

**CENTRE FOR SCIENCE AND ENVIRONMENT, NEW DELHI**

**INSTITUTION LEVEL SURVEY - BIJNOR**

**QUESTIONNAIRE**

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| **1** | **GENERAL** | **Institute 1** | **Institute 2** | **Institute 3** |
| 1.1 | Name[s] of Interviewer[s]: |   |   |   |
| 1.2 | Date: |   |   |   |
| 1.3 | Name of the organization/institute |   |   |   |
| 1.4 | Name and designation of interviewee |   |   |   |
| 1.5 | Detailed address of the institute |   |   |   |
| 1.6 | Type of institute (Please ✓or circle ) |  Govt. / Private |  Govt. / Private |  Govt. / Private |
| 1.7 | Building activity (Please ✓or circle) | Office/ bank/ temple / Cinema hall, school/College/ Hotel /Restaurant/ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Office/ bank/ temple / Cinema hall, school/College/ Hotel /Restaurant/ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Office/ bank/ temple / Cinema hall, school/College/ Hotel /Restaurant/ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1.8 | Location of the institute (Please ✓or circle)  |  Urban/ Rural/ Authorized/ Slum/ Notified/ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Urban/ Rural/ Authorized/ Slum/ Notified/ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Urban/ Rural/ Authorized/ Slum/ Notified/ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1.9 | Is there any open drain of solid waste dumping site near the institute?(Please ✓or circle) |  Yes / No  |  Yes / No  |  Yes / No  |
| 1.10 | How long the institute has been running?(Please ✓or circle) |  **> 5** / **5-15** / **15 – 25 / <25 years** |  **> 5** / **5-15** / **15 – 25 / <25 years** |  **> 5** / **5-15** / **15 – 25 / <25 years** |
| 1.11 | Total number of users? | Residential\_\_\_\_\_\_\_\_Floating\_\_\_\_\_\_\_\_\_\_ | Residential\_\_\_\_\_\_\_\_Floating\_\_\_\_\_\_\_\_\_\_ | Residential\_\_\_\_\_\_\_\_Floating\_\_\_\_\_\_\_\_\_\_ |
| 1.12 | Total area of campus?  | \_\_\_\_\_\_\_\_sqm/sqft | \_\_\_\_\_\_\_\_sqm/sqft | \_\_\_\_\_\_\_\_sqm/sqft |
| 1.13 | Total area open available in your institute? |  \_\_\_\_\_\_\_\_sqm/sqft | \_\_\_\_\_\_\_\_sqm/sqft | \_\_\_\_\_\_\_\_sqm/sqft |
| 1.14 | Who are the users/ beneficiaries?  |   |   |   |
| 1.15 | What is the average number of users per day? (Write a number) |   |   |   |
| 1.16 | Any vulnerable group in users (Please ✓or circle) |  Children, Elderly peoples Other\_\_\_\_\_\_\_\_\_\_ |  Children, Elderly peoples Other\_\_\_\_\_\_\_\_\_\_ |  Children, Elderly peoples Other\_\_\_\_\_\_\_\_\_\_ |
| **2.0** | **WATER SUPPLY** |   |   |   |
| **2.1** | **What is the primary source of water?****(Please ✓or circle)** |  Municipal- pipedPrivate: Handpump / Tubewellborewell/ submersible  |  Municipal- pipedPrivate: Handpump / Tubewellborewell/ submersible |  Municipal- pipedPrivate: Handpump / Tubewellborewell/ submersible |
| 2.1.1 | Quantity available per person per day? [litres or buckets] (Please ✓or circle) | 1. 2 Bucket (14-30 L)
2. 4 Bucket (30-60 L)
3. 6 3 Bucket (60-90 L)
4. 10 Bucket (90-120 L)
5. 10 Bucket (120-150 L)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1. 2 Bucket (14-30 L)
2. 4 Bucket (30-60 L)
3. 6 3 Bucket (60-90 L)
4. 10 Bucket (90-120 L)
