

Wisconsin Healthy Homes Initiative
Home Inspection Questionnaire—General Home



What time is it right now? _____

What is the date? _____

What is the subject's code number? _____

What is your interviewer code number? _____

Indicate relationship of respondent to enrolled child:

- Mother
- Father
- Grandparent
- Aunt
- Uncle
- Foster parent

Building manager name: _____ (free text—does not have to be required)

Company name: _____ (free text—does not have to be required)

Phone number: _____ (free text—does not have to be required)

Indicate the location of the Dwelling,

Street address: _____ (these would be free-text in)

City: (choices would be)

- Madison
- Stoughton
- Monroe
- Sun Prairie
- McFarland
- Oregon
- Verona
- Middleton
- Other (please specify)

County: (choices would be)

- Dane
- Green
- Rock
- Jefferson
- Other (please specify)

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1. Which best describes the current home?
 - One-story, single-family house (if endorsed, skip question 2 then continue)
 - Two-story, single family house (if endorsed, skip question 2 then continue)
 - Duplex (side-by-side or up-down) (if endorsed, go to question 2 then continue)
 - A building for 3 or 4 families (if endorsed, go to question 2 then continue)
 - A building for 5 or more families (if endorsed, go to question 2 then continue)
 - Trailer or Mobile home (if endorsed skip next question, and skip basement questions prefix with 'B' then continue)

2. Indicate the primary level the family's dwelling is on,
 - Ground floor
 - First floor
 - Second floor
 - Third Floor
 - Fourth Floor

3. How long has the family been living at this current residence?
 - < 6 months
 - 6-12 months
 - 13-24 months
 - > 2 years

4. Did you move from a larger city like Milwaukee or Chicago?
 - Yes (if endorsed, ask question 5 then continue)
 - No (if endorsed, skip question 5 then continue)

5. Which City did you move from?
 - Chicago
 - Milwaukee
 - Madison
 - Minneapolis
 - Green Bay
 - Rockford
 - Other (let them specify)

6. Was the home built before 1980?
 - Yes
 - No
 - Uncertain

7. Indicate approximately when the dwelling was built,
 - Before 1950
 - 1950 – 1979
 - 1980 – 1989
 - 1990 – Present
 - Uncertain

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8. Is there a basement to the dwelling?

Yes (if endorsed, ask the 'B' prefixed questions then continue)

No (if endorsed, skip all of the 'B' prefixed questions then continue)

B9. Is the basement accessible to the family?

Yes

No

B10. Is the basement used by the family?

Yes

No

B11. Indicate the principal use of the basement,

Mechanical Room only

Laundry area

Sleep area for family members

Extra sleep area for guests

General living space

Storage

Not used

B12. Is the basement accessible to yourself for assessment today?

Yes (if endorsed, ask questions B** thru ^B, then continue)

No (if endorsed, skip questions B** thru ^B then continue)

B Please take the time now to complete the basement-related questions that follow.**

(this would be on a separate screen)

B13. What is the temperature in the basement: _____ (they will enter)

B14. What is the relative humidity in the basement: _____ (they will enter)

B15. What type of floor does the basement have?

Dirt

Stone

Concrete

Carpeting

Ceramic tile

Vinyl

B16. What are the walls of the basement made from?

Poured SOLID concrete

Concrete block

Stone

Uncertain

B17. Is there a door entrance from the outside into the basement?

Yes

No



B18. Is there any visible mold or mildew in the basement?

Yes

No

B19. Is there visible water in the basement?

Yes

No

B20. Are there any signs of recent water damage or flooding? (dry rusty puddles, calcium or lime deposits, water stains on walls, floors or ceilings)

Yes

No

Uncertain

B21. Is there a shower or bathtub in the basement?

Yes (if endorsed, ask question B22 then continue)

No (if endorsed, skip question B22 then continue)

B22. Is it vented to the outside?

Yes

No

Uncertain

B23. Indicate the location of deteriorated paint on SIDE A (front side of building) in the Basement. (choose all that apply)

Walls

Ceiling

Floor

Doors

Windows

Closets

No deteriorated paint visible

B24. Indicate the location of deteriorated paint on SIDE B (left side of building) in the Basement. (choose all that apply)

Walls

Ceiling

Floor

Doors

Windows

Closets

No deteriorated paint visible



B25. Indicate the location of deteriorated paint on SIDE C (back side of building) in the Basement. (choose all that apply)

- Walls
- Ceiling
- Floor
- Doors
- Windows
- No deteriorated paint visible

B26. Indicate the location of deteriorated paint on SIDE D (right side of building) in the Basement. (choose all that apply)

- Walls
- Ceiling
- Floor
- Doors
- Windows
- Closets
- No deteriorated paint visible

B27. Does any window in the Basement contain deteriorated paint?

