

RISC HEALTHY HOMES COMMITTEE SURVEY

Name: _____

Name of your Mobile Home Park: _____

1. Where you live – do you own, or rent?
2. How many people live in your trailer? _____ How many adults? _____ How many children? _____
3. What do you use to cool your trailer in the summer? Does it work? What is the highest temperature it's been in your trailer?

4. If your trailer is hot in the summer months –

How has your health (or the health of your loved ones) been affected by this extreme heat?

In what other ways are you affected (ie. high utility bills, lack of energy, etc ...) by this extreme heat?

If your utility bill is high – what was the cost of your highest bill last summer? \$_____

5. What do you use to heat your trailer in the winter? Does it work? What is the lowest temperature it's been in your trailer?

6. If your trailer is cold in the winter months, how has your health (or the health of your loved ones) been affected by this extreme cold?

In what other ways are you affected (ie. high utility bills, lack of energy, etc ...) by this extreme cold?

If your utility bill is high – what is the cost of your highest bill this winter? \$_____

7. Do you regularly lose power in your trailer park? *If yes* - How regularly does the electricity go out? How long does it stay off for?

8. Do you believe you have mold in your trailer? *If yes* – how has your health (or the health of your loved ones) been affected by the mold?

9. Is there anything else you would like to share?

Would you be willing to join with us in our campaign to look for a solution for this problem? ___ Yes ___ No

If yes – what is your phone number? _____