5. 10 Bucket (120-150 L)
 | 1. 2 Bucket (14-30 L)
2. 4 Bucket (30-60 L)
3. 6 3 Bucket (60-90 L)
4. 10 Bucket (90-120 L)
5. 10 Bucket (120-150 L)
 |
| 2.1.2 | Frequency of water supply [hrs per day] |   |   |   |
| 2.1.3 | Quality of water supplied (Please ✓or circle) |  Visual: Clear / Turbid Drink: Sweet/ Normal/ Salty Smell: Stinky/ Normal  |   Visual: Clear / Turbid Drink: Sweet/ Normal/ Salty Smell: Stinky/ Normal |   Visual: Clear / Turbid Drink: Sweet/ Normal/ Salty Smell: Stinky/ Normal |
|  2.1.4 | If bad, then which season? (Please ✓or circle)Ask the person for a case study/example [last 3-5 years] |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |
| 2.1.5 | Do you know if the water is treated before supply? (Please ✓or circle) |  Yes/ No  |  Yes/ No |  Yes/ No |
| 2.1.6 | Do you treat water before consumption? [Ask details like boiling, use of alum, laldawa] (Please ✓or circle) |  Boiling/ Use of alum/ laldawaOther\_\_\_\_\_\_\_\_\_\_ |  Boiling/ Use of alum/ laldawaOther\_\_\_\_\_\_\_\_\_\_ |  Boiling/ Use of alum/ laldawaOther\_\_\_\_\_\_\_\_\_\_ |
| 2.1.7 | Monetary charges do you pay for the water supply [per month](Write in Rupees) |   |   |   |
| 2.1.8 | When was the last time, the charges were revised? |   |   |   |
| 2.1.9 | When do you experience maximum gap in supply? [Season/ month/ time of the day] (Please ✓or circle) |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_Morning/ Afternoon/ evening / Night  |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_Morning/ Afternoon/ evening / Night |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_Morning/ Afternoon/ evening / Night |
| 2.1.10 | Do you observe water supply service failure (Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |
| 2.1.11 | If yes, what kind of (Please ✓or circle) | Pump breakdown, leakageOther\_\_\_\_\_\_\_\_\_\_\_\_\_ | Pump breakdown, leakageOther\_\_\_\_\_\_\_\_\_\_\_\_\_ | Pump breakdown, leakageOther\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2.1.12 | What is the frequency of failure  | 1- 2 times an year2- 6 times an year More than 6 times an year  | 1- 2 times an year2- 6 times an year More than 6 times an year | 1- 2 times an year2- 6 times an year More than 6 times an year |
| **2.2** | **What is the secondary/ alternate source of water? (Please ✓or circle) , If not go to 2.3** | If Municipal- pipedIf Private: Handpump / Tubewellborewell/ submersible  |  If Municipal- pipedIf Private: Handpump / Tubewellborewell/ submersible |  If Municipal- pipedIf Private: Handpump / Tubewellborewell/ submersible |
| 2.2.1 | Quantity available per person per day? [litres or buckets] (Please ✓or circle) | 1. 2 Bucket (14-30 L)
2. 4 Bucket (30-60 L)
3. 6 3 Bucket (60-90 L)
4. 10 Bucket (90-120 L)
5. 10 Bucket (120-150 L)
 | 1. 2 Bucket (14-30 L)
2. 4 Bucket (30-60 L)
3. 6 3 Bucket (60-90 L)
4. 10 Bucket (90-120 L)
5. 10 Bucket (120-150 L)
 | 1. 2 Bucket (14-30 L)
2. 4 Bucket (30-60 L)
3. 6 3 Bucket (60-90 L)
4. 10 Bucket (90-120 L)
5. 10 Bucket (120-150 L)
 |
| 2.2.2 | Frequency of water supply [hrs per day]: |   |   |   |
