1997 Residential Energy Consumption Survey
Household Questionnaire

Section B: KITCHEN APPLIANCES

B-1 STOVEN Now I have some questions about your use of kitchen appliances. Please look at Exhibit B-1. Do you have a kitchen stove that has both burners and an oven?

Yes ........................ 1
No ........................... 0

[If Yes] ELSTOVE NGSTOVE LPSTOVE OTHSTOVE What type of fuel does that stove use? Is it . . .

- Electricity, .......................... 05
- Natural gas from underground pipes, ...... 01
- Bottled gas (LPG or Propane), or .......... 02
- Some other fuel? .......................... 21
- Don't know ................................. 96

[If No] STOVE Do you have a separate built-in range top or burners?

Yes ........................ 1
No ........................... 0

[If Yes] ELSTOVE NGSTOVE LPSTOVE OTHSTOVE What type of fuel does that stove use? Is it . . .

- Electricity, .......................... 05
- Natural gas from underground pipes, ...... 01
- Bottled gas (LPG or Propane), or .......... 02
- Some other fuel? .......................... 21
- Don't know ................................. 96

[If No] OVEN Do you have a separate built-in oven?

Yes ........................ 1
No ........................... 0

[If Yes] ELOVEN NGOVEN LPOVEN OTHOVEN What type of fuel does that oven use? Is it . . .

- Electricity, .......................... 05
- Natural gas from underground pipes, ...... 01
- Bottled gas (LPG or Propane), or .......... 02
- Some other fuel? .......................... 21
- Don't know ................................. 96
B-2  [If STOVEN=Yes or OVEN=Yes] OVENUSE Please look at Exhibit B-2. Which of the categories shown best describes, on average, how often you use your oven?

- More than once a day .......................... 1
- Once a day ........................................ 2
- Between once a day and once a week ........ 3
- Once a week ........................................ 4
- Less than once a week ......................... 5

B-3  [If STOVEN=Yes or OVEN=Yes] OVENCLN Does your oven have a self-cleaning feature?

- Yes ................................................. 1
- No ..................................................... 0
- Don't know ....................................... 6

  [If OVENCLN = Yes] TYPECLN Is your self-cleaning oven one that cleans continuously or do you have to manually start the cleaning cycle.

- Continuous cleaning ............................ 1
- Manually start the cleaning cycle ............. 2
- Don't know ....................................... 6

B-4  MICRO  Do you use a microwave oven to do any cooking?

- Yes .................................................. 1
- No ..................................................... 0

  [If Yes] AMTMICRO Please look at Exhibit B-4. Which answer best describes how much of your food is cooked in the microwave?

- Most or all ....................................... 1
- About half ....................................... 2
- Some or very little ............................... 3
- Used only for snacks, defrosting, or reheating food ........ 4

B-5  NUMMEAL Please look at Exhibit B-5. Which of the categories shown best describes, on average, how often hot meals are usually cooked in your home?

- Three or more times a day .................... 01
- Two times a day ................................... 02
- Once a day ....................................... 03
- A few times each week .......................... 04
- About once a week ............................... 05
- Less than once a week ......................... 06
B-6  **FUELFOOD** You mentioned that you used (enter the names of the fuels mentioned in B-1 and electricity if B-4=Yes and electricity not mentioned in B-1) to prepare your meals. Which of these fuels is used most for cooking in your home?

- Electricity ............................. 05
- Natural gas from underground pipes ........ 01
- Bottled gas (LPG or Propane) .............. 02
- Some other fuel ........................ 21
- Don't know ............................. 96

B-7  **NUMFRIG** How many refrigerators do you use in your home?

- One ................................ 1
- Two ................................ 2
- Three or more .................... 3
- None .............................. 6  ---> SKIP to B-10

[If there are two or more refrigerators in the home read this introduction:]  **FIRST I WOULD LIKE TO ASK SOME QUESTIONS ABOUT THE REFRIGERATOR THAT YOU USE THE MOST.**

B-8a  **TYPERFR1** Please look at Exhibit B-8a. Which of the pictures best describes the type of refrigerator you have?

- Full-size with one door ........... 1
- Full-size with two doors .......... 2
- Half or quarter-size ............ 3
- Some other kind ............. 4
- Don't know .................. 6

[If Two doors] **DOORSFR1** Are those doors side-by-side or top-and-bottom?

- Side-by-side ................ 1
- Top-and-bottom .......... 2
- Other .................. 3

B-8b  **SIZRFRI1** [If DOORSFR1 = Top-and-Bottom or Other] Please look at Exhibit B-8b. How would you describe the size of this refrigerator?

- Very small (10 cubic feet or less) ........... 1
- Small (11 to 14 cubic feet) .................. 2
- Medium (15 to 18 cubic feet) .............. 3
- Large (19 to 22 cubic feet) .............. 4
- Very large (more than 22 cubic feet) .... 5
- Don't know ............................ 6

B-8c  **REFRIGT1** [If DOORSFR1 = Top-and-Bottom or Other] What type of defrosting does this refrigerator have? Is it . .

