

Communication



6. Do you think management provides you information about:

	Strongly Agree	Agree	Disagree	Strongly Disagree	Does Not Apply
Maintenance and repair (for example, water shut-off, boiler shut-down, modernization activities)?	<input type="radio"/>				
The rules of your lease?	<input type="radio"/>				
Meetings and events?	<input type="radio"/>				

7. Do you think management is:

	Strongly Agree	Agree	Disagree	Strongly Disagree	Does Not Apply
Responsive to your questions and concerns?	<input type="radio"/>				
Courteous and professional with you?	<input type="radio"/>				
Supportive of your resident/tenant organization?	<input type="radio"/>				

8. Are you involved in a resident/tenant organization in your housing property?

Yes No

Safety



9. How safe do you feel from crime:

	Very Safe	Safe	Unsafe	Very Unsafe	Does Not Apply
In your unit/home?	<input type="radio"/>				
In your building?	<input type="radio"/>				
In your parking area?	<input type="radio"/>				

10. Do you think any of the following contribute to crime in your property? (Mark all that apply.)

<input type="radio"/> Bad lighting	<input type="radio"/> Residents don't care
<input type="radio"/> Broken locks	<input type="radio"/> Resident screening
<input type="radio"/> Location of housing property	<input type="radio"/> Vacant units
<input type="radio"/> Police do not respond	

11. If residents in your property break the rules in the lease that pertain to safety, does management take action?

Yes No Don't Know

11a. If management takes action, how would you rate its actions?

	Very Effective	Effective	Ineffective	Very Ineffective
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Services



12. Over the last year, how many problems, if any, have you had with electricity or heat?

- | | | | |
|------------------------|-----------------------|-----------------------|-------------------------|
| Never Had
A Problem | 1 to 2
Problems | 3 to 4
Problems | More Than
4 Problems |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

12a. If you had a problem with electricity or heat, how long did it take to fix?

- | | | | | |
|------------------------|-----------------------|-----------------------|-----------------------|----------------------------|
| Never Had
A Problem | Less Than
6 Hours | 6 to 24
Hours | More Than
24 Hours | Problem Never
Corrected |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

13. Over the last year, how many problems, if any, have you had with kitchen appliances (for example, stove, refrigerator, etc.)?

- | | | | |
|------------------------|-----------------------|-----------------------|-------------------------|
| Never Had
A Problem | 1 to 2
Problems | 3 to 4
Problems | More Than
4 Problems |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

13a. If you had a problem with kitchen appliances, how long did it take to fix?

- | | | | | |
|------------------------|-----------------------|-----------------------|-----------------------|----------------------------|
| Never Had
A Problem | Less Than
6 Hours | 6 to 24
Hours | More Than
24 Hours | Problem Never
Corrected |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

14. Over the last year, how many problems, if any, have you had with water or plumbing (for example, toilets, hot water, etc.)?

- | | | | |
|------------------------|-----------------------|-----------------------|-------------------------|
| Never Had
A Problem | 1 to 2
Problems | 3 to 4
Problems | More Than
4 Problems |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

14a. If you had a problem with water or plumbing, how long did it take to fix?

- | | | | | |
|------------------------|-----------------------|-----------------------|-----------------------|----------------------------|
| Never Had
A Problem | Less Than
6 Hours | 6 to 24
Hours | More Than
24 Hours | Problem Never
Corrected |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

15. Over the last year, how many problems, if any, have you had with smoke detectors?

- | | | | |
|------------------------|-----------------------|-----------------------|-------------------------|
| Never Had
A Problem | 1 to 2
Problems | 3 to 4
Problems | More Than
4 Problems |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

15a. If you had a problem with smoke detectors, how long did it take to fix?

- | | | | | |
|------------------------|-----------------------|-----------------------|-----------------------|----------------------------|
| Never Had
A Problem | Less Than
6 Hours | 6 to 24
Hours | More Than
24 Hours | Problem Never
Corrected |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Housing Property Appearance



16. How satisfied are you with the upkeep of the following areas in your property:

	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Does Not Apply
Common areas (for example, stairways, walkways, hallways, etc.)?	<input type="radio"/>				
Exterior of buildings?	<input type="radio"/>				
Parking areas?	<input type="radio"/>				
Recreation areas (for example, playgrounds and other outside facilities)?	<input type="radio"/>				

