visit the enterprise of livelihood site to resolve the issue? | 1. Specify date : DD/MM/YYYY | |  |  |  | |
| 1. Visit is not required, Problem resolved over the phone | |  |  |  | |
| 3. Service provider is yet to visit the site | |  |  |  | |
| N.11D  (N.9.D) | When was the problem resolved finally? | 1. Specify date.. ………../…………./……… (DD/MM/YYYY) | |  |  |  | |
| 2. Problem not yet resolved | |  |  |  | |
| N.11e | How is the enterprise or business activity is running as the solar powered appliance or solar energy unit is not functional? | 01. Using the grid electricity    02. Manual operations    03.Enterprise or business activity is stopped    04. Using Diesel Generator (DG set)  ( )  77 Others specify....... | |  |  |  | |
| N.12  (N.10) | How often the end-user clean the solar panels? | 1.    Once a week | |  |  |  | |
| 2.    Once in two weeks | |  |  |  | |
| 3.    Once a month | |  |  |  | |
| 999. Don't know | |  |  |  | |
| N.13  (N.11) | When was the solar panel cleaned last time? | 1. Specify date.. ………../…………./……… (DD/MM/YYYY) | |  |  |  | |
| 2.    Not yet cleaned | |  |  |  | |
| 999. Don't know | |  |  |  | |
| N.13A  (N.11A) | How often does the end-user check the level of distilled water in the battery? | 1.    Everyday | |  |  |  | |
| 2.    Once a week | |  |  |  | |
| 3.    Once in two weeks | |  |  |  | |
| 4.    Once a month | |  |  |  | |
| 5.    Once in two month | |  |  |  | |
| 999. Don't know | |  |  |  | |
| N.14  (N.12) | When was the last time the end-user refilled distilled water for batteries? | 1. Specify date.. ………../…………./……… (DD/MMM/YY) | |  |  |  | |
| 2. Not refilled yet | |  |  |  | |
| 3. Refillment not required | |  |  |  | |
| 999. Don't know | |  |  |  | |
| N.15  (N.13) | What is the primary source of energy **for the intervened activity in** the livelihood/Enterprise? | ***I. Primary source of energy for production / daily operation or machinery***  / | ***II. Primary source of energy for for lighting and ventilation?*** | III.Secondary Source of Energy | IV.Average cost per month | V.Average units consumed per month |
| 1)      Grid Electricity | 1)      Grid Electricity | A.Grid Electricity |  |  |
| 2)      Diesel / Petrol -DG sets | 2)      Diesel / Petrol -DG sets | B.Diesel / Petrol -DG sets |  |  |
| 3)      Kerosene | 3)      Kerosene | C.  Kerosene |  |  |
| 4)      Solar | 4)      Solar | D.  Solar |  |  |
| 5)      Wind | 5)      Wind | E.   Wind |  |  |
| 6)      Biogas / Gobar gas | 6)      Biogas / Gobar gas | G.   Biogas / Gobar gas |  |  |
| 7)      Firewood | 7)      Firewood | H.   Firewood |  |  |
| 8)      LPG | 8)      LPG | I.    LPG |  |  |
|  | 9)      CANDLES |  |  |  |
| 77. Others  Specify …………….. | 77. Others  Specify …………….. | J. Others  Specify …………… |  |  |
| 88. None | 88. None | K. None |  |  |
| 99. NA | 99. NA | L. NA |  |  |
| N15 A | On average, how frequently did your enterprise experience power outages or blackouts in a typical month?  ( 4  *Power outage for full day or night or for more than 4 hours continuously* | 1)No power outage blackout | | Open only if “grid electricity or Solar” option is selected in N15 |  |  |
| 2)Once a month | |  |  |
| 3) Two to 4 days a month  04 | |  |  |
| 4)Five to 9 days a month  9 | |  |  |
| 5)Around 10 to 14 days a month  10 14 | |  |  |
| 6)More than 15 days a month  15 | |  |  |
| 7)Every alternative day | |  |  |
| 8)Every day | |  |  |
| N15 B | On average, how many times did your enterprise experience power cuts or dropouts in a day?    *FREQUENT SHORT PERIOD POWER OUTAGE* | 1)No power cuts or dropout | | Open only if “grid electricity or Solar” option is selected in N15 |  |  |
| 2)1 to 2 times a day  1 2 | |  |  |
| 3)<2 to 5 times a day  2 5 | |  |  |
| 1. >6 times a day | |  |  |
| N15 C | When your enterprise faces power outages, blackouts, or cuts, what are the implications or consequences? | a)Do other works in the livelihood centre which does not need energy | | Open only if “grid electricity or Solar” option is selected in N15 |  |  |
| b)Continue the livelihood activity manually | |  |  |
| c)Use the secondary source of energy (DG set)  ( ) | |  |  |
| d)Stop the livelihood activity till the power comes back | |  |  |
| e)Extend the working hours | |  |  |
| f)Close the enterprise early | |  |  |
| g)Wastage of labour | |  |  |
| h)Wastage of raw materials | |  |  |
| I)Wastage of products | |  |  |
| J)Leads to poor quality of finished products | |  |  |
| 77. Others  Specify …………….. | |  |  |
| N15D | In a typical month, how frequently did your enterprise experience power (voltage) fluctuations on average?    *voltage dips* | 01 No power (voltage) fluctuation  () | | Open only if “grid electricity or Solar” option is selected in N15 |  |  |
| 02 Once a month | |  |  |
| 03 Two to 4 days a month  04 | |  |  |
| 04 Five to 9 days a month  9 | |  |  |
| 05 Around 10 to 14 days a month  10 14 | |  |  |
| 06 More than 15 days a month  15 | |  |  |
| 07 Every alternative day | |  |  |
| 08 Every day | |  |  |
| N15E | How do the power (voltage) fluctuations affect daily operation or production or services?  () () | a)Machines may not work | | Open only if “grid electricity” option is selected in N15 |  |  |
| b)Machine damages | |  |  |
| Others | |  |  |
| N15F | To what degree is Electricity disruption an obstacle to the current operations of this enterprise? | 1. No obstacle | | Open only if “grid electricity” option is selected in N15 |  |  |
| 2.Minor obstacle | |  |  |
| 3.Moderate obstacle | |  |  |
| 4.Major obstacle | |  |  |
| 5.Very Severe Obstacle | |  |  |
| 999. Don't know | |  |  |
| Not Applicable | |  |  |
| N.17 | Average Working hours per day    NOTE: SPENT ON INTERVENED ACTIVITY | ………………….…………..Hours per day | |  |  |  | |
| N.18 | Average Working days in a month    NOTE: SPENT ON INTERVENED ACTIVITY | ………………………………Days per month | |  |  |  | |
| N.18a | To what extent does the current energy infrastructure of enterprise provide you flexible working hours? | 1. Almost always      1. Most of the occasions      1. Very little      1. Not at all     99. NA | |  |  |  | |
|  | Loan Repayment Section | Open only if “1. Yes” in L.16 | |  |  |  | |
| N.19 | What is the status of repayment of the loan availed? | 1. Not able to pay back the EMIs | |  |  |  | |
| 2. Paid the last EMI | | To  N.19 B |  |  | |
| 3. Paid the loan completely | |  |  | |
| N.19.A | Reasons for not paying the loan or EMI’s  : | A. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | To section O |  |  | |
| N.19 B | If loan paid, Is it paid from the enterprise income or from some other sources? | Yes  No | |  |  |  | |