- Manual or .............................. 1
- Frost-free? (either automatic or semi-automatic) .... 2
- No working freezer section (if volunteered) ........ 3
- Don't know ............................. 6
B-8d ICE [If DOORSFR1=Side-by-Side] Does this refrigerator have through-the-door ice and water service?

Yes ............................ 1
No ............................... 0

B-8e AGERFRI1 Please look at the Yellow Card. About how old is this refrigerator?

Less than 2 years old .............. 01
2 to 4 years old ........................ 02
5 to 9 years old ..................... 03
10 to 19 years old ................... 04
20 years or older .................... 05
As old as the home (if volunteered) 06
Don't know .......................... 96

[If B-7 is One or None SKIP to B-10, Otherwise read this introduction:] NOW I WOULD LIKE TO ASK YOU THE SAME QUESTIONS ABOUT YOUR (if B-7 = "Two" insert OTHER; if B-7 = "Three or more" insert SECOND MOST USED) REFRIGERATOR

B-9a TYPERFR2 Please look at Exhibit B-8a. Which of the pictures best describes the type of refrigerator you have?

Full-size with one door, ............. 1
Full-size with two doors .............. 2
Half or quarter-size ............... 3
Some other kind ..................... 4
Don't know .......................... 6

[If Two doors] DOORSFR2 Are those doors side-by-side or top-and-bottom?

Side-by-side ...................... 1
Top-and-bottom ................... 2
Other ............................. 3

B9b SIZRFRI2 [If DOORSFRI = Top-and-Bottom or Other] Please look at Exhibit B-8b. How would you describe the size of this refrigerator?

Very small (10 cubic feet or less) .......... 1
Small (11 to 14 cubic feet) ............. 2
Medium (15 to 18 cubic feet) ............ 3
Large (19 to 22 cubic feet) ............. 4
Very large (more than 22 cubic feet) .... 5
Don't know .......................... 6

B-9c REFRIGT2 [If DOORSFRI = Top-and-Bottom or Other] What type of defrosting does this refrigerator have? Is it .

Manual or .................................. 1
Frost-free? (either automatic or semi-automatic) ........ 2
No working freezer section (if volunteered) ............ 3
Don't know .............................. 6
B-9d  **MONRFRI2**  During the past 12 months, how many months was this refrigerator turned on?

Enter the number

B-9e  **AGERFRI2**  Please look at the Yellow Card.  About how old is this refrigerator?

- Less than 2 years old ..................................... 01
- 2 to 4 years old ........................................... 02
- 5 to 9 years old ........................................... 03
- 10 to 19 years old ......................................... 04
- 20 years or older ......................................... 05
- As old as the home (if volunteered) ........ 06
- Don't know ................................................. 96

B-10  **SEPFREEZ**  Does your household use a separate freezer that is not part of a refrigerator?

- Yes ......................................................... 1
- No ......................................................... 0

   [If Yes]  **NUMFREEZ**  How many separate freezers are used in your home?

   - One .................................................... 1
   - Two ..................................................... 2
   - Three or more ........................................ 3

   [If more than one freezer read this introduction:]  **NOW I WOULD LIKE TO ASK SOME QUESTIONS ABOUT THE SEPARATE FREEZER THAT YOU USE THE MOST**

B-10a  **UPRTFRZR**  What model freezer is this?  Is it . . . 

   - An upright or (vertical cabinet with a door on the front) ........ 1
   - A chest-type? (horizontal cabinet with the door on the top) .... 2

B-10b  **SIZFREEZ**  Please look at Exhibit B-8b.  How would you describe the size of this freezer?

   - Very small, (10 cubic feet or less) ..................... 1
   - Small, (11 to 14 cubic feet) ............................ 2
   - Medium (15 to 18 cubic feet) ........................... 3
   - Large (19 to 22 cubic feet) ............................. 4
   - Very large (more than 22 cubic feet) ............... 5
   - Don't know .............................................. 6

B-10c  **FREEZER**  What type of defrosting does this freezer have?  Is it . . 

   - Manual or .................................................. 1
   - Frost-free? (either automatic or semi-automatic) ........ 2
B-10d AGEFRZR Please look at the Yellow Card. About how old is this freezer?

Less than 2 years old .............. 01
2 to 4 years old ................. 02
5 to 9 years old ............... 03
10 to 19 years old ............ 04
20 years or older ............. 05
As old as the home (if volunteered) . 06
Don't know ..................... 96

B-11 DISHWASH Does your household use an automatic dishwasher?

Yes ............................ 1
No ............................. 0

[If Yes] DWASHUSE Please look at Exhibit B-11. Which category best describes how often your household actually uses the automatic dishwasher in an average week?

Less than 4 times a week ........ 1
4 to 6 times a week ............. 2
At least once each day .......... 3