

**Firm Survey in Cotonou (Version 25 - 27/02/2014)**

ID data entry : |\_|\_|\_|\_|\_|\_|\_|\_|

ALWAYS WRITE IN UPPER CASE

Code for missing answers: Don't know= 9 ; Don't want to answer= 7 ; Not applicable= 8

**A. Identification**

A.1	Date of survey (1 <sup>st</sup> visit)	(day/month/year)  _ _ _  /  _ _ _  / 2014
A.2	Starting time	_ _  h  _ _  min
A.3	First name, surname and code surveyor	ID :  _ _ _
A.4	Where is located the survey?	1. [ ] Dantokpa market-----> <b>Skip to A.10</b> 2. [ ] Outside the market
A.5	Arrondissement number	_ _
A.6	Name and ID neighborhood	ID :  _ _ _ _
A.7	Lot (block) number	_ _ _ _
A.8	Letter parcel (see map)	
A.9	Firm ID number on lot (block) map	_ _ _ _  -----> <b>Skip to A.14</b>
A.10	What is the market sector's name?	
A.11	What is the firm's row number? (ex : h1_10b)	
A.12	ID Number on market map done by controller	_ _ _ _
A.13	What is the firm's SOGEMA ID number?(recorded on firm's door or wall)	_ _ _ _ _ _ _ _ _ _
A.14	Survey ID :	B  _ _ _ _  + _____ +  _ _ _ _  Dantokpa : 100 + row number + ID order (A.12) Outside Dantokpa : Neighborhood ID +Block number+ID order(A.9)

**B. Firm description and localization (Before entering the firm)**

B.1	Number or name of the street	
B.2	Firm's name or inscription visible from the outside	_____ _____
B.3	Most likely firm's sector of activity from outside firm's premises?	1. [ ] Crafts/Production of goods 2. [ ] Services 3. [ ] Trade 4. [ ] other -----> <b>Specify in B.3.a</b> 9. [ ] Don't know
B.3.a	If other specify	
B.4	Landmark N°1 next to the firm <i>[record in parenthesis the distance to the landmark]</i>	_____ _____
B.5	Landmark N°2 next to the firm <i>[record in parenthesis the distance to the landmark]</i>	_____ _____

Commentaires : \_\_\_\_\_

B.6	Landmark N°3 next to the firm <b>[record in parenthesis the distance to the landmark]</b>	_____
B.7	Is there any outside sign advertising the business?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
B.8	What is the color of the business' door?	
B.9	GPS coordinates of the firm: <b>[Only outside Dantokpa market]</b>	GPS ID :  _ _ _  Mark point #: GPS latitude :  _ _ ° _ _ ' _ _ '  North GPS longitude :  _ _ ° _ _ ' _ _ '  East
B.10	Is the business currently open?	1. <input type="checkbox"/> Yes -----> <b>Skip to C</b> 2. <input type="checkbox"/> No
B.11	Is there anyone who can provide any information about when is the business going to open?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to B.13</b>
B.12	When is the business going to open?	_____ _____ _____
B.13	<b>→ Put this questionnaire in the «survey to be visited again » folder and come back later today. If this is not possible, your controller will plan another visit later.</b>	
B.14	Date 2 <sup>nd</sup> visit	(day/month/year)  _ _  /  _ _  / 2014
B.15	Time 2 <sup>nd</sup> visit	_ _  h  _ _  min
B.16	Is the business currently open?	1. <input type="checkbox"/> Yes -----> <b>Skip to C</b> 2. <input type="checkbox"/> No ---> <b>Skip to F.2 (4) and explain in comments</b>

### C. Selection of survey respondent:

**[Ask to speak to the business owner. If he or she is not present ask to speak to the firm employee with the best knowledge on the firm]. Clearly explain the purpose of your visit:**

**IREEP is organizing a survey about small and medium businesses in Cotonou. This is a research project organized by "IREEP" an independent research institute with the objective of better understanding the conditions under which these businesses operate and the constraints they face. The results of this survey will be used to inform public policies. Answering to this survey and the type of answers provided will not provide any direct benefit to the firm. Indirectly, all small businesses in Cotonou will benefit from the survey results, in particular through future policies implemented.**

C.1	Is the business owner present?	1. <input type="checkbox"/> Yes -----> <b>Start survey in D</b> 2. <input type="checkbox"/> No
C.2	Is there any manager/employee taking part to business day to day decisions, present? <b>[This employee must have a good knowledge of the firm and agree to answer to all survey questions (sales, taxes,...)]</b>	1. <input type="checkbox"/> Yes -----> <b>Start survey in D</b> 2. <input type="checkbox"/> No