- Yes (if endorsed, go to question B28 then continue)
- No (if endorsed, skip questions B28 thru B35 then continue)

B28. How many windows in the Basement contain deteriorated paint?

- 1 (if endorsed, skip questions B29 thru B33)
- 2 (if endorsed, skip questions B29 thru B31)
- 3 (if endorsed, skip questions B29 thru B30)
- 4 (if endorsed, ask questions B29 thru B35)
- No Windows in the basement (if endorsed, skip questions B29 –B35)

B29. Indicate the specific location(s) on the window that has deteriorated paint (choose all that apply)

- Window sashes
- Jams
- Casings
- Interior sill
- Exterior sill
- Trough
- Exterior of sash



B30. Is there another window in the same room that has deteriorated paint?

Yes (if endorsed, ask next question)

No (if endorsed, skip questions B31 thru B35)

B31. Indicate the specific location(s) on the window that has deteriorated paint (choose all that apply)

Window sashes

Jams

Casings

Interior sill

Exterior sill

Trough

Exterior of sash

B32. Is there another window in the same room that has deteriorated paint?

Yes (if endorsed than go to the next question)

No (if endorsed, skip questions B33 thru B35)

B33. Indicate the specific location(s) on the window that has deteriorated paint (choose all that apply)

Window sashes

Jams

Casings

Interior sill

Exterior sill

Trough

Exterior of sash

B34. Is there another window in the same room that has deteriorated paint?

Yes (if endorsed, than go to the next question)

No (if endorsed, skip next question and continue)

B35. Indicate the specific location(s) on the window that has deteriorated paint. (choose all that apply)

Window sashes

Jams

Casings

Interior sill

Exterior sill

Trough

Exterior of sash

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B36. Is the door to the basement locked so that a child cannot enter?

- Yes
- No

B37. Are cleaning products stored in a locked cabinet?

- Yes
- No

B38. Is gasoline only stored outside the house?

- Yes
- No

B39. Are all flammable substances kept away from the furnace and water heater?

- Yes
- No

B40. Is the door to the basement locked or gated so that a child cannot enter?

- Yes
- No

B41. Are all oily rags properly disposed of?

- Yes
- No

^^B

You are now finished with the basement. Continue with the rest of the General Home Survey

42. Are the windows currently in place original to the structure?

- Yes
- No
- Uncertain

43. What materials are the windows made from? (choose all that apply)

- All wood
- All vinyl
- All aluminum
- Wood inside, vinyl outside
- Wood inside, aluminum outside

44. What styles of windows are in the home? (choose all that apply)

- Fixed
- Sliders
- Single/Double hung
- Casement
- Awning

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45. Indicate the exterior wall construction of the structure
- Concrete block with brick veneer
 - Wood framed with brick veneer
 - Wood framed with vinyl or aluminum siding
 - Wood framed with wood clapboard siding
46. What type of fuel is used to heat the home? (check all that apply)
- Natural gas
 - Electricity
 - Oil
 - Wood
 - Kerosene
47. What is the primary type of heating system used in the home in the past year?
- Forced air furnace (if endorsed, ask questions 48 thru 51)
 - Hot water radiators (if endorsed, skip questions 48 thru 51)
 - Fireplace (if endorsed, skip questions 48 thru 51)
 - Electric wall heaters (if endorsed, skip questions 48 thru 51)
 - Portable space heaters—electric or kerosene (if endorsed, skip questions 48 thru 51)
48. Is there a furnace filter installed?
- Yes (if endorsed, ask questions 49 thru 51)
 - No (if endorsed, skip questions 49 thru 51)
49. What type is it?
- Fiberglass filter (flat)
 - Fiberglass pleated filter
 - 3M Filtrete brand
 - Electronic Air cleaner
50. Does it need replacing within the next 2 weeks?
- Yes
 - No
51. How many times a year is the filter replaced or cleaned?
- One time per year
 - Two times per year
 - Three times per year
 - Four times per year
 - Uncertain