| 2.2.3 | Quality of water supplied (Please ✓or circle) |  Visual: Clear / Turbid Drink: Sweet/ Normal/ Salty Smell: Stinky/ Normal  |   Visual: Clear / Turbid Drink: Sweet/ Normal/ Salty Smell: Stinky/ Normal |   Visual: Clear / Turbid Drink: Sweet/ Normal/ Salty Smell: Stinky/ Normal |
| 2.2.4 | Is there any charges for availing the services [Rs per month] |   |   |   |
| 2.2.5 | When do you experience maximum gap in supply? [Season/ month/ time of the day] (Please ✓or circle) |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_Morning/ Afternoon/ evening / Night  |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_Morning/ Afternoon/ evening / Night |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_Morning/ Afternoon/ evening / Night |
| **2.3** | **When do you have the highest demand [season/month]?** |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |
| **2.4** | **When do you have the lowest demand [season/ month]?**  |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |  Monsoon/summer/ winter Other specific months \_\_\_\_\_\_\_\_\_\_ |
| **2.5** | **Are you willing to pay for the increased and regular supply?****Write in Rs/month**  |   |   |   |
| **2.6** | **How and to whom do you complain for the service failure?** |   |   |   |
| 2.6.1 | How many times have you complained in last 6 months?[also ask what type]  |   |   |   |
| 2.6.2 | How much time it took to rectify your problem? |   |   |   |
| 2.6.3 | What was the charges paid for complain redressal?  |   |   |   |
| **2.7** | **If you have a private borewell/ handpump etc., what is the depth in meters/foot** |  |  |  |
| 2.7.1 | Has the groundwater level gone down in your area as per your knowledge (Please ✓or circle) | Yes / No  | Yes / No  | Yes / No  |
| 2.7.2 | If yes, how much (Meter/foot/ per year) |  |  |  |
| **2.8** | **Are you aware of RWH systems and its benefits which can be implemented at your site (Please ✓or circle)** | Yes/ No | Yes/ No | Yes/ No |
| 2.8.1 | Do you have one such system? (RWH)(Please ✓or circle) | Yes/ No | Yes/ No | Yes/ No |
|  2.8.2 |  If yes, give the details of RWH system(Please ✓or circle and fill in the blank) |  Storage capacity: \_\_\_\_\_\_\_Depth of recharge: \_\_\_\_\_\_\_\_\_ |  Storage capacity: \_\_\_\_\_\_\_Depth of recharge: \_\_\_\_\_\_\_\_\_ |  Storage capacity: \_\_\_\_\_\_\_Depth of recharge: \_\_\_\_\_\_\_\_\_ |
| **3.0** | **SOLID WASTE** |   |   |   |
| **3.1** | **What quantity of waste do you generate per day?** **(Please ✓or circle and fill the blank)**  | Dustbin/ Bucket/ Packet (write size of container\_\_\_\_\_\_\_\_1/ 2/ 3/ 4/ 5/ 6 / If >6, specify no. \_\_\_\_\_\_\_ |  Dustbin/ Bucket/ Packet (write size of container\_\_\_\_\_\_\_\_1/ 2/ 3/ 4/ 5/ 6 / If >6, specify no. \_\_\_\_\_\_\_ |  Dustbin/ Bucket/ Packet (write size of container\_\_\_\_\_\_\_\_1/ 2/ 3/ 4/ 5/ 6 / If >6, specify no. \_\_\_\_\_\_\_ |
| **3.2** | **Do you segregate the waste at home?** **(Please ✓or circle)**  |  Yes/ No |  Yes/ No |  Yes/ No |
| 3.2.1 | What type of waste is generated(Please ✓or circle) If yes ask the details like metal, plastic, paper, kitchen waste etc. | Metal/ Plastic/ Paper, Kitchen waste/ electronic/ Polythene /animal wasteOther\_\_\_\_\_\_\_\_\_\_\_ | Metal/ Plastic/ Paper, Kitchen waste/ electronic/ Polythene/ animal wasteOther\_\_\_\_\_\_\_\_\_\_\_ | Metal/ Plastic/ Paper, Kitchen waste/ electronic/ Polythene/ animal wasteOther\_\_\_\_\_\_\_\_\_\_\_ |