### O.e1 Outcome- Enterprise / Livelihood specific questions

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| O. Outcome- Enterprise / Livelihood specific questions | | | | | | | | |
| **Sl. No.** | **Question** | **Response** |  |  | **Skips** | **Source of Info** | | **Remarks** |
| If it is a production unit – J.6 a)    Production Unit | | | | | | | | |
| O.1q | How many types of products are produced in the enterprise? | Specify number……. | | |  |  | |  |
| O.1 | What are the different products produced and what is the quantity of production ? | **I Average Quantity**  मात्रा | **II Unit Of measure** | **III Time period per….** |  |  | |  |
| O.1.A | Name of product……………… | A. Specify\_\_\_\_\_ \_ | **Grams/KG/LITRES/ Pieces /Number /Qunitle/ Bags/Customers)** | **Per day/week/month/quarter/cycle/Season / year/ batch/ others)** |  |  | |  |
| O.1.B | Name of product……………… | B. Specify\_\_\_\_\_ \_\_\_\_ |  |  |  |  | |  |
| O.1.C | Name of product……………… | C. Specify\_\_\_\_\_ \_\_\_ |  |  |  |  | |  |
| O.1.D | Name of product……………… | D. Specify\_\_\_\_\_ \_\_\_ |  |  |  |  | |  |
| O.1.E | Name of product……………… | E. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.1.F | Average time taken to produce one Unit? | ……………...Minutes per unit | | |  |  | |  |
| If it is a Retail/Sales unit – J.6 b)    Retail/Sales Unit | | | | | | | | |
| O.2o | How many types of products are sold in the enterprise? | Specify NUMBER …………. | | |  |  | |  |
| O.2 | What are the different products sold and what is the average quantity of sales? | **I Average Quantity**  मात्रा | **II Unit Of measure** | **III Time period per….** |  |  | |  |
| O.2.A | Name of product\_\_\_\_\_\_\_\_\_\_ | A. Specify\_\_\_\_\_ \_ | **Grams/KG/LITRES/ Pieces /Number /Qunitle/ Bags/Customers)** | **Per day/week/month/quarter/cycle/Season / year/ batch/ others)** |  |  | |  |
| O.2.B | Name of product\_\_\_\_\_\_\_\_\_\_ | B. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.2.C | Name of product\_\_\_\_\_\_\_\_\_\_ | C. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.2.D | Name of product\_\_\_\_\_\_\_\_\_\_ | D. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.2.E | Name of product\_\_\_\_\_\_\_\_\_\_ | E. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| If it is a Services Unit unit – J.6 c)       Services Unit | | | | | | | | |
| O.3o | How many types of services provided in the enterprise? | specify number………………. | | |  |  | |  |
| O.3 | What are the different services provided and what is the average quantity of services? | **I Average Quantity**  मात्रा | **II Unit Of measure** | **III Time period per….** |  |  | |  |
| O.3.A | Name of service\_\_\_\_\_\_\_\_\_\_ | A. Specify\_\_\_\_\_ \_ | **Grams/KG/LITRES/ Pieces /Number /Qunitle/ Bags/Customers)** | **Per day/week/month/quarter/cycle/Season / year/ batch/ others)** |  |  | |  |
| O.3.B | Name of service\_\_\_\_\_\_\_\_\_\_ | B. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.3.C | Name of service\_\_\_\_\_\_\_\_\_\_ | C. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.3.D | Name of service\_\_\_\_\_\_\_\_\_\_ | D. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.3.E | Name of service\_\_\_\_\_\_\_\_\_\_ | E. Specify\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  | |  |
| O.5 | *Whether The production / sales/services of the enterprise has improved/reduced/ remained same when compared to the situation prior to intervention?*  */ /*  INSTRUCTIONS: COMPARE THE PRODUCTION / *SALES/ SERVICE NUMBER WITH THE PRE-INTERVENTION DATA* | 1)      *Improved* | | |  |  | | Auto verify |
| 2)      *Reduced* | | |  |  | |  |
| 3)       *Remained same* | | |  |  | |  |
| O.5.A | What is the reason for change in the production / Sales/ Services?  / /  PROBES:  *DUE TO THE SEASONAL DEMAND*  *ऋतुसंबंधीय मांग के कारण*  *DUE TO CHANGE IN OVERALL DEMAND*  *समग्र मांग में परिवर्तन के कारण*  *DUE TO SOLARISATION*  *सोलराइजेशन के कारण*  *DUE TO CHANGED INFRASTRUCTURE*  *परिवर्तित बुनियादी संरचना के कारण*  *DUE TO CHANGED OPERATIONAL EXPENDITURE*  *परिवर्तित परिचालन व्यय के कारण*  *DUE TO EASE OF WORK* | A. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| B. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| C. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| D. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| E. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| O.6 | Who are the targeted customers / Beneficiaries ? | **I. Type of customers** | **II. Total number of customers per month** | |  |  | |  |
