

HOMESITE ENVIRONMENTAL ASSESSMENT

Patient ID # _____

Surveyor _____
(Last name, First name)

Indicate site type if other than homesite _____ (Substitute for homesite in remainder of text)

Date of Inspection ____/____/____
mm / dd / yy

1. Location of primary dwelling: _____
City / Town State

2. Approximate distance of homesite to the (edge of the) nearest town or city with a population of 500 or more people:

- | | |
|--|--|
| <input type="checkbox"/> Under 0.5 miles | <input type="checkbox"/> 30.1 - 50 miles |
| <input type="checkbox"/> 0.5 - 1.0 miles | <input type="checkbox"/> 51 - 100 miles |
| <input type="checkbox"/> 1.1 - 10 miles | <input type="checkbox"/> Over 100 miles,
specify distance _____ |
| <input type="checkbox"/> 10.1 - 30 miles | |

2a. Approximate number of homes within a 1/2 mile radius of homesite:

- | | | |
|---------------------------------|-----------------------------------|--------------------------------|
| <input type="checkbox"/> 0 - 5 | <input type="checkbox"/> 26 - 50 | <input type="checkbox"/> > 100 |
| <input type="checkbox"/> 6 - 25 | <input type="checkbox"/> 51 - 100 | |

2b. Which of the following is the best description of area around homesite?

- | | |
|---|--|
| <input type="checkbox"/> urban | <input type="checkbox"/> sub-urban |
| <input type="checkbox"/> rural - agricultural | <input type="checkbox"/> rural - nonagricultural |
| <input type="checkbox"/> other _____ | |

3. What is the population of the nearest town to the homesite:

- | | |
|--|--|
| <input type="checkbox"/> ≤ 1000 | <input type="checkbox"/> 50,001 - 100,000 |
| <input type="checkbox"/> 1001 - 5000 | <input type="checkbox"/> 100,001 - 500,000 |
| <input type="checkbox"/> 5001 - 25,000 | <input type="checkbox"/> 500,001 - 1.0 million |
| <input type="checkbox"/> 25,001 - 50,000 | <input type="checkbox"/> > 1.0 million |

4. What elevation is the primary dwelling built at:

- | | |
|--|---|
| <input type="checkbox"/> Sea level - 500 ft. | <input type="checkbox"/> 4001 - 5000 ft. |
| <input type="checkbox"/> 501 - 1000 ft. | <input type="checkbox"/> 5001 - 6000 ft. |
| <input type="checkbox"/> 1001 - 2000 ft. | <input type="checkbox"/> 6001 - 7000 ft. |
| <input type="checkbox"/> 2001 - 3000 ft. | <input type="checkbox"/> 7001 - 8000 ft. |
| <input type="checkbox"/> 3001 - 4000 ft. | <input type="checkbox"/> over 8000 ft., specify elevation _____ |

5. Approximate size of area in which individual spends majority of time, at homesite:

- | | |
|--|--|
| <input type="checkbox"/> Under 0.25 acre | <input type="checkbox"/> 2.1 - 5 acres |
|--|--|

- 0.25 - 1 acre 5.1 - 10 acres
 1.1 - 2 acres over 10 acres, *specify size* _____

- 5a. Approximate square-footage of primary dwelling:
- Under 250 sq. ft. 1001- 2000 sq. ft.
 251 - 500 sq. ft. 2001- 3000 sq. ft.
 501 - 1000 sq. ft. over 3000 sq. ft., *specify size* _____

6. Year of construction of primary dwelling: _____
 IF UNKNOWN, ESTIMATE THE AGE OF THE DWELLING...
- Under 5 years 31 - 50 years
 5 - 10 years over 50 years, *specify* _____
 11 - 30 years

7. Describe construction of primary dwelling (select best choice):
- wood frame, wood exterior
 wood frame, manufactured siding exterior
 wood frame, brick or block exterior
 wood frame, stucco exterior
 true adobe
 stone
 mobile home or trailer
 other, *specify* _____

8. Is the primary dwelling :
- detached from other buildings (i.e. single family home)
 apartment/condominium
 hotel or motel
 townhouse
 duplex
 dormitory
 other, *specify* _____

9. What is the foundation type of the primary dwelling (select best choice):
- none (built directly on ground) concrete slab, with basement
 raised (stilts or pillars) concrete slab, no basement
 stone or brick other, *specify* _____

10. Which additional construction features are present on the primary dwelling (CHECK ALL THAT ARE PRESENT):
- single story multiple story, *specify* # _____
 split level attic

- basement
- crawl space
- attached garage
- screened porch
- deck
- other, *specify* _____