| 3.2.2 | How do you manage your kitchen waste?(Please ✓or circle) | Compost/ Cattle feed/ dispose  | Compost/ Cattle feed/ dispose | Compost/ Cattle feed/ dispose |
| **3.3** | **Is the waste collected from your institute by municipality?** (Please ✓or circle) If not , go to 3.3.3 | Yes/ No | Yes/ No | Yes/ No |
| 3.3.1 | If yes, how is your waste collected? (Please ✓or circle) |  -Door to door -Community bin-Open space:\_\_\_\_\_\_\_\_\_ |   -Door to door -Community bin-Open space:\_\_\_\_\_\_\_\_\_ |   -Door to door -Community bin-Open space:\_\_\_\_\_\_\_\_\_ |
| 3.3.2 | What is the frequency of waste collection? (Please ✓or circle) |  Daily/ Weekly/ Irregular: \_\_\_\_\_\_\_\_ |   Daily/ Weekly/ Irregular: \_\_\_\_\_\_\_\_ |   Daily/ Weekly/ Irregular: \_\_\_\_\_\_\_\_ |
| 3.3.3 | If not collected by municipality, how do you dispose of your waste? (Please ✓or circle and fill the blank) | - Open dumping place: \_\_\_\_\_\_\_\_\_\_\_\_\_-Collection by private worker |  - Open dumping place: \_\_\_\_\_\_\_\_\_\_\_\_\_-Collection by private worker |  - Open dumping place: \_\_\_\_\_\_\_\_\_\_\_\_\_-Collection by private worker |
| 3.3.4 | Do the collectors (Private/govt.) segregate the waste? (Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |
| 3.3.5 | If yes, at which stage? (Please ✓or circle)  | * At door level
* At community level
 | * At door level

At community level | * At door level

At community level |
| 3.3.6 | Do the waste collectors wear protection equipment? [Ask details like masks, gloves etc.]  |  Yes/ NoMask/ Gloves/ Boots/ Uniform  |  Yes/ NoMask/ Gloves/ Boots/ Uniform |  Yes/ NoMask/ Gloves/ Boots/ Uniform |
| 3.3.7 | What kind of vehicles the collectors use?(Please ✓or circle) |  -Small vehicle- Tractor trolley -Hand cart/redi-Other\_\_\_\_\_\_\_\_\_\_\_\_ | - Small vehicle- Tractor trolley -Hand cart/redi-Other\_\_\_\_\_\_\_\_\_\_\_\_ |  -Small vehicle- Tractor trolley -Hand cart/redi-Other\_\_\_\_\_\_\_\_\_\_\_\_ |
| **3.4** | **What charges levy on the waste collection?  Prices in Rs per month** **(Please ✓or circle and fill in the blank)** | Private worker:\_\_\_\_\_\_\_\_\_Municipality: \_\_\_\_\_\_\_\_\_\_\_ |  Private worker:\_\_\_\_\_\_\_\_\_Municipality: \_\_\_\_\_\_\_\_\_\_\_ |  Private worker:\_\_\_\_\_\_\_\_\_Municipality: \_\_\_\_\_\_\_\_\_\_\_ |
| 3.4.1 | When was the last time, the charges were revised? |   |   |   |
| **3.5** | **Where your waste does finally transported to?** |   |   |   |
| **3.6** | **Are you willing to pay for door to door collection** (Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |
| 3.6.1 | If yes, how much (Rs. per month) |  |  |  |
| **3.7** | **Do you face any problem with solid waste?****(Please ✓or circle)** |  Yes/ No |  Yes/ No |  Yes/ No |
| 3.7.1 | If yes, what kind of problem?  |  |  |  |
| 3.7.2 | How and to whom do you complain for the service failure? [Ask one incident]  |   |   |   |
| 3.7.3 | How much time it took to rectify your problem? |   |   |   |
| 3.7.4 | Is there any fees for that?  |   |   |   |