| O.6.A |  | a-Individual / local consumer  (villagers, farmers, the general public, tourists, students)  / (, ) | Specify………… | |  |  | |  |
| O.6.C |  | b-retailers or shops | Specify………… | |  |  | |  |
| O.6.D |  | c-contractor or wholesalers | Specify………… | |  |  | |  |
| O.6.e |  | 66. Information not available |  | |  |  | |  |
| O.7 | What is the average **revenue** from the livelihood/enterprise since the installation?  ( ) | Specify INR…………………… | *Per Day / Per week/ Per month /Per quarter /Per cycle /Per Season /Per year / Per Batch / others…. (Specify..* | |  |  | |  |
| 66. Information not available | | |  |  | |  |
| O.8 | What is the average **expenditure** from the livelihood/enterprise since the installation?  + + +  (Inclusive of Raw materials + HR + Rent + Operation costs) for the livelihood/enterprise in the last calendar (Specify………..) month? | Specify INR…………………… | *Per Day / Per week/ Per month /Per quarter /Per cycle /Per Season /Per year / Per Batch / others…. (Specify..* | |  |  | | Auto verify |
| 66. Information not available | | |  |  | |  |
| O.9 | What is the average **profit** (take home) from the livelihood/enterprise since the installation?  ( ) | Specify INR…………………… | *Per Day / Per week/ Per month /Per quarter /Per cycle /Per Season /Per year / Per Batch / others…. (Specify..* | |  |  | |  |
| 66. Information not available | | |  |  | |  |
| O.9A | Remove this qn |  | | |  |  | |  |
| O.10 | *Whether The* revenue / Expenditure/ profit *of the enterprise has improved/reduced/ remained same when compared to the situation prior to intervention?*  */ /*  INSTRUCTIONS : COMPARE THE REVENUE / EXPENDITURE/ PROFIT *NUMBERS WITH PRE-INTERVENTION DATA* | 1)      *Improved* | | |  |  | |  |
| 2)      *Reduced* | | |  |  | |  |
| 3)       *Remained same* | | |  |  | |  |
| O.10A | What is the reason for increased or decreased or same revenue / Expenditure/ profits?  / /  PROBES:  *DUE TO THE SEASONAL DEMAND*  *ऋतुसंबंधीय मांग के कारण*  *DUE TO CHANGE IN OVERALL DEMAND*  *समग्र मांग में परिवर्तन के कारण*  *DUE TO SOLARISATION*  *सोलराइजेशन के कारण*  *DUE TO CHANGED INFRASTRUCTURE*  *परिवर्तित बुनियादी संरचना के कारण*  *DUE TO CHANGED OPERATIONAL EXPENDITURE*  *परिवर्तित परिचालन व्यय के कारण*  *DUE TO EASE OF WORK*  *काम को सरलता के कारण* | A. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| B. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| C. Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | |  |
| O.11 | Does the daily operations of the enterprise include any drudgeries activities? | 1)      Yes | | |  |  |  | |
| 2)      No | | | Skip to O12 |  |  | |
| O.11a | To what extent the work in this enterprise is physically demanding? | 1. Not at all physically demanding      1. Slightly physically demanding      1. Moderately physically demanding      1. Very physically Demanding      1. Extremely physically demanding | | |  |  |  | |
| O.11b | To what extent does the labour feel exhausted after completing their work in this enterprise? | 1. Not all exhausted      1. Slightly exhausted      1. Moderately exhausted      1. Very exhausted      1. Extremely exhausted | | |  |  |  | |
| O.11c | How do you rate the pain due to posture assumed while doing the activities on this enterprise? | 1. No pain      1. Low pain      1. Moderate pain      1. Very Painful      1. Extremely painful | | |  |  |  | |
| O.11d | How do you rate the level of difficulty involved in the daily activities of this enterprise? | 1. Very easy      1. Easy 2. Moderately difficult      1. Difficult 2. Very difficult | | |  |  |  | |
| O.12 | If coded 1 in A05  What is the end-users current overall family income from all sources per month at present? | Rs……………………………………….. | | |  |  |  | |
| 999. Don't want to reveal / Don’t know/ prefer not to answer | | |  |  |  | |
| O.13 | If coded 2 in A05  What is the overall income of the group from all sources per month at present? | Rs………………………………………..  999. Don't want to reveal / Don’t know/ prefer not to answer | | |  |  |  | |
| O.13 | If coded 3 in A05  What is the overall income of the institution from all sources per month at present? | Rs………………………………………..  999. Don't want to reveal / Don’t know/ prefer not to answer | | |  |  |  | |

