

HOUSEHOLD BUDGET SURVEY

PERSONAL SCHEDULE (HB. 2)

(1)

(2-8)

RECORD 3

Ref. No.	Area	Hld.	Per

WORKING AND OCCUPATIONAL STATUS (ASK ALL)

1. Are you at present:

		Full time	Part time		NOW ASK
WORKING	— employee?	1	2	1	} Q. 2
	— assisting relative?	1	2	2	
	— self-employed?	1	2	3	Q. 5
OUT OF WORK	— unemployed but seeking work?			4	} Q. 3
	— unemployed because of illness, sickness, etc but intending to seek work again?			5	
	— not yet at work?			6	Q. 13
NOT WORKING	— engaged in home duties?			7	Q. 13
	— retired?			8	Q. 4
	— in full-time education?			9	Q. 5(b)
	— unable to work because of permanent illness or disability?			10	} Q. 13
	— other (specify)			11	

AMOUNT		Code
£	P	
		(working status) 050 1
		(full/part time) 061 1

TO ALL EMPLOYEES (coded 1 or 2 at Q. 1)

2. (a) Are you away from work at present – i.e. for more than the last 3 working days? YESY
NON. ASK Q. 5

IF YES (i) how long have you been away from work? _____ (years)

(ii) what is the reason for your absence?
1 – illness/accident. 2 – holidays. 3 – strike. 4 – other (specify).

(iii) what pay are you receiving from your employer during this absence?
1 – full pay. 2 – part pay. 3 – no pay.

(b) How long have you been in continuous employment _____ (years)

IF LESS THAN 12 MONTHS
Enter the total number of weeks employed in past 12 months _____ (weeks)

		(years)	(weeks if under a year)	051 1
				052 1
				049 1
		(years)	(weeks if under a year)	X50 1
		(weeks)		X51 1
		(years)	(weeks if under a year)	053 1
		(years)	(weeks if under a year)	055 1

TO ALL UNEMPLOYED (coded 4 or 5 at Q. 1)

3. (a) How long have you been out of work? _____ (years)

(b) If less than a year enter former usual gross wage or salary at Q. 7

TO ALL RETIRED (coded 8 at Q. 1)

4. (a) How long are you retired? _____ (years)

(b) If less than a year enter former usual gross wage or salary at Q. 7

ALL WORKING, UNEMPLOYED OR RETIRED (codes 1-5, 8 and 9 at Q. 1)

} Codes 1, 2, 3 – present job
Codes 4, 5, 8 – usual/previous job
Code 9 – subsidiary job

5. (a) What is/was your present/or usual principal job?
Occupation and description of job (i.e. what you do)

Industry/business (i.e. where you work)

		(occup.)		056 1
		(indus.)		058 1
		(acres)		X5 1
				059 1
				X57 1

	Main	Sub
If a Farmer ()	<input type="checkbox"/> 3	<input type="checkbox"/> 4
enter total acreage of farm _____		
If self-employed (incl. Farmers)		
No employees	1	
Family employees only	2	
Other employees	3	

(b) If presently working or student, do you have regular subsidiary job(s)? YES 1
NO 2. ASK Q. 6

If YES, give following details for each –

Description of work

Industry/business

NOW ASK Q. 6 IF EMPLOYEE
Q. 10 IF SELF-EMPLOYED

ALL EMPLOYEES (coded 1 at Q. 1) – PRINCIPAL JOB

WAGES OR SALARY PARTICULARS

6. (i) Insert particulars of last wage or salary below

		AMOUNT		Code
		£	P	
(a)	TOTAL GROSS AMOUNT EARNED	.....	.....	551
(b)	INCLUDING DEDUCTIONS MADE AT SOURCE	YES	NO	
	Income tax	Y	N	593
	Social insurance contribution (incl. levies)	Y	N	594
	Superannuation or pension contribution	Y	N	500
	Trade unions dues or subscriptions	Y	N	518
	Life insurance premiums	Y	N	
	VHI insurance	Y	N	499
	Mortgage repayments	Y	N	
	Regular savings (e.g. instalment savings)	Y	N	542
	Other deductions (specify below)	Y	N	
			