| **3.8** | **Do you have any compost pit?****(Please ✓or circle)** |  Yes/ No |  Yes/ No |  Yes/ No |
|  3.8.1 |  If yes, please give the details |   |   |   |
| **4.0** | **WASTEWATER, ACCESS TO TOILET AND FECAL SLUDGE** |   |   |   |
| **4.1** | **Wastewater : Greywater** |   |   |   |
| 4.1.1 | Where does your wastewater from kitchen initially go?(Please ✓or circle) | -Open drain-Closed drain-Open ground-Farmland-Water body/pond-Fully lined tanks-One pit-Twin pit-Soak pit-Septic tank-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Open drain-Closed drain-Open ground-Farmland-Water body/pond- Fully lined tanks-One pit-Twin pit-Soak pit-Septic tank-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Open drain-Closed drain-Open ground-Farmland-Water body/pond- Fully lined tanks-One pit-Twin pit-Soak pit-Septic tank-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 4.1.2 | Where does your wastewater finally go?(Please ✓or circle and fill in the blank)  | Water body: \_\_\_\_\_\_Drain:\_\_\_\_\_\_\_\_\_\_Open land:\_\_\_\_\_\_\_\_\_\_Don’t know |  Water body: \_\_\_\_\_\_Drain:\_\_\_\_\_\_\_\_\_\_Open land:\_\_\_\_\_\_\_\_\_\_Don’t know |  Water body: \_\_\_\_\_\_Drain:\_\_\_\_\_\_\_\_\_\_Open land:\_\_\_\_\_\_\_\_\_\_Don’t know |
| 4.1.3 | Do you face any problem with your wastewater generated?(Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |
| 4.1.4 | If yes, what kind of problem do you face? (Please ✓or circle) | Flooding/ Water logging/ Mosquitos/ odor/ direct contact/ Other:\_\_\_\_\_\_\_\_\_\_\_\_ | Flooding/ Water logging/ Mosquitos/ odor/ direct contact/ Other:\_\_\_\_\_\_\_\_\_\_\_\_ | Flooding/ Water logging/ Mosquitos/ odor/ direct contact/ Other:\_\_\_\_\_\_\_\_\_\_\_\_ |
| **4.2** | **Access to Toilet and Fecal Sludge**  |   |   |   |
| 4.2.1 | Do you have a toilet at your place?(Please ✓or circle)If no, go to 4.4  | Yes/ No | Yes/ No | Yes/ No |
| 4.2.2 | If yes, what is the number of toilets at your institute? |   |   |   |
| 4.2.3 | Does you share your toilet with any other house?(Please ✓or circle) | Yes/ No | Yes/ No | Yes/ No |
| 4.2.4 | Total number of toilet seats [male and female separately](Please fill in the blank) |  Total:\_\_\_\_\_\_\_\_\_\_Male: \_\_\_\_\_\_\_\_\_Female:\_\_\_\_\_\_\_\_\_ |  Total:\_\_\_\_\_\_\_\_\_\_Male: \_\_\_\_\_\_\_\_\_Female:\_\_\_\_\_\_\_\_\_ |  Total:\_\_\_\_\_\_\_\_\_\_Male: \_\_\_\_\_\_\_\_\_Female:\_\_\_\_\_\_\_\_\_ |
| 4.2.5 | What type of toilet do you have? (Please ✓or circle) | Indian/ Western  | Indian/ Western | Indian/ Western |
| 4.2.6 | How do you flush the toilet  | * By bucket
* By cistern flush
 | * By bucket
* By cistern flush
 | * By bucket
* By cistern flush
 |
| 4.2.7 | Who paid for toilet construction?(Please ✓or circle) | * Self
* Government
 | * Self
* Government
 | * Self
* Government
 |
|  4.2.8 | Where does your toilet waste initially go?(Please ✓or circle) | -Septic tank (2 /3 Chamber)-Fully lined tanks-One pit-Twin pit-Open drain-Closed drain-Open ground-Farmland-Water body/pond-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Don’t know | -Septic tank (2 /3 Chamber)-Fully lined tanks-One pit-Twin pit-Open drain-Closed drain-Open ground-Farmland-Water body/pond-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Don’t know | -Septic tank (2 /3 Chamber)-Fully lined tanks-One pit-Twin pit-Open drain-Closed drain-Open ground-Farmland-Water body/pond-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Don’t know |