### R. Additional Pictures (if consent is answered)

Moved to S section

### S\_A Unavailability of the end-user\_Additional

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl # | Question | Response | Skips | Remarks |
| S\_A9 | Do the end-user (add name from the list) stay or work here?  ( ) | 1. YES 2. NO |  |  |
| S\_A10 | What kind of business does the end-user have? | Specify the business.. |  |  |
| S-A11 | Any solar energy system /appliance has been given to the end-user?  / | 1. YES 2. NO 3. DON’T KNOW | If coded 2 or 3 skil to S\_A12 |  |
| S\_A11\_1 | Specify the appliance/ solar energy system given  / | Specify…. | IF 1 CODED IN S\_A11 |  |
| S\_A12 | Are the appliance/ solar energy system visible to the enumerator  / | 1. YES 2. NO |  |  |
| S\_A12\_1 | TAKE PICTURE of appliance and solar energy system | Picture | IF CODED 1 IN S\_A12 |  |
| S\_A13 | What is the source of the above information? | TEXT |  | Skip to S04 |

### S. REMARKS (IF CONSENT IS ANSWERED)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S01 | Record the overall comments from the end -user  Ask permission from the end user before | AUDIO |  |  |
| S02 | Record the overall comments from the enumerator  Enumerator | AUDIO |  |  |
| S03a | Take a picture from entire livelihood centre or enterprise from outside | Picture |  |  |
| S03b | Take a picture of end-user or respondent with appliance or solar energy unit | Picture |  |  |
| S03c | Take a picture of field enumerator and end-user or respondent  Enumerator | Picture |  |  |
| S04 | Write the date of completing the interview/ visit | Auto capture DATE |  |  |
| S05 | Write the time of completing the interview/ visit | Auto capture CURRENT TIME |  |  |