			
			
			
(c)	NET "TAKE-HOME" AMOUNT	.....	.....
(d)	How long a period do these particulars cover?	Period		
(e)	How many actual hours a week (excluding meal intervals) did you work during this period?	Hours		
(f)	Did the above wage/salary include a refund of business expenses (e.g. travel, subsistence, etc.) or an allowance for motoring from your employer	YES	Y	
		NO	N	
	IF YES, specify	£		
	£		
(g)	Did you refund a sickness payment from the Department of Social Welfare to your employer to obtain this amount	YES	Y	
		NO	N	
	IF YES, specify type of payment and amount refunded by you	£		
(ii)	IF SALARIED EMPLOYEE enter gross annual salary and the annual amounts of as many deductions as possible for completeness sake. Exclude motoring and other business allowances or refunds.			060 1
	Annual Gross Salary	£	Annual Deductions	£
	Basic	.....	Income Tax	.....
	Additions (child allowances)	.....	PRSI	.....
			Pension	.....
	Total	.....	VHI	.....
USUAL WAGE OR SALARY				
7.	Do you <i>usually</i> receive the gross wage or salary recorded at Q. 6 (a) above?	YES	Y, ASK Q. 8	
		NO	N	
IF NO	(a) what gross amount do you <i>usually</i> receive	.....		915
	(b) how long a period would this cover?	Period		

OCCASIONAL ADDITIONS TO WAGE OR SALARY

8. Do you ever receive occasional additions to your wage or salary such as Christmas, holiday or quarterly bonuses, profit sharing bonuses, commissions, etc. *not included* at question 6 or 7?

YES Y,
NO N ASK Q.9

IF YES, what payments of this kind have you received in the last 12 months? _____ specify _____

Description of Payments	AMOUNT		Was this paid	
	£	P	Before Tax?	After Tax?
.....	1	2
.....	1	2
.....	1	2
.....	1	2

AMOUNT		Code
£	P	
.....	552 8

BENEFITS IN-KIND FROM EMPLOYER

9. Do you receive any of the following benefits from your employer?

Records (code £ entries)
S – seen by interviewer
C – consulted by respondent
N – not consulted
E – estimated

- | | | | |
|------------------------------------|-----|----|---|
| | YES | NO | |
| (a) FREE Luncheon Vouchers | Y | N | } IF YES, specify quantities and values of each received in last 7 days |
| " Meals (e.g. lunches, dinners) | Y | N | |
| " Food (e.g. milk, eggs, potatoes) | Y | N | |
| " Fuel (e.g. turf) | Y | N | |

Description of Benefit	Quantity or No.	Value	
		£	P
.....
.....
.....

.....	571 1
-------	-------	-------

(b) Company Car
Are you supplied with a company car (✓) Yes No
IF YES please state the amount on which benefit-in-kind tax is charged (about 30% of the price of the car) _____
(If not available note make and model of car)

.....	869
-------	-------	-----

(c) Expenses paid as a perk of job
Are any of the following expenses paid by your employer as a perk of the job. If yes please state annual amounts

	Yes	No	Annual Amount	
- Health Insurance (e.g. VHI)	<input type="checkbox"/>	<input type="checkbox"/>	→
- Life Insurance	<input type="checkbox"/>	<input type="checkbox"/>	→
- Childrens School Fees	<input type="checkbox"/>	<input type="checkbox"/>	→
- Club Subscriptions (specify type of club)	<input type="checkbox"/>	<input type="checkbox"/>	→

.....	.....	870 8
.....	.....	871 8
.....	.....	872 8
.....	.....	873 8

ALL SELF-EMPLOYED (coded 3 at Q. 1) – MOST REMUNERATIVE JOB

10. (a) How much was your total *net** income or profit from your business or profession *before Tax* for the most recent 12 months for which you can give a figure?

- Income →
- Year ending.....
- NOW ASK Q. 11
- Don't know (/).....

AMOUNT		Code
£	P	
.....	553 8
.....	554 8

IF DON'T KNOW

(b) Do you draw *regular* sums of money from the business for your *own personal use*?