11. Describe the roof of the primary dwelling (select best choice):

- pitched shingle - wood
- pitched shingle - asphalt or composite
- flat - rolled asphalt or similar
- other, *specify* _____
- pitched shingle - slate
- pitched - tin
- flat - tar and gravel

12. What is the predominate flooring type of the primary dwelling? (check **one**):

- wood
- tile
- vinyl or similar
- dirt
- wall-to-wall carpet
- stone
- brick
- other, *specify* _____

12a. What other flooring is present in the dwelling? (check **all** that apply):

- wood
- tile
- vinyl or similar
- dirt
- wall-to-wall carpet
- stone
- brick
- other, *specify* _____

13. Are there additional detached residential dwellings (inhabited) on this property?

- yes, how many? _____
- no (IF NO, SKIP TO Q14)

13 a. If yes, what is the distance between the nearest detached residential dwelling (inhabited) and the primary dwelling:

- Under 10 yards
- 10-50 yards
- 51 - 100 yards
- 101 - 200 yards
- 201 - 300 yards
- 301 - 400 yards
- 401 - 500 yards
- over 500 yards, *specify* _____ yards

14. Are there additional detached outbuildings on this property? (either inhabited or not)

- yes, how many? _____
- no, (IF NO, SKIP TO QUESTION 15)

14a. Complete the following table, indicating all detached outbuildings on this property:

Identification Number _____

Yes	NO	Type of Building	Distance from Primary Structure (in yards)							
			<10 >500	10-50	51-100	101-200	201-300	301-400	401-500	
<input type="checkbox"/>	<input type="checkbox"/>	Garage	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Workshop	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Greenhouse	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Doghhouse	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Smokehouse/other food preparation	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Outhouse/pit privy	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Barn or storage -- no food stored (livestock present)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Barn or storage -- no food stored (no livestock)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Barn or storage -- shed-grains, animal feed, etc.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Other, <i>specify</i> _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Other, <i>specify</i> _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Other, <i>specify</i> _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Other, <i>specify</i> _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Homesite Ecology.

15a. What is the dominant biome (habitat) that the case site is located in?

- | | |
|---|--|
| <input type="checkbox"/> Conifer Forest (Pine/Fir) | <input type="checkbox"/> Oak Woodland |
| <input type="checkbox"/> Pinyon/Juniper Woodland | <input type="checkbox"/> Deciduous Forest |
| <input type="checkbox"/> Scrub/Chaparral | <input type="checkbox"/> Mountain Meadow |
| <input type="checkbox"/> Plains Grassland | <input type="checkbox"/> Desert Grassland |
| <input type="checkbox"/> High Desert (≥ 2500 ft.) | <input type="checkbox"/> Low Desert (<2500 ft.) |

15b. Indicate the proportion of the home property occupied by the following coverage categories and indicate the dominant plant type(s) If known:

Coverage	Percent	Distance from primary dwelling	Dominant species
Woods/trees			
Brush/shrubs/ ornamentals			
Maintained grass (≤ 6 inches high)			
Unmaintained grass (>6 inches high) & other herbaceous			
Asphalt/cement/ gravel/bare ground			NA
Other, <i>specify</i> _____			NA

16. What is the average slope of the property? _____ degrees
(for flat terrain, indicate zero degrees slope and skip to question 17).

16a. What is the direction of slope? (select best choice):

- | | | | |
|-------------------------------|--------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> east | <input type="checkbox"/> north | <input type="checkbox"/> northeast | <input type="checkbox"/> southeast |
| <input type="checkbox"/> west | <input type="checkbox"/> south | <input type="checkbox"/> northwest | <input type="checkbox"/> southwest |

17. Is there a river, stream, lake, pond or other standing body of water present within 200 yards of the residence?

- yes
 no

17a. If not within 200 yards, what is the distance to the nearest river, stream, lake, pond or other permanent or water source?

- | | | |
|---|--|--|
| <input type="checkbox"/> < 0.25 miles | <input type="checkbox"/> 0.5 - 1.0 miles | <input type="checkbox"/> 2.1 - 5.0 miles |
| <input type="checkbox"/> 0.25 - 0.5 miles | <input type="checkbox"/> 1.1 - 2.0 miles | <input type="checkbox"/> > 5.0 miles |

SURVEY OF ENVIRONMENTAL CONDITIONS

IDENTIFICATION# _____

LOCATION: DWELLING (DW) ____ OUTBUILDING (OB) ____ OUTSIDE (OUT) ____

*Please indicate the total number of residential [inhabited] dwellings and detached outbuildings present on the property in the spaces above (consider a garage or other building which is attached to the residential dwelling as part of the dwelling). Then, for each of the location **categories**, quantify the number of times each indicator of food/water, harborage or opportunity for entry is observed in the following settings:*

