



REPUBLIC OF MACEDONIA
STATE STATISTICAL OFFICE

FORM APD - 3

Article 26 from Law of State Statistics ("Official Gazette of the Republic of Macedonia" No.54/97 21/07, 51/11 , 104/13 and 42/14) and Program of Statistics Researches 2013-2017 ("Official Gazette of the Republic of Macedonia" No. 20/13, 24/14 and 13/15)

HOUSEHOLD BUDGET SURVEY - 2016
Household Questionnaire

Data collected with this form are personal data, they are protected with the Law of State Statistics and they will be used only for statistic purposes

Address data

Name and surname of the head of the household

Street and number _____

Settlement _____ Municipality _____

Telephone number _____

Identification data

Survey code	<input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> 4	Contingent	<input type="text"/> 21
Questionnaire code	<input type="text" value="3"/> 5		
Region	<input type="text"/> 6	Ordinal number of the household in the (ED)	<input type="text"/> 23
_____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 11	Interval	<input type="text" value="X"/> <input type="text" value="X"/> <input type="text"/> <input type="text"/> 27
Settlement	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 17	Socio-economic category of the household	<input type="text"/> 28
Ordinal number of the enumeration district (ED) in the municipality	<input type="text"/> <input type="text"/> <input type="text"/> 20		

I. DATA ABOUT HOUSEHOLD MEMBERS

Ord. No. of mem.	Relation to the head of the household	Sex m-1 f-2	Age	Education	Occupation	Socio-economic position	Consumption units	Nationality	EDUCATION					HEALTH				
									How many years of preschool education (including kindergardens) have been attended? <i>Ask all household members under the age of 30 years</i>	What is the highest grade for which you have received a completion certificate or indicate highest finished year so far?	Are you currently enrolled in school?	Why not? (note the reason)	Do you suffer from a chronic illness or disability that has lasted more than 3 months in the last one year?	During last 30 days, did you have any acute (sudden) illness or injury?	In the past 30 days, did you seek medical assistance for any reason?	To whom did you apply for medical treatment?	Are you covered by health insurance?	
									1. None	1. yes	1. too expensive	1. yes	1. self treatment	1. yes				
									2. Preschool	2. no	2. too far	1. yes	2. private medical doctor	2. no				
									3. Primary (1-8)		3. no interest	2. no	3. ambulance					
									4. Gymnasium (1-4)		4. need to work		4. clinic					
									5. Occupational High school (1-4)		5. poor learning conditions		5. hospital					
									6. Higher school (1-2)		6. own illness		6. alternative medicine					
									7. University (1-6)		7. family illness		7. other					
									8. Post-graduate studies (1-2)		8. age							
									9. Doctorate		9. completed desired degree							
											10. other							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	
24	28	29	30	32	33	36	38	41	43	44	46	47	49	50	51	52	53	54
01	001	0																
	002																	
	003																	
	004																	
	005																	
	006																	
	007																	
	008																	
	009																	
	010																	
	011																	
	012																	
	013																	
	014																	
	015																	

II. DERIVED DATA FOR THE MEMBERS OF THE HOUSEHOLD

240228

1. Total number of household members

30

5. Number of members with personal income
(column 7, codes 13,15,16,19,20,50, 60 or 71)

38

2. Number of members with regular job
(column 7, codes 10 or 30)

32

6. Number of sustentative members
(column 7, codes 14 or 17)

40

3. Number of agriculturists
(column 7, codes 11, 21 or 51)

34

7. Sum of consumption units

44

4. Number of self-employed (owners
of enterprises who don't employed
other person (column 7, codes 12 or 40)

36

INTERVIEWER NOTES

Interviewer:

Name and surname, phone number

Data are controlled by:

Name and surname, phone number

III. DATA ABOUT DWELLING AND LAND

24 28

1. TYPE OF FLAT

Room	1	
Apartment	2	
One-room dwelling	3	
Two-room dwelling	4	29
Three-room dwelling	5	
Four-room dwelling and more	6	
Not living area	7	

2. OWNERSHIP (TENURE) OF FLAT

Owner	1	
Lease holder of the state dwelling	2	
Lease holder (of the whole dwelling) in private property	3	30
Lease holder (of the part of dwelling) in private property	4	
Relationship (living at parent's children's, other relative's house)	5	
Other	6	

Dwelling area used by the household (square meters) 33

3. INSTALLATIONS IN DWELLING

Water supply	1	34
Sewage disposal	2	35
Electricity	3	36
Central heating	4	37
Telephone line	5	38

