



<b>14. Place of work</b> (full name of enterprise, institution, collective-farm)																						
<b>15. Occupation at this place of work</b> (post or responsibilities)																						
<b>16. Social status</b>			<input type="checkbox"/> wage-earner <input type="checkbox"/> collective-farmer <input type="checkbox"/> minister of religion				<input type="checkbox"/> salaried employee <input type="checkbox"/> person engaged in individual labor activity															
<b>17. Duration of permanent residence in a given settlement</b>			a) has been lived since the birthday <input type="checkbox"/> yes <input type="checkbox"/> no If "no", specify: b) what settlement he (she) has come from      c) the year since which he (she) has permanently lived <input type="checkbox"/> urban <input type="checkbox"/> rural <input type="checkbox"/>																			
<b>18. For women to be specified:</b>			a) children ever live-born				b) children surviving															
<b>Questions 19-26 to be completed for persons recorded under No 1, singles or family members residing separately</b>																						
<b>19. Period of the house construction</b>					<input type="checkbox"/> before 1918 <input type="checkbox"/> 1941-1950 <input type="checkbox"/> 1961-1970 <input type="checkbox"/> 1981-1988		<input type="checkbox"/> 1918-1940 <input type="checkbox"/> 1951-1960 <input type="checkbox"/> 1971-1980															
<b>20. Materials of outer walls</b>					<input type="checkbox"/> bricks, stone <input type="checkbox"/> wood <input type="checkbox"/> adobe, clay		<input type="checkbox"/> concrete, reinforced concrete, panels <input type="checkbox"/> mixed material <input type="checkbox"/> other material															
<b>21. Ownership of house</b>					<input type="checkbox"/> government, cooperative, public association		<input type="checkbox"/> housing construction cooperative		<input type="checkbox"/> private													
<b>22. Type of dwelling</b>					<input type="checkbox"/> detached house <input type="checkbox"/> shared (communal) flat <input type="checkbox"/> part of detached house <input type="checkbox"/> hostel <input type="checkbox"/> rented from individuals <input type="checkbox"/> separate flat <input type="checkbox"/> other dwelling					<b>Commissioning of dwelling</b> (for person No 1 within dwelling)												
<b>23. Amenities available in dwelling</b>					<input type="checkbox"/> electricity <input type="checkbox"/> flush toilet <input type="checkbox"/> floor electric cooker		<input type="checkbox"/> central heating <input type="checkbox"/> hot water supply <input type="checkbox"/> bath or shower															
					<input type="checkbox"/> piped water <input type="checkbox"/> gas		<input type="checkbox"/> no amenities specified															
<b>24. Number of occupied habitable rooms</b>					<input type="checkbox"/> part of room <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10																	
<b>25. Floor space (m<sup>2</sup>)</b>					<input type="checkbox"/> useful <input type="checkbox"/> living		<b>Marks of unrecognized zones</b> <input type="checkbox"/> I <input type="checkbox"/> II															
							For foreigners <input type="checkbox"/> zone I <input type="checkbox"/> zone II															
<b>To be completed by the Statistical Office</b>	<i>Date of birth</i> <input type="checkbox"/> day <input type="checkbox"/> month <input type="checkbox"/> year		<i>Place of birth</i> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<i>Nationality</i> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<i>Language</i> <input type="checkbox"/> mother <input type="checkbox"/> other		<i>Place of work</i> <input type="checkbox"/> <input type="checkbox"/>		<i>Occupation</i> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<i>Year since which he (she) has been lived here permanently</i> <input type="checkbox"/> <input type="checkbox"/>		<i>Children ever live-born</i> <input type="checkbox"/> <input type="checkbox"/>		<i>Children surviving</i> <input type="checkbox"/> <input type="checkbox"/>		<i>No of spouse</i> <input type="checkbox"/> <input type="checkbox"/>		<i>No of mother</i> <input type="checkbox"/> <input type="checkbox"/>	
						<i>Useful floor space</i> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<i>Living floor space</i> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<i>No of enumeration questionnaire</i> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>										



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