- YES Y
- NO N, ASK (c)

IF YES

- (i) how much do you *usually* draw out? Amount £.....
- (ii) how often *on average* do you do this? Frequency.....

(iii) *after* deducting these personal withdrawals how much was your *net** income or profit before tax for the most recent 12 months for which you can give a figure?

- Income £.....
- Year ending.....
- NOW ASK Q. 11
- Don't know (/).....

IF NO OR DON'T KNOW

(c) What was the *total turnover* of the business during the most recent 12 months for which you can give a figure?

- Income £.....
- Year ending.....
- Don't know (/).....

11. Are you the *sole* owner of your business or are you in partnership with someone else?

- NOW ASK Q.11
- Sole owner.....
- Partnership.....

IF IN PARTNERSHIP has your partner's share been included in the figure given above?

- YES Y
- NO N

IF YES, how much was your partner's share?

£.....

REGULAR SUBSIDIARY JOB – IF YES AT Q. 5(b)

12. (a) IF AN EMPLOYEE, enter details at LEFT HAND margin of Q. 6

(b) IF SELF-EMPLOYED, enter details at LEFT HAND margin of Q. 10

.....	.....	555
.....	.....	556
.....	.....	557 8
.....	.....	558 8

* *net of business expenses and salaries wages paid to others*

OTHER RECEIPTS AND BENEFITS

LONG TERM RECEIPTS

13. Are you currently receiving any of the following benefits or receipts?

IF YES, ENTER AMOUNTS BEING RECEIVED →

(a) STATE WELFARE BENEFITS

YES NO

CONTRIBUTORY		PERIOD
YES	NO	
	
8	9	.....
	
	

Old Age

- (i) Pre-retirement allowance Y N
- (ii) Old age pension (66 years and over) Y N
- (iii) Retirement pension (65-66 years) Y N
- (iv) Single woman's allowance (59-65 years) Y N

.....	.....	863
.....	.....	57
.....	.....	577
.....	.....	852

Cont/d.

OTHER REGULAR BENEFITS RECEIVED IN LAST 12 MONTHS

14. Did you receive any of the following receipts during the past 12 months?

YES NO

No. of weeks received in last 12 months	Are you currently receiving it?	
	Yes	No
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2
.....	1	2

AMOUNT		Code
£	P	
.....	583 1
.....	063 1
.....	584 1
.....	064 1
.....	586 1
.....	066 1
.....	860 1
.....	X58 1
.....	591
.....	X81
.....	861 1
.....	X59 1
.....	585 1
.....	065 1
.....	570 1
.....	068 1
.....	590 1
.....	590 8
.....	090 1
.....	070 1

IF YES, TO ANY, enter the following details

LUMP-SUM STATE PAYMENTS

15. Have you received any of the following receipts during the past 12 months?

YES NO

Death grant	Y	N
Redundancy Gratuity	Y	N
IF YES, no. of years with firm		

IF YES, how much did you receive?

ALL OTHER INCOME

INTEREST AND DIVIDENDS

YES NO

16. Do you have money invested in

Stocks and shares?	Y	N
Government loans?	Y	N
Building Societies?	Y	N
Deposit/Savings Accounts		
- Commercial Banks?	Y	N
- Trustee Savings Bank?	Y	N
- Post Office Savings Bank?	Y	N
Other (e.g. unit trusts)?	Y	N

IF YES, state dividend/interest paid or credited to you during the past 12 months.

Description of Interest or Dividend	Amount received in last 12 months	Was this paid	
		Before Tax?	After Tax?
.....	£.....	1	2
.....	£.....	1	2
.....	£.....	1	2
.....	£.....	1	2

Records (code £ entries)
 S – seen by interviewer
 C – consulted by respondent
 N – not consulted
 L – estimated

INCOME FROM PROPERTY

17. Do you receive any income from the rental of land or property (excluding any part of this accommodation let or sublet?)
 YES Y
 NO N, ASK Q. 18

IF YES, how much did you receive in the last 12 months before deducting income tax but after deducting all allowable expenses?