| 4.2.9 | If you have tank/pit, where does your toilet wastewater then go?(Please ✓or circle and fill in the blank)  | -Open drain-Closed drain-Open ground-Soak pit-Farmland-Water body/pond-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Don’t know |  -Open drain-Closed drain-Open ground-Soak pit-Farmland-Water body/pond-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Don’t know |  -Open drain-Closed drain-Open ground-Soak pit-Farmland-Water body/pond-Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Don’t know |
| 4.2.10 | What is the size of the containment/tank/pit?(Fill in the blank) | Length:\_\_\_\_\_\_\_\_\_\_Width:\_\_\_\_\_\_\_\_\_\_\_Depth:\_\_\_\_\_\_\_\_\_\_\_Diameter:\_\_\_\_\_\_\_\_\_Don’t know |  Length:\_\_\_\_\_\_\_\_\_\_Width:\_\_\_\_\_\_\_\_\_\_\_Depth:\_\_\_\_\_\_\_\_\_\_\_Diameter:\_\_\_\_\_\_\_\_\_Don’t know |  Length:\_\_\_\_\_\_\_\_\_\_Width:\_\_\_\_\_\_\_\_\_\_\_Depth:\_\_\_\_\_\_\_\_\_\_\_Diameter:\_\_\_\_\_\_\_\_\_Don’t know |
| **4.3** | **Do you get desludging done?****(Please ✓or circle)** | Yes/ No | Yes/ No | Yes/ No |
| 4.3.1 | If yes, what is the frequency [frequency like once in 2 year, 5 years etc]?(Please ✓or circle and fill in the blank)  | Once in \_\_\_\_\_ years /Months |  Once in \_\_\_\_\_ years /Months |  Once in \_\_\_\_\_ years /Months |
| 4.3.2 | If not desludged, ask why not.  |  |  |  |
| 4.3.3 | How do you contact the desludger? |  |  |  |
| 4.3.4 | -What vehicle and equipment does the desludger use? -At what time of the day do they usually come? |  |  |  |
| 4.3.5 | How does the desludger empty? |  -Mechanical-Manual  |   -Mechanical-Manual |   -Mechanical-Manual |
| 4.3.6 | What fee do you pay for desludging?(Please ✓or circle and fill in the blank)  |  Rs.\_\_\_\_\_\_\_\_ per tank/ trip  |  Rs.\_\_\_\_\_\_\_\_ per tank/ trip |  Rs.\_\_\_\_\_\_\_\_ per tank/ trip |
| 4.3.7 | How many people for desludging? | 1/ 2/ 3/ 4/ 5/ 6/ 7  | 1/ 2/ 3/ 4/ 5/ 6/ 7 | 1/ 2/ 3/ 4/ 5/ 6/ 7 |
| 4.3.8 | Do the desludgers wear protection equipment? [Ask details like masks, gloves etc.] (Please ✓or circle) |  Yes/ NoMask/ Gloves/ Boots |  Yes/ NoMask/ Gloves/ Boots |  Yes/ NoMask/ Gloves/ Boots |
| 4.3.9 | Do you know where the sludge is disposed of?(Please ✓or circle and fill in the blank) | Water body: \_\_\_\_\_\_Drain:\_\_\_\_\_\_\_\_\_\_Open land:\_\_\_\_\_\_\_\_\_\_Farm land:\_\_\_\_\_\_\_\_\_\_Don’t know |  Water body: \_\_\_\_\_\_Drain:\_\_\_\_\_\_\_\_\_\_Open land:\_\_\_\_\_\_\_\_\_\_Farm land:\_\_\_\_\_\_\_\_\_\_Don’t know |  Water body: \_\_\_\_\_\_Drain:\_\_\_\_\_\_\_\_\_\_Open land:\_\_\_\_\_\_\_\_\_\_Farm land:\_\_\_\_\_\_\_\_\_\_Don’t know |
| **4.4** | **If you don’t have toilet, where do you go for defecation**  |  Open defecation/ community toilet |  Open defecation/ community toilet |  Open defecation/ community toilet |
| 4.4.1 | If open defecation then How far do you go for defecation? |   |   |   |   |
| 4.4.2 | How does flooding affect your defecation practices? |   |   |   |   |
