

**Survey of the Households with No Latrine Facility within the Premises**

SI No.

After Completion of Survey, Compiled SI. No.

1) ULB Name :

2) Ward No :

3) Full Address (with locality/slum name) .....

.....

.....

4) Near Landmark: .....

5) Name of the Head of the Family : .....

6) Father's/Husband's Name: .....

7) Whether Resident is (Please ✓) 

Owner	Tenant	Occupier
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8) Whether belongs to (Please ✓) 

Below Poverty Line (BPL)	Antyoday Anna Yojana (AAY)	Economically Weaker Section (EWS)	Annapurna Yojana (AY)	Above Poverty Line (APL)
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9) Caste Category (Please ✓) 

General	SC	ST	OBC	Others
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10) Religion (Please ✓) 

Hindu	Muslim	Christian	Sikh	Buddhist	Others
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11) Total Member in the family 

Male	<input type="text"/>	Female	<input type="text"/>	Total	<input type="text"/>
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12) Mobile : (Please ✓) 

Yes	No	If yes, then number	<input type="text"/>
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13) Aadhaar (Please ✓) 

Yes	No	If yes, then number	<input type="text"/>
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14) Ration Card : (Please ✓) 

Yes	No	If yes, then number	<input type="text"/>
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15) Voter Identity Card : (Please ✓) 

Yes	No	If yes, then number	<input type="text"/>
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16) No Latrine facilities within the premises, then alternative system (Please ✓)

Community Sanitary Latrine	Shared Sanitary Latrine	Community Insanitary Latrine	Shared Insanitary Latrine	Open defecation
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17) Monthly Income (Range in Rupees) (Please ✓) 

1) 0-1500	2) 1501-3000	3) 3001-5000	4) 5001-10000	5) 10000 +
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18) Monthly Expenditure (Range in Rupees) (Please ✓) 

1) 0-1500	2) 1501-3000	3) 3001-5000	4) 5001-10000	5) 10000 +
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Name of the Supervisor

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Name of the Enumerator

Date of Verification :

Date of Survey :

\_\_\_\_\_  
Signature/Thumb Impression of the Head of the Family