**Explain that you have to do the survey with the firm owner.**

Commentaires : \_\_\_\_\_

C.3	Is it possible for the owner to take an appointment for the survey?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to F.2 and explain in comments</b>
	Can you give me the name and phone number of the owner?	
C.4	Owner's name	
C.5	Owner's phone number	<input type="text"/>
	<b>-----&gt; call the owner and explain survey objectives; try to get an appointment for today or as soon as possible.</b>	
C.6	Is the owner okay to take an appointment for the survey?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to F.2 and explain in comments</b>
C.7	When is the owner available to conduct the survey?	<input type="text"/> <input type="text"/> <input type="text"/>
	<b>→ Put this questionnaire in the «survey to be visited again » folder and come back later today if you were able to get an appointment for the same day. If this is not possible, your controller will plan another visit later.</b>	
C.8	Second visit date	(day/month/year) <input type="text"/> / <input type="text"/> / 2014
C.9	Second visit time	<input type="text"/> h <input type="text"/> min
C.10	Is the owner available for the survey?	1. <input type="checkbox"/> Yes -----> <b>Start survey in D</b> 2. <input type="checkbox"/> No ---> <b>Skip to F.2 (4) and explain in comments</b>

## D. Interview with the firm owner (or a manager)

D.1	Is the respondent okay to answer the survey?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to F.2 and explain in comments</b>
D.2	What is the firm name?	<input type="text"/> <input type="text"/>
D.3	What is the firm owner's last name? <i>[If more than one owner, take the one who is working the more in the business]</i>	
D.4	What is the firm owner's first name?	
D.5	What is the owner's nickname?	
D.6	What is the gender of the owner?	1. <input type="checkbox"/> Man 2. <input type="checkbox"/> Woman
D.7	What is the owner's age? <i>[If necessary ask for an approximation]</i>	<input type="text"/>
D.8	What is the position of the respondent?	1. <input type="checkbox"/> Firm owner -----> <b>Skip to D.13</b> 2. <input type="checkbox"/> Firm co-owner 3. <input type="checkbox"/> Permanent employee 4. <input type="checkbox"/> Other -----> <b>Specify in D.8.a</b>
D.8.a	If other specify	
D.9	Respondent's last name	

D.10	Respondent's first name	
D.11	Respondent's gender?	1. <input type="checkbox"/> Man 2. <input type="checkbox"/> Woman
D.12	Respondent's phone number?	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _
D.13	Firm owner's phone number?	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _
D.14	Firm owner's second phone number?	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _
D.15	Firm owner's phone third phone number?	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _
D.16	Could you give me another phone number in case the other phone number would not be working?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to E</b>
D.17	Last name and first name of this person	
D.18	First phone number	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _
D.19	Second phone number	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _

## E. Interview with the owner (or a manager) about the firm

*[Now I'm going to ask you some questions about your business/the firm in which you are working].*

*Explain to the respondent that all information collected are confidential and will only be used for research purpose. Explain also that the answers provided will not be used to determine eligibility to any program.*

E.1	What is the firm activity (core activity)?	_____
E.2	Activity code (see codebook)	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _
E.3	What is the type of ownership for the firm? <b>Read the answers</b>	1. <input type="checkbox"/> Only one owner-----> <b>Skip to E.5</b> 2. <input type="checkbox"/> Multiple owners/own by the family 3. <input type="checkbox"/> Limited liability company-----> <b>End of survey</b> 4. <input type="checkbox"/> Public company -----> <b>End of survey</b> 5. <input type="checkbox"/> Group of producers -----> <b>End of survey</b> 6. <input type="checkbox"/> Club or Association -----> <b>End of survey</b> 7. <input type="checkbox"/> Other -----> <b>Specify in E.3.a</b>
E.3.a	If other specify	-----> <b>End of survey</b>
E.4	How many co-owners share the ownership of the company ?	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _

E.5	Does the company have other annexes or shops or production centers?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to E.7</b> 9. <input type="checkbox"/> Don't know
E.6	Are we in the main unit (headquarter) or a secondary unit? <b>[If the respondent don't know, consider the biggest unit as the main unit]</b>	1. <input type="checkbox"/> Main unit 2. <input type="checkbox"/> Secondary unit-----> <b>End of survey</b> 3. <input type="checkbox"/> Storage unit -----> <b>End of survey</b> 9. <input type="checkbox"/> Don't know -----> <b>End of survey</b>
E.7	Can you tell me when this firm was created? <b>[Approximate if necessary]</b>	1. <input type="checkbox"/> Less than one year ago 2. <input type="checkbox"/> Between 1 and 2 years 3. <input type="checkbox"/> Between 2 and 5 years 4. <input type="checkbox"/> More than 5 years ago 9. <input type="checkbox"/> Don't know
E.8	In addition to this firm, is the owner own any other firms?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know
E.9	Does the firm have a roof in hard material (concrete, tiles...)?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
E.10	Does the firm have a floor in hard material (Tiles, concrete slab...)?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
E.11	What is the firm's premises approximate size (in m <sup>2</sup> )?	_ _ _ _  m <sup>2</sup>
E.12	Is the firm owner own firm premises?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
E.13.a	Is the firm connected to electricity network?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
E.13.b	Does the firm own any generator?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
E.14	What is the highest education level attained by the owner?	1. <input type="checkbox"/> Primary school level(classes: CI to CM2) 2. <input type="checkbox"/> Junior High school before BEPC (classes: 6 <sup>ème</sup> to 3 <sup>ème</sup> ) 3. <input type="checkbox"/> Junior High school after BEPC (2 <sup>nd</sup> to Terminale), or «CAP» 4. <input type="checkbox"/> Higher level (après le Bac ou DTI, Université) 5. <input type="checkbox"/> Never went to school 6. <input type="checkbox"/> Other specify -----> <b>Specify in E.14.a</b> 9. <input type="checkbox"/> Don't know
E.14.a	If other specify	
E.15	Has the firm owner done an apprenticeship?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know
E.16	In addition to formal education received at primary school, junior high school, senior high school, or university, has the firm owner attended any training in order to improve his skills in management or accounting? <b>[Do not include apprenticeship]</b>	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know

	For the following types of employees, can you tell me how many are currently working in your company? And how many of them are women? <i>(for E.17 to E.21, Do not include the firm owner)</i>																										
E.17	Permanent employees <i>[employed for a long period (&gt; 3mois)]</i>	_ _ _	Including  _ _ _  women																								
E.18	Temporary employees <i>[employed for a short period (&lt; 3mois)]</i>	_ _ _	Including  _ _ _  women																								
E.19	Apprentices	_ _ _	Including  _ _ _  women																								
E.20.a	Interns	_ _ _	Including  _ _ _  women																								
E.20.b	Non-paid family worker	_ _ _	Including  _ _ _  women																								
E.21	In total, how many employees are currently present in the business?	_ _ _	Including  _ _ _  women																								
E.22	Is your business registered in the chamber of commerce (or RCCM or "one-stop-shop" or "GUFE") ?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to E.24</b> 9. <input type="checkbox"/> Don't know -----> <b>Skip to E.24</b>																									
E.23	Can you show me your registry certificate from the chamber of commerce?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No																									
E.24	Does the firm owner have a "trader card" for this company?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																									
E.25	Does the firm owner have a "temporary trader card" for this company?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																									
E.26	Does the firm owner have a « craftsman card » for this company?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																									
E.27	Does the company have a unique fiscal identifier (IFU number)?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																									
E.28	Does the company keep any form of accounting on book or register to record information on sales, purchases or cash flow?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No, not doing any form of accounting -----> <b>Skip to E.31</b> 9. <input type="checkbox"/> Don't know																									
E.29	What type of accounting is done by the company? <i>[Read possible answers]</i>	1. <input type="checkbox"/> Formal accounting -----> <b>Skip to E.31</b> 2. <input type="checkbox"/> Notes on sales, stocks or production... 9. <input type="checkbox"/> Don't know																									
E.30	What type(s) of information do you record on books or registers?	a. On firm sales b. On firm purchases c. On cost to be paid by the firm d. On cash flow e. On stocks f. On credit and debit g. Other -----> <b>Specify in E.30.az</b>	<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> </tbody> </table>	Yes	No	DK	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>
Yes	No	DK																									
1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																									
1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																									
1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																									
1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																									
1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																									
1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																									
1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																									
E.30.z	If other specify																										
E.31	In the last <u>6 months</u> , have you done any advertisement of any type for your company?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																									