- Farming land
- Other property

OCCASIONAL WORK

18. Have you at any time during the past 12 months made any further money or profit (e.g. babysitting, grinds, occasional work)?
 YES Y
 NO N, ASK Q. 19

IF YES, give the following details for each

Description of Work	Date work took place	Approx. Duration	Income, profit or fees
.....	£.....
.....	£.....
.....	£.....

INCOME OF DEPENDENTS (IF ANY) UNDER 15 YEARS

19. If you have dependents under 15 years

	YES	NO
(i) do they get a regular allowance from outside the household?	1	2
(ii) did they earn money outside the household in last 2 months? (e.g. babysitting, other part-time jobs, etc.)	1	2

IF YES, give the following details for each child

Per. No.	Source of Income	Approx. Income in last 2 months
.....	£.....
.....	£.....
.....	£.....

TO ALL RESPONDENTS

DIRECT SOCIAL INSURANCE OR HEALTH CONTRIBUTIONS

20. Do you make any direct social insurance or health payments (i.e. not deducted by employer)?
 YES Y
 NO N, ASK Q. 21

IF YES, (a) how much did you pay (directly)?

- Social Insurance
- Health Contribution
- Employment Levy
- Income Levy

(b) how long a period does this cover? Period

Code	AMOUNT	
	£	P
565 8		
566 8		
574 8		
574 5		
594		
594		
865		
866		

DIRECT INCOME TAX/PROPERTY TAX PAYMENTS

21. Have you paid any income tax or property tax *directly* to the Revenue Commissioners *during the last 12 months*?

YES Y
NO N, ASK Q. 22

IF YES, give details below

Source of Income on which tax was due	Amount paid in last 12 months
.....	<input type="text"/> £
.....	<input type="text"/> £

AMOUNT		Code
£	P	
.....	593 8
.....	071 8

DIRECT INCOME TAX REFUNDS

22. Have you had any income tax refunded directly to you by the Revenue Commissioners during the last 12 months?

YES Y
NO N, ASK Q. 23

IF YES, how much was refunded

REGULAR PERSONAL PAYMENTS

(Ask all questions)

LICENCES

23. Have you bought any of the following during the past 12 months?

YES NO

- Television Licence Y N
- Full driving licence – 3 years 10 years Y N
- Provisional driving licence Y N
- Dog licence Y N
- Fishing licence Y N
- Shooting licence Y N
- Others – Specify below Y N

IF YES
enter payments
in last 12 months →

.....	.....	520 8
.....	.....	521 8
.....	.....	522 8
.....	.....	522 8
.....	.....	522 8
.....	.....	522 8

OWNERSHIP AND USE OF MOTOR VEHICLES

24. Do you currently:

- (i) own a motor vehicle *outright*?
- (ii) own a motor vehicle *under a HP or other credit sales agreement*?
- (iii) have the *continuous use* for private purposes of a motor vehicle owned by someone outside the household: (e.g. employer, relative)

Yes	No	MOTOR	
		Car/Van	Cycle
Y	N	2	5
Y	N	3	6
Y	N	4	7
Total No. →		No.	No.
		£	£

MOTOR TAX AND INSURANCE

25. How much did you pay during the past 12 months for?

- Motor Tax
- Comprehensive Insurance
- Other motor insurance

5	6
8	7
9	7

.....	.....	07 1
.....	.....	07 1
.....	.....	07 1
.....	.....	45
.....	.....	45
.....	.....	07 1

MOTOR INSURANCE CLAIMS

26. Did you receive payments from an Insurance company during the last 12 months from a claim on a motor insurance policy (arising from an accident in a private capacity, not at work) YES
 NO

IF YES, please state amount received in respect of damage to your car (exclude amounts in respect of personal injuries)

Amount		Code
£	p	
.....	874

PURCHASE OF MOTOR VEHICLE

27. Did you purchase or sell a motor vehicle (used for private purposes) during the past 12 months (including purchase by HP, Credit Sale or financial lease)? YES
 NO

IF YES, please give the following details
(a) Purchase month/year

Month and year acquired

	new car/ van	new motor cycle	second hand car/van	second hand motor cycle
Cash/Personal Loan.....	2	1	3	1
HP/ Credit Sale/ Financial Lease	5	6	4	6