| 4.4.3 | Do you know that govt. is financially assisting the construction of IHHT? (Please ✓or circle)[Ask the details]  |  Yes/ No |  Yes/ No |  Yes/ No |   |
| 4.4.4 | Why don’t you avail the above assistance and build IHHT? [Try to understand the perception]  |   |   |   |   |
| 4.4.5 | Are you willing to contribute for the construction of toilet at your HH (Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |   |
| 4.4.6 | If yes, ask how much? |  |  |  |  |
| **5.0** | **STORMWATER**  |   |   |   |
| **5.1** | **Do you have stormwater drain in your neighbourhood****(Please ✓or circle)** | Yes/ No | Yes/ No | Yes/ No |
| 5.1.2 | Are the stormwater drain in your neighbourhood clean?(Please ✓or circle) | Yes/ No | Yes/ No | Yes/ No |
| 5.1.3 |  What is the frequency of drain cleaning activity in your neighborhood? (Please ✓or circle) |  -Daily-Weekly-Monthly-Irregular:\_\_\_\_\_\_\_\_\_\_\_\_ |  -Daily-Weekly-Monthly-Irregular:\_\_\_\_\_\_\_\_\_\_\_\_ |  -Daily-Weekly-Monthly-Irregular:\_\_\_\_\_\_\_\_\_\_\_\_ |
| **5.2** | **Does your area/ neighborhood get flooded [waterlogging]?** **(Please ✓or circle)** |  Yes/ No |  Yes/ No |  Yes/ No |
|  5.2.1 | If yes, which season/months?(Please ✓or circle) |  Monsoon/ Winter/ Summer/ All the time |  Monsoon/ Winter/ Summer/ All the time |  Monsoon/ Winter/ Summer/ All the time |
|  5.2.2 | What kind of problem do you face due to flooding? |  |  |  |
| **5.3** | **Do you complain when it floods?** **(Please ✓or circle)** | Yes/ No | Yes/ No | Yes/ No |
| 5.3.1 | If yes, how and to whom do you complain?  |  |  |  |
| 5.3.2 | What actions municipality takes after flooding? |   |   |   |
| 5.3.3 | Has community ever led any drainage cleaning activity?(Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |
| **6.0** | **OTHERS**  |   |   |   |
| 6.1 | Do you know that CSTF is existing in your city which is preparing CSP?(Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |
| 6.2 | If yes, ask more details |  |  |  |
| 6.3 | Does the municipality carry out IEC campaigns?(Please ✓or circle) |  Yes/ No |  Yes/ No |  Yes/ No |
| 6.4 | If yes, what kind like posters, nukkadnatak, posters etc. |  |  |  |
| 6.5 | Does your institute carry out any IEC campaign related to sanitation? (Please ✓or circle)Ask the details |  Yes/ No |  Yes/ No |  Yes/ No |
| 6.6 | Incidents of malaria, dengue, diarrhea, typhoid, pneumonia, skin disease, hepatitis if any in last 1 year(Please ✓or circle) |  Malaria/ dengue/ diarrhea/ typhoid, pneumonia/ skin disease/ hepatitis/ None |  Malaria/ dengue/ diarrhea/ typhoid, pneumonia/ skin disease/ hepatitis/ None |  Malaria/ dengue/ diarrhea/ typhoid, pneumonia/ skin disease/ hepatitis/ None |
| 6.7 | Which issue from the above you would like Municipality to address at the priority?(Please ✓or circle) |  Water supply/ waste water/ solid waste/ toilets/ storm water |  Water supply/ waste water/ solid waste/ toilets/ storm water |  Water supply/ waste water/ solid waste/ toilets/ storm water |
| 6.7.1 | Why did you choose this option?  |   |   |   |
| 6.8 | If the municipality plans to construct a DWWTs in your area, would you have any problem? (Please ✓or circle) |  Yes/ No | Yes/ No |  Yes/ No |