E.32	In the <u>last month</u> , do any of your clients asked for a receipt after buying something from your firm?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																												
E.33	What is the total amount of sales that your firm usually makes during a <u>normal week</u> ? <i>[Help the respondent for the calculation if necessary]</i>	<div style="text-align: right;">FCFA For a usual week</div>																												
E.34	In the <u>last month</u> , what was the total amount of profit made by your firm? It corresponds to the difference between all revenues and sales and all expenses (wages, materials, taxes...)	<div style="text-align: right;">FCFA For the last month</div>																												
E.35	Does the firm owner have a bank account?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																												
E.36	Did the owner ever go to a bank like BoA or Ecobank to ask for a loan?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to E.38</b> 9. <input type="checkbox"/> Don't know -----> <b>Skip to E.38</b>																												
E.37	Did he/she ever get a loan from this type of institution?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																												
E.38	Did the owner ever go to a microfinance institution like PADME to ask for a loan?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to E.40</b> 9. <input type="checkbox"/> Don't know -----> <b>Skip to E.40</b>																												
E.39	Did he/she ever get a loan from this type of institution?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																												
E.40	Does the firm pay any tax?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -----> <b>Skip to E.44</b> 9. <input type="checkbox"/> Don't know -----> <b>Skip to E.44</b>																												
E.41	What type(s) of taxes does your company pay? <b>[Do not include the fee paid to the SOGEMA]</b>	<table border="1"> <thead> <tr> <th></th> <th>Oui</th> <th>Non</th> <th>NSP</th> </tr> </thead> <tbody> <tr> <td>a. "Patente foraine" (for trader in markets)</td> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>b. "Patente" (Outside SOGEMA markets)</td> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>c. "TPU" (for microbusinesses)</td> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>d. Tax for public space usage (paid at the town hall)</td> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>e. Other taxes for the town hall</td> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> <tr> <td>f. Other -----&gt; <b>Specify in E.41.az</b></td> <td>1. <input type="checkbox"/></td> <td>2. <input type="checkbox"/></td> <td>9. <input type="checkbox"/></td> </tr> </tbody> </table>		Oui	Non	NSP	a. "Patente foraine" (for trader in markets)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	b. "Patente" (Outside SOGEMA markets)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	c. "TPU" (for microbusinesses)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	d. Tax for public space usage (paid at the town hall)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	e. Other taxes for the town hall	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>	f. Other -----> <b>Specify in E.41.az</b>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>
	Oui	Non	NSP																											
a. "Patente foraine" (for trader in markets)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																											
b. "Patente" (Outside SOGEMA markets)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																											
c. "TPU" (for microbusinesses)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																											
d. Tax for public space usage (paid at the town hall)	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																											
e. Other taxes for the town hall	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																											
f. Other -----> <b>Specify in E.41.az</b>	1. <input type="checkbox"/>	2. <input type="checkbox"/>	9. <input type="checkbox"/>																											
E.41.z	If other specify																													
E.42	What is the total amount of tax paid by your company in the last year? <i>[Help the respondent to do the calculation]</i>	<div style="text-align: right;">FCFA</div>																												
E.43	Do you have the feeling that you paid more taxes than what you should have paid according to the law?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know																												

E.44	In 2013, how many times did a tax inspector or someone asking you to pay taxes visited your company? <b>[Do not include the SOGEMA fee]</b>	1. <input type="checkbox"/> No visit in last year -----> <b>Skip to E.46</b> 2. <input type="checkbox"/> Only once 3. <input type="checkbox"/> Twice 4. <input type="checkbox"/> 3 to 5 times 5. <input type="checkbox"/> More than 5 times 9. <input type="checkbox"/> Don't know -----> <b>Skip to E.46</b>
E.45	Do you think that tax officials override their duty and ask you to pay too much tax?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 9. <input type="checkbox"/> Don't know
E.46	Do you think that it is easy to know in advance the amount of tax that you are going to pay every year?	1. <input type="checkbox"/> It's very easy to predict 2. <input type="checkbox"/> It's easy to predict 3. <input type="checkbox"/> It's difficult to predict 4. <input type="checkbox"/> It's very difficult to predict 9. <input type="checkbox"/> Don't know

## F. Survey result

F.1	Survey ending time	_ _  h  _ _  min
F.2	Survey result	1. <input type="checkbox"/> Survey completed 2. <input type="checkbox"/> Survey partially completed -----> <b>Explain in F.2.a</b> 3. <input type="checkbox"/> Refused to answer -----> <b>Explain in F.2.a</b> 4. <input type="checkbox"/> Other -----> <b>Explain in F.2.a</b>
F.2.a	Explain	_____ _____ _____ _____
F.3	Do you have any comment about the survey?	_____ _____ _____ _____
F.4	Did you check that the survey is <b>correctly and completely</b> filled?	1. <input type="checkbox"/> Yes

## G. Survey quality checks (for the controller)

G.1	Controller's name and ID	_ _
G.2	Were you present during the interview?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
G.3	How many mistakes did you find in the questionnaire?	_ _