List price of car (before deducting trade-in allowance, if any) _____

(b) Sale

Trade-in value allowed on old vehicle _____

or
Cash received for old vehicle if not traded in _____

.....	82	8	82	8	828	8
-------	----	---	----	---	-----	---

ANNUAL MILEAGE (motor car/van only)

28. Enter approximate mileage in last 12 months Total annual mileage
Of which - business mileage

.....	X67	1
.....	X68	1

REGULAR PARKING/GARAGING EXPENSES

29. Do you rent a garage, and/or regularly pay a fixed fee to park or garage your car? YES.....Y
NO.....N

IF YES (i) how much do you pay _____
(ii) how long a period does this cover? _____ Period.....

.....	464
-------	-----

BUSINESS AND RECOVERABLE MOTORING EXPENSES

30. Are any of your motoring expenses:

- A. to be (or have been) claimed as expenses for income tax purposes (if self-employed)? YES.....Y
NO.....N
 - B. paid directly or refunded (wholly or partly) as business expenses by your employer? YES.....Y
NO.....N
 - C. paid directly or refunded (wholly or partly) by anybody else outside the household (e.g. relative)? YES.....Y
NO.....N
- Tax
— Insurance
— Motor fuel
— Servicing
— Other

Code A,B or C	% or Amount
.....
.....
.....
.....
.....

.....	081	1
.....	916	
.....	917	
.....	918	
.....	919	

IF YES, enter the following details _____

REGULAR LOAN REPAYMENTS

35. Are you currently making regular instalment loan repayments on.

- (a) Hire—Purchase, Credit sale or financial leasing agreements YES..... Y
 (i.e. formal agreements to purchase particular items) NO..... N

IF YES, give the following particulars and enter regular instalment repayment

Description of Article	*Approximate Cash Price	1 = New 2 = 2nd hand	Date Acquired	Down Payment if in last 3 months		Instalment frequency
				£	p	
.....
.....
.....

* In the case of cars give the List Price here

- (b) Ordinary Loans (exclude mortgage and bank overdraft) YES..... Y
 NO..... N

IF YES, give the following particulars and enter regular repayment

e.g. bank (term loan), employer, Credit Union	Purpose (i.e. item bought)	Repayment frequency
.....
.....
.....

CREDIT CLUB, BUDGET ACCOUNT AND SIMILAR SCHEMES

36. Are you currently paying regular instalments with YES NO

- (a) Clothing clubs/budget accounts Y N
 (b) Other clubs/budget accounts Y N
 (c) Other similar scheme (specify) Y N
 Y N

IF YES, enter

Frequency	Amount
.....	£.....
.....	£.....
.....	£.....
.....	£.....

IF YES TO ANY, enter particulars of instalments above and also give the following particulars for any article acquired through those schemes in LAST MONTH.

Description of Article	Date acquired
.....
.....
.....

ENTER CASH PRICE →

CURRENT BANK ACCOUNTS AND CREDIT CARDS

37. (a) Do you have a "current" account YES NO
 (i.e. with a cheque book facility) 1 2

IF YES, (i) Do you pay for anything by a Standing Banker's Order and/or Direct Debit? YES..... Y specify below
 NO..... N

Description of Payment	Already covered?		IF NO, enter	
	YES	NO	£ Amount p	Period
.....	Y	N	.....	.....
.....	Y	N	.....	.....
.....	Y	N	.....	.....

(ii) In past 12 months how much did you pay (% for business purposes = %)

Bank charges	→	528 8
Interest on overdraft	→	528 8

(b) Do you have a Credit Card? 1—Visa 2—Access 3—American Express 4—Other 5—None

IF YES, Did you pay interest in last account settlement? YES..... Y
 NO..... N

IF INTEREST PAID (i) how much was paid? → 920
 (ii) settlement period Period

Amount		Code
£	p	
.....
.....	92
.....	92
.....	92
.....	540
.....	541
.....	541
.....	541
.....	080 1
.....	528 8
.....	528 8
.....	X70 1
.....	920

IN-PATIENT (INCL. 1 DAY STAY) HOSPITAL COSTS

(INCLUDE payments for private/semi-private room, all other costs and fees).

