## **ENVIRONMENTAL SURVEY IN VILLAGES**

Name (Head of the family)	Data collected	d by:			
Address:					
Telephone:	Date:				
Profession:					
Annual Income:	Signature:				
Number of persons at home	<b>'</b>				
Total: Age >60: Ag	e 40-60: Age 2	1-40: Age <21:			
Ownership of the house: Own/Rent					
Area of residence:					
Number of years of stay:					
Person responding to questions					
Name: Age: Sex:					
Relationship to the family head:					

## 1. What is your opinion on the environment of your community?

Very clean and healthy Clean Dirty Very unhealthy

## If dirty or very unhealthy, what are the possible reasons?

Improper management of household waste Irresponsibility of in the community Improper management of industrial waste Irresponsibility of administrators Others:

## 2. Do you or your family members have any of the following health issues specifically?

Disease	Age group			Possible reasons	Period	
Respiratory problems	>60	40-60	21-40	<21		

	Skin diseases	>60 40-60	21-40	<21			
	Eye problems	>60 40-60	21-40	<21			
	Others	>60 40-60	21-40	<21			
3.	Any recent epidem	ics/common disea	ases diagn	osed v	vithin your communi	ty?	Yes/No
		Туре			P	eriod	
4.	Do you have availa	bility of health ca	re facilitie	s nearl	oy?		
		Facility			I	Distance	
5.	What are the source	ces and uses of wa	nter in you	ır home	e?		
		Sources				Uses	
6.	What changes have	e you noticed in th	ne quality	of wat	er being used?		
	Colour Taste	Odour Appear	rance l	None	Others:		
	If any, why do you	think it has happe	ened?				
7.	What changes have	e you observed in	the level	of wate	er in your well/bore-v	well/pond	?
	Increase	Decrease			or less same	Others:	
	If any, why do you	think it has happe	ened?				

8.	What have you noticed about the air you breathe?						
	Dust particles	Odour	None	Others:			
9.	Whether dust settle	es inside (over	objects) or outsi	ide the house (ga	arden) quite often? Yes/No		
	If yes, remarks:						
10.	Do you own agricult	tural/horticult	ural land?	Yes/No			
	If yes:						
	Crops		Area		Expected yield per annum		
_							
	What changes have	you observed	in the annual yi	eld of crops?			
	_		ore of less same	-			
11.	Do you own livestoo	ck?	Ye	s/No			
	Livestock type		Purpose		Remark on health		
		Consumption	/ Sale/Others:				
		Consumption	/ Sale/Others:				
		Consumption	/ Sale/Others:				
L							
12.	Any changes observ	ed in living org	ganisms around?	? Yes/No			
		rganism			Remark		
	Birds						
	Earthworms/other so	il organisms					
	Fishes/crabs/frogs						
	Others:						
L							

13. Are you prone to noise disturbances from the surroundings?

Yes/No

lf	yes,
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Source	Frequency of occurrence	Impact

14. A	ny previous	environmenta	surveys	performed in the	community?	Yes/No
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Period

15	Any previous anal	vses of soil/wa	ter/air nerfo	rmed in the co	mmunity?	Yes/No
IJ.	Ally pievious aliai	vaca di adii/ wa	ter/aii perio	illieu III tile tt	JIIIIIIUIIILY:	163/110

Material	Organization responsible

16. Any significant problems faced by the family in the past few years?