4. AMENITIES IN DWELLING

Kitchen	1	39
Bathroom	2	40
Terrace	3	41
Garage	4	42
Other	5	43

5. WAY OF HEATING

a) Central heating	1	
b) Central heating with private installation		
- on electricity	2	
- on solid fuels	3	
- on liquid fuels	4	
- combined	5	44
c) Heating by stove		
- on electricity	6	
- on solid fuels	7	
- on liquid fuels	8	
- other fuels	9	

If you are heated with own firewood, please indicate

quantity of used own firewood in the last 3 months m³ 46

6. DID SOMEONE MEMBER OF HOUSEHOLD IS OWNER OF OTHER FLAT OR APARTMENT ON ANOTHER ADDRESS?

YES 1 NO 2 47

7. LAND AREA

Area of cultivated land owned by someone member of household ha a 51

IV. HOUSEHOLD SUPPLIES WITH DURABLE GOODS

24 28

If last 3 months you bought some of this durable, put their value in denars

1. Solid fuel cooker	<input type="text"/>	29
2. Electric cooker	<input type="text"/>	30
3. Gas and combined cooker	<input type="text"/>	31
4. Solid fuel stove	<input type="text"/>	32
5. Electric stoves (all kinds)	<input type="text"/>	33
6. Oil stove	<input type="text"/>	34
7. Gas stove	<input type="text"/>	35
8. Boiler	<input type="text"/>	36
9. Refrigerator	<input type="text"/>	37
10. Freezer	<input type="text"/>	38
11. Washing machine	<input type="text"/>	39
12. Iron	<input type="text"/>	40
13. Dish-washer	<input type="text"/>	41
14. Sewing machine	<input type="text"/>	42
15. Vacuum cleaner	<input type="text"/>	43
16. Air conditioner	<input type="text"/>	44
17. Radio	<input type="text"/>	45
18. Record player	<input type="text"/>	46
19. Cassette recorder	<input type="text"/>	47
20. Hi-fi sound equipment	<input type="text"/>	48
21. Black and white television set	<input type="text"/>	49
22. Color television set	<input type="text"/>	50
23. Video recorder	<input type="text"/>	51
24. Video camera	<input type="text"/>	52
25. Camera	<input type="text"/>	53
26. Personal computer	<input type="text"/>	54
27. Telephone	<input type="text"/>	55
28. Mobile phone	<input type="text"/>	56
29. Bicycle	<input type="text"/>	57
30. Motorcycle	<input type="text"/>	58
31. Motorcar	<input type="text"/>	59
32. Auto trailer	<input type="text"/>	60
33. Boat	<input type="text"/>	61
34. Motorboat	<input type="text"/>	62
35. Guitar	<input type="text"/>	63
36. Piano	<input type="text"/>	64

V. OTHER DATA

24	05	000	28
----	----	-----	----

1. Having on mind all your monthly incomes, does the household make ends meet?

- satisfied at all	1	29
- more or less satisfied	2	
- more or less not satisfied	3	
- not satisfied at all	4	

2. What are the minimum household monthly income level needed to make ends meet (in denars)?

--	--	--	--	--	--	--	--	--	--

39

3. Compared to one year ago, how would you rate your current financial situation?

- much better	1	40
- somewhat better	2	
- about the same	3	
- somewhat worse	4	
- much worse	5	

4. Having on mind your financial situation, if you want, can you effort to satisfy any of following needs:

	yes	no	
- keeping home adequately warm	1	2	41
- one week holiday	1	2	42
- replacing of furniture	1	2	43
- eating meat or fish every second day	1	2	44
- having friends or family for drink or meal at least once a month	1	2	45

5. Has your household been during the past three months able to:

	yes	no	
- to pay rent for accommodation	1	2	46
- to pay utility bills (electricity, water, telephone, central heating)	1	2	47
- to repay credit or loans	1	2	48

VI. OTHER HOUSEHOLD EXPENDITURES IN LAST THREE MONTHS

HOUSEHOLD EXPENDITURES IN LAST THREE MONTHS													
No.		Type of expenditures	Paid (in denars)										
1		2	3										
24	28		29	38									
		MEMBERSHIP FEES, TAXES, CUSTOMS DUTY, CONTRIBUTIONS											
06	001	Membership fees in social organizations and political parties											
	002	Taxes and customs duty											
	003	Contribution for pension funds											
		LOSSES AND GIFTS IN MONEY											
	004	Punishment for traffic delicts											
	005	Expenditures in restaurants for some occasions (birthday, wedding)											
	006	Gifts in money to persons outside of household, losses, alimentation											
		REPAYMENTS OF CREDIT AND LOANS											
	007	Repayment of credit											
	008	Repayment of borrowings											
		EXPENDITURES FOR DWELLINGS - FLATS											
	009	Purchasing of dwelling - flat											
	010	Purchasing of site for building of houses											
	011	Fees for projecting											
	012	Purchasing of building materials											
	013	Services for construction work											
		SAVINGS											
	014	Savings											
	015	Purchasing of shares											
	016	Borrowed money to other persons											

VII. EXPENDITURES OF AGRICULTURE AND MIXED HOUSEHOLDS IN LAST THREE MONTHS

07	001	Purchasing of agriculture buildings, land, cattle											
	002	Other agricultural investments (tractors, machinery)											
	003	Other expenditures for agricultural production (seed, tools, fertilizers, pesticides, fuel and maintenance of agricultural machines)											
	004	TOTAL - EXPENDITURES (from 001 to 003).											