Amount		Code
£	p	
.....	054 8
.....	592 8
.....	497 8
.....	X71 8
.....	X72 8

40. Did you pay your own or the cost of any other person's stay in hospital during last 12 months?
 YESY for Per. No.
 NON

IF YES (i) How much did it cost in the last 12 months?
 Total cost
 VHI refunds or direct payments
 Refunds from private Health Insurance
 Net hospitalisation cost

(ii) Total number of bed-nights or days paid for
 State funded hospitals
 Private hospital(s)

REFUND OF OUT-PATIENT MEDICAL EXPENSES

41. Did you receive from the HEALTH BOARD during the past 12 months any cash refund of expenditure incurred on prescribed drugs
 YESY
 NON

IF YES (i) How much was refunded by Health Board in the past month?
 (ii) How long a period did the refund cover? Periodmonths

42. Did you receive from the VHI during past 12 months any cash refund of out-patient expenses (e.g. G.P./specialist fees, drugs, X-rays, tests, etc), or did the VHI pay directly for any of these.
 YESY
 NON

IF YES, how much was refunded or paid by VHI in past 12 months?

.....	.....	701 4
.....	.....	702 8

SUPPLEMENTARY WELFARE ASSISTANCE

NOTE: This question must be handled VERY TACTFULLY and asked only of low income households where it could be relevant.

43. During the last 12 months have you received any of the following welfare benefits provided by the Department of Social Welfare or Health Board
 IF YES TO ANY, enter approximate value received in last 12 months

	YES	NO		
(i) Bottled gas allowance (instead of electricity where no ESB supply)	Y	N	.....	925 8
(ii) Back to school clothing and footwear allowance	Y	N	.....	926 8
(iii) Rent and mortgage Interest supplement	Y	N	.....	930 8
(iv) Special once-off payments from Community Welfare Officer to meet exceptional needs	Y	N	.....	927 8
(v) Only if you consider it safe to do so (i.e. that it will not cause undue insult) and that it is relevant to the household you can ask:- Are you receiving payments from a charitable Organisation (e.g. SVDP) regularly to make ends meet?				

IF YES please state amount and period
 Amount Period

.....	574
-------	-------	-----

HOLIDAY EXPENSES

INCLUDE - holidays, visits to relatives, etc.
EXCLUDE - business trips and expenses

44. Did you (on your own behalf and for others) pay the cost of any holidays, of at least 4 nights away from home during the past 12 months?
 YESY
 NON

IF YES, please state:-

(i) how many separate holidays were paid for (vacation by family of 5=5 holidays)
 In Republic
 Elsewhere

(ii) combined total number of nights away from home (i.e. family of 5 away for 10 nights = total of 50 nights)
 In Republic
 Elsewhere

(iii) estimated combined total expenditure incurred by you and any other person you paid for (including transport, meals, entertainment, presents, etc).
 In Republic
 Elsewhere

(iv) of the total expenditure at (iii) above in respect of holiday expenditure in Northern Ireland or abroad how much was paid out in the Republic of Ireland (i.e. to travel agents, tour operators etc.)

(v) In relation to the holiday nights spent in the Republic please give the following details on nights spent and accommodation expenses

	Number of nights spent away from home	Approximate expenditure on accommodation (excl. meals)	
(a) Hotel/Guest House	.....	.....	X82 8
			833 8
(b) Bed and Breakfast	.....	.....	X83 8
			834 8
(c) House/Apartment	.....	.....	X84 8
			835 8
(d) Caravan/Campsite	.....	.....	X85 8
			836 8

.....	.....	706 1
.....	.....	707 1
.....	.....	708 1
.....	.....	709 1
.....	.....	710 8
.....	.....	711 8
.....	.....	931 8
.....	.....	X82 8
.....	.....	833 8
.....	.....	X83 8
.....	.....	834 8
.....	.....	X84 8
.....	.....	835 8
.....	.....	X85 8
.....	.....	836 8

NOTE: Avoid double-counting if this question is also completed by another member of the household.