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52. During the past year, have portable heaters been used to help heat the home?
Yes (if endorsed, ask question 53 then continue)
No (if endorsed, skip question 53)
53. About how long have they been used?
Less than 1 month
About 1 month
About 2 months
More than 2 months
54. What is the primary type of cooling system used in the home?
Central air conditioning (if endorsed, ask question 55 then continue)
Window air conditioners (if endorsed, ask question 55 then continue)
Wall mounted air conditioner (if endorsed, ask question 55 then continue)
Fans with air conditioning (if endorsed, ask question 55 then continue)
Fans without air conditioning in the home (if endorsed, skip question 55 then continue)
No cooling system exists (if endorsed, skip question 55 then continue)
55. Where does the condensate drain?
Down the drain (if a/c is central)
Back of the unit to the outside (if window or wall unit)
Uncertain
56. Is a humidifier present in the home?
Yes (go to next question)
No (skip next question)
57. Has it been used in the previous year?
Yes
No
Uncertain
58. Is there a dehumidifier present in the home?
Yes (if endorsed, ask question 59)
No (if endorsed, skip question 59)
59. Has it been used in the previous year?
Yes
No
Uncertain
60. Has the roof ever leaked water into the home?
Yes
No
Uncertain

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61. Has water ever leaked into the apartment from a neighbor?
Yes
No
Uncertain
62. Is there a clothes washing machine present in the home?
Yes (if endorsed, ask questions 63 and 64 then continue)
No (if endorsed, skip questions 63 and 64 then continue)
63. Where is it located?
Basement
First floor laundry room
First floor kitchen
Garage
Second floor
64. What primary type of venting is available where the washing machine is located?
Window
Exhaust Fan
None
65. Is there a clothes dryer present in the home?
Yes (if endorsed, ask questions 66 and 67 then continue)
No (if endorsed, skip questions 66 and 67 then continue)
66. What fuel does it use?
Natural Gas
Electricity
67. Where does the dryer vent its exhaust?
Directly outside
Into the attic
Into the same room where dryer is
Into the garage
68. Have mice or rats been seen in the home in the past year?
Yes (if endorsed, ask question 69 then continue)
No (if endorsed, skip question 69 then continue)
Uncertain (if endorsed, skip question 69 then continue)
69. How did you get rid of them? (choose all that apply)
Nothing in particular
Traps
Poison
Called a pest control company
Broom, tennis racket, baseball bat, etc...

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70. Is there a garage that belongs to the dwelling that the occupants use?
Yes (if endorsed, ask questions 71 thru 84 then continue)
No (if endorsed, skip questions 71 thru 84 then continue)
Carport, no walls (if endorsed, skip questions 71 thru 84)
71. Is the door to the garage locked so that a child cannot enter?
Yes
No
72. Are gasoline and other flammable items stored in a locked cabinet?
Yes
No
73. Are toxic substances, such as insecticides and antifreeze stored in a locked cabinet?
Yes
No
74. Are all tools locked away and out of the child's reach?
Yes
No
75. Do power tools have guards?
Yes
No
76. Is there an automatic garage door opener?
Yes (if endorsed, ask questions 77 and 78 then continue)
No (if endorsed, skip questions 77 and 78 then continue)
77. Test the door to see if it automatically reverses if it hits something?
Yes
No
78. Are the automatic garage door controls located more than 5 feet high?
Yes
No
79. Are there any extra refrigerators or freezers?
Yes (if endorsed, ask question 80 then continue)
No (if endorsed, skip question 80 then continue)
80. Are the doors to the refrigerators or freezers either locked or totally removed?
Yes
No
81. Are all insect nests cleaned out?
Yes
No

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82. Is rope kept out of reach of children?

Yes

No

83. Is the vehicle always kept locked?

Yes

No

84. Are any oily rags disposed of properly?

Yes

No

85. Is there a swimming pool on the property?

Yes (if endorsed, ask questions 86 thru 95 then continue)

No (if endorsed, skip questions 86 thru 95 continue)

86. Is there a four-sided fence (not including the house as a side) around the pool?

Yes (if endorsed, ask questions 87 thru 89 then continue)

No (if endorsed, skip questions 87 thru 89 then continue)

87. Is the fence at least four feet high?

Yes

No

88. Is the gate self-closing and self-latching?

Yes

No

89. Can the child reach the gate's latch?

Yes

No

90. Is rescue equipment stored near the pool?

Yes

No

91. Are parents trained in CPR?

Yes

No

92. Is there a telephone near the pool?

Yes

No

93. Are all electrical wires kept away from the pool and inaccessible?

Yes

No

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94. Are pool supplies and chemicals locked away and out of the child's reach?

Yes

No

95. Is there textured, non-slip surfacing around the pool?

Yes

No

96. What time is it right now? _____