



MINISTRY OF TRANSPORT

2008/2009 Household Travel Survey

Form 1 Household Form



hunter valley
research
foundation

IN CONFIDENCE

Office:

	Interviewer _____ Interviewer ID <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Form 1 Interview Date <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/>
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SUMMARY OF PERSONAL CALLS TO HOUSEHOLD							DWELLING STRUCTURE TYPE (OBSERVE) Separate house <input type="checkbox"/> 1 Semi-detached, row or terrace house, townhouse: 1 storey. <input type="checkbox"/> 2 2 or more storeys <input type="checkbox"/> 3 Flat, unit or apartment: 1 or 2 storey block <input type="checkbox"/> 4 3 storey block <input type="checkbox"/> 5 4 or more storey block <input type="checkbox"/> 6 Attached to a house <input type="checkbox"/> 7 Caravan, cabin, houseboat <input type="checkbox"/> 8 Improvised home <input type="checkbox"/> 9 House or flat attached to a shop, office, etc. <input type="checkbox"/> 10 Other (SPECIFY) _____ <input type="checkbox"/> 98			
	Before Travel Day			After Travel Day						
	Date	Time	Result	Date	Time	Result				
1										
2										
3										
SUMMARY OF PHONE CALLS TO HOUSEHOLD							SECURITY DWELLING? (OBSERVE) Yes <input type="checkbox"/> 1 No <input type="checkbox"/> 2			
	Before Travel Day			After Travel Day						
	Date	Time	Result	Date	Time	Result				
1										
2										
3										
RESULT CODES			INTERVIEW DATE COMMENTS				TYPE OF SECURITY FEATURE Security intercom <input type="checkbox"/> 1 Swipe card entry <input type="checkbox"/> 2 Locked main entrance <input type="checkbox"/> 3 No mailbox access <input type="checkbox"/> 4 Other (SPECIFY) _____ <input type="checkbox"/> 98 COMMENTS/APPOINTMENTS _____ _____ _____ _____ _____			
AM = Answering machine			_____							
AP = Appointment made			_____							
CB = Asked to call back			_____							
I = Interview conducted			_____							
LP = Language problem			_____							
NA = No answer			_____							
NS = Not suitable			_____							
R = Refusal			_____							
SA = Security access			_____							
SL = Sample loss			_____							
			Office Use Only <input type="checkbox"/> <input type="checkbox"/>							

Q1 Who are the people who usually live here, starting with you?

Office

(a) Person Number	(b) Name	(c) What is relationship to you?	(d) Sex	(e) What was age last birthday?	(f) What is marital status?	(g) In which country was. . . . born?	(h) Form 2 / 3 Present?
		Spouse = Sp Partner = Pr Son = Son Daughter = D Brother = Bro Sister = Sis Father = Fa Mother = Mo Unrelated = Un	M F		Married = 1 De Facto = 2 Separated = 3 Divorced = 4 Widowed = 5 Never Married = 6	Australia = 1 England = 2 Scotland = 3 Italy = 4 Greece = 5 New Zealand = 6 Vietnam = 7 Other (Specify) = 99	Yes = 1 face to face Yes = 3 phone No = 2
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							

ADDITIONAL DETAILS OF RELATIONSHIPS IN HOUSEHOLD

Q2 Which of these best describes your/your households occupancy of this dwelling?

- Owned outright 1
- Owned, paying off 2
- Rent from government 3
- Rent privately 4
- Or something else**
- Other paid accommodation 5
- Living rent free 6
- Other (SPECIFY) _____ 8

Q3 Are there any registered vehicles used by your household and usually parked here overnight, whether private or company owned?

Yes 1 (CONTINUE) Could you give me a list of them?
 No 2 → Q4

Office

(a) Vehicle Number	(b) What is the make of this vehicle?	(c) What is the model of this vehicle?	(d) What year is it?	(e) What is the body type?	(f) How many CCs does it have?	(g) What type of fuel does it use?	(h) Are any of the vehicle costs paid by an employer?	(i) Who is the registered owner of the vehicle?	(j) Is it registered for private or business use?
				Motorcycle = 10 Car = 20 4WD = 30 Family Van = 40 Goods Van = 41 Panel Van = 42 Utility = 43 Truck = 50 Taxi = 60 Other = 80 (specify)		Regular Unleaded = 2 Premium Unleaded = 9 Diesel = 3 Ethanol Blend = 10 Hybrid = 11 LPG/LNG = 4 Dual fuel = 5 Electric = 6 Other = 8	Note: self-employed person is an employer Yes, fully = 1 Yes, partly = 2 No = 3	H/hold member = 1 Employer owned or leased = 2 Other = 8	Note: Business use includes use by self-employed person Private = 1 Business = 2
01									
02									
03									
04									
05									
06									

PROMPT: Does this include all vehicles - trucks, vans or motorbikes? IF YES → Q4

ON INTERVIEW DAY, ADD EXTRA VEHICLES WHICH WERE USED ON TRAVEL DAY

(a) Vehicle Number	(b) Make	(c) Model	(d) Year	(e) Body type	(f) CCs	(g) Fuel type	(h) Costs	(i) Owner type	(j) Registered
21									
22									
23									
24									

Q4 How many adult bicycles in working order does this household keep at this dwelling?

Q5 How many children's bicycles in working order does this household keep at this dwelling?

