

# SPECIAL HOUSING POPULATION CENSUS SHEET

ENTER INFORMATION FOR ONE HOUSING UNIT PER SHEET

City/Town: \_\_\_\_\_ Year: \_\_\_\_\_ Date: \_\_\_\_\_

**Note:** This form is only for cities that annually report Special Housing updates. Cities who use Census 2010 counts and do not report annual change should not use this form and continue to report Census 2010 counts.

*Make copies as needed. Summarize all population by special housing type and enter on the Population and Housing Unit Report, Form A. Send all forms to OFM with Form A.*

**Special houses** are living quarters not intended for usual year-round permanent living (or even sometimes for habitation). Special housing include RVs, travel trailers, live aboard boats, hotel/motel rooms, tents, chicken houses, and other miscellaneous structures where people with no other place to live are living. RVs, travel trailers, etc. are intended for vacations—not permanent year-round living. Special houses are never counted as housing structures unless they are being lived in full-time by a person who has no other place to live.

Type of Special Housing:     Travel Trailer             RV             Houseboat             Other Boat  
     Other (Specify) \_\_\_\_\_

Address Location	Name of Site/Facility.	Park Space No. Room No. or Other Identifying No.*	Other Identifying Features/Comments <i>Can continue on back of form</i>

\*Each special housing unit located with other units having only one house address, but identified separately by a letter or number appearing on the mail box and/or door.

**BY USING THIS FORM, CITY AGREES TO KEEP ALL DATA COLLECTED CONFIDENTIAL.**

## CONFIDENTIAL

List name of each person whose usual place of residence on the date of enumeration was in this household. Enter last name first; list an adult first. **NAMES AND QUESTIONS BELOW ARE REQUIRED, NOT OPTIONAL.** Record dates, times, and how callbacks are cleared. *If needed, use the reverse side of this form for additional names or comments.*

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

### RESIDENT SCREENING QUESTIONS:

1. Are these quarters your usual living place? ..... Yes  No   
     If yes, how many months of the year do you usually live in these quarters? \_\_\_\_\_ Months  
     If no, is there another residence that you consider your permanent home? ..... Yes  No
2. If mobile living quarters (i.e., RV, travel trailer, boat, etc.), how many months of the year are these living quarters located at this site? \_\_\_\_\_ Months
3. Do any of the residents listed above attend school, live on a military base, or live elsewhere for more than 6 months of the year? ..... Yes  No   
     If yes, who (list) \_\_\_\_\_

Enumerator: \_\_\_\_\_

Total Persons: \_\_\_\_\_