VIII. RECAPITULATION OF INCOMES AND EXPENDITURES OF AGRICULTURE AND MIXED HOUSEHOLDS IN LAST THREE MONTHS

08	001	TOTAL INCOME FROM AGRICULTURAL HOLDING											
	002	TOTAL - EXPENDITURES (take data from Table VII item 004)											
	003	NET INCOME (001 minus 002)											
	004	NEGATIVE BALANCE (002 minus 001)											

IX. HOUSEHOLD AVAILABLE FUNDS IN LAST THREE MONTHS

		No.	Incomes	Denars									
		1	2	3									
24	28			29									38
09	001		Regular and periodical revenues from formal job (wages, seasonal and other bonuses)										
	002		Revenues for formal job for overtime work, vacation, transport, food										
	003		Revenues of the household members without formal job, who periodically or permanently perform for other enterprises and individuals or produce home made products for selling										
	004		Net income from agriculture (take data from Table VIII item 003)										
	005		One-off financial assistance for newborn baby and parental allowance										
	006		Child benefits										
	007		Pensions										
	008		Revenues from health insurance (sickness, maternity leave)										
	009		Social assistance and other social protection revenues										
	010		Invalids and other subventions										
	011		Scholarships										
	012		Incomes from rents										
	013		Gifts and other gains in money (lottery, gambling)										
	014		Revenues from household members who work abroad, foreign pensions										
	015		Subventions, alimentation and other supports										
	016		Revenues from property selling										
	017		Compensations from nationalization and expropriation										
	018		Incomes from dividends, sell shares										
	019		Revenues for unemployed from bankrupt companies										
	020		Revenues from life insurance										
	021		Revenues from property insurance										
	022		Loans from individuals										
	023		Repayments										
	024		Reduction of cash money										
	025		AVAILABLE MONEY FUNDS (from 001 to 024)										
	026		Realized consumption credits										
	027		Other credits (student's)										
	028		Investment loans and credit from banks for dwelling construction (realized)										
	029		Investment loans and credit from enterprise in which household members are employed, for dwelling construction (realized)										
	030		AVAILABLE FUNDS - TOTAL (025+026 to 029)										
	031		Income in kind (food, clothes, footwear)										

SOCIAL PROTECTION

1. If anyone from your household in the previous 30 days, received some social benefit, please mark the institution from which it was received (it is possible to mark more institutions)

- Centers for Social Work (Permanent financial assistance, One-off financial assistance, Financial reimbursement for assistance and care, Reimbursement for civil war disabled, Guardianship award)	.....	1	29
- Employment Bureau (Unemployment benefit, Blue coupons for health insurance)	.....	2	30
- Child Protection Department (Child allowances, Special allowances for disabled children, Assistance for new born babies)	.....	3	31
- War Veterans Department (Disability allowance for veterans, Orthopedic allowance, Allowance for care for veterans, Material support for veterans: transportation, sanatoriums )	.....	4	32

2. During previous 12 months, have anyone from your household applied for social assistance benefits in some of abovementioned institutions?

yes	1	<input type="checkbox"/> 14	33
no	2	<input type="checkbox"/> 13	

3. Why haven't you applied?

- We didn't need it	1	<input type="checkbox"/> finished	34
- We were not informed such program existed	.....	2	<input type="checkbox"/> finished
- We don't know how to apply	.....	3	<input type="checkbox"/> finished
- Administrative procedure is too complicated	.....	4	<input type="checkbox"/> finished
- We know we don't meet the criteria	.....	5	<input type="checkbox"/> finished
- We received benefit based on previous application	.....	6	<input type="checkbox"/> finished
- Other	.....	7	<input type="checkbox"/> finished

4. Have you obtained the benefit you have applied for?

yes	1	<input type="checkbox"/> finished	35
no	2	<input type="checkbox"/> 15	

5. Why haven't you received the benefit?

- We were not qualified by material criteria	1	<input type="checkbox"/> finished	36
- We were not qualified by other criteria	.....	2	<input type="checkbox"/> finished
- Social worker made negative assessment	.....	3	<input type="checkbox"/> finished
- Other	.....	4	<input type="checkbox"/> finished