A. FOOD & WATER				B. HARBORAGE				C. ENTRY			
INDICATOR	# OF TIMES CONDITION FOUND THIS LOCATION			INDICATOR	# OF TIMES CONDITION FOUND THIS LOCATION			INDICATOR	# OF TIMES CONDITION FOUND THIS LOCATION		
	DW	OB	OUT		DW	OB	OUT		DW	OB	OUT
HUMAN FOOD ACCESSIBLE (TO RODENTS)				ABANDONED / RARELY USED VEHICLE OR FARM EQUIPMENT				VENT/DUCT OPENINGS			N/A
FOOD WASTE OR REFUSE ACCESSIBLE (TO RODENTS)				ABANDONED APPLIANCES				DOOR GAPS			N/A
LIVESTOCK CARCASSES ACCESSIBLE (TO RODENTS)				FIREWOOD/LUMBER				WATER LINE ENTRY			N/A
ANIMAL FOODS/FEED GRAINS ACCESSIBLE (TO RODENTS)				DOWNED LOGS / TREES				HOUSE DRAIN LINE ENTRY			N/A
FRUITS/NUTS/VEGETABLE CROPS AVAILABLE (ACCESSIBLE TO RODENTS)				WEEDS / BRUSH				OTHER UTILITY LINE OPENING			N/A
SEEDS ACCESSIBLE (TO RODENTS)				COMPOST PILE				OPEN FLOOR DRAIN			N/A
WATER ACCESSIBLE (TO RODENTS)				DISCARDED FURNITURE / MATRESSES / APPLIANCES				OPEN FIREPLACE/CHIMNEY OR WOODSTOVE			
TRASH BURN PILE/BARREL PRESENT (ACCESSIBLE TO RODENTS)				CLOTHING / RAG / RUBBISH PILE / BOXES OR OTHER STORED MATERIALS				ROOF HOLES/GAP			N/A
OTHER, SPECIFY ----- -----				INSULATION MATERIAL ACCESSIBLE				FLOOR HOLES/GAP			N/A
				SINGLE / PILES OF TIRES				EXTERIOR WALL HOLES/GAP			
				OTHER, SPECIFY -----				OTHER, SPECIFY -----			N/A
TOTAL				TOTAL				TOTAL			

SURVEY OF RODENT SIGNS

Please indicate the total number of residential (inhabited) dwellings and detached outbuildings present on the

property in the spaces above. Then, for each of the location categories which are present, quantify the number of sightings for each of the following rodent signs:

RESIDENTIAL DWELLING(S) (COMPLETE A SEPARATE TABLE FOR ANY ADDITIONAL RESIDENTIAL DWELLINGS ON THE PROPERTY-- SEE APPENDIX A)

RODENT SIGNS

	attic	basement	crawl space	other storage areas	pantry/kitchen cabinet	Interior walls	attached garage	laundry room	other, specify
LIVE RODENTS SEEN									
DEAD RODENTS SEEN									
RODENT FECES SEEN									
RODENT GNAW MARKS SEEN									
RODENT NESTS SEEN									
FOOD TRACES SEEN									
TOTAL									

Which of the following rodent control techniques have been seen or have been reported to have been used recently inside the **residential dwelling(s)** (check all that apply):

- Poisons Live Traps
 Glue boards Spring Traps Other, specify _____

OUTBUILDING (S)

RODENT SIGNS

	detached garage	workshop or studio	barn or storage shed: grains, feed	barn or storage shed: tools, etc no food	green house/nursery	doghouse	pit privy / latrine	other, specify
LIVE RODENTS SEEN								
DEAD RODENTS SEEN								
RODENT FECES SEEN								
RODENT GNAW MARKS SEEN								
RODENT NESTS SEEN								
FOOD TRACES SEEN								
TOTAL								

Which of the following rodent control techniques have been seen or have been reported to have been used recently in the **outbuildings** (check all that apply):

- Poisons Live Traps
 Glue boards Spring Traps Other, specify _____

For each of the following **OUTDOOR** sites observed on the property, quantify the number of sightings for each of the indicated rodent signs:

OUTSIDE

RODENT SIGNS	TRASH - BURN PILE / COMPOST PILE	FIREWOOD D OR LUMBER PILE	DOWNED LOGS / TREES	WEEDS / BRUSH / GARDENS	DISCARDED FURNITURE / MATTRESSES / APPLIANCES	WORKING OR ABANDONED VEHICLES / FARM EQUIPMENT	other, <i>describe</i>) _____ _____
LIVE RODENTS SEEN							
DEAD RODENTS SEEN							
RODENT FECES SEEN							
RODENT GNAW MARKS SEEN							
RODENT NESTS SEEN							
FOOD TRACES SEEN							
TOTAL							

Which of the following rodent control techniques have been seen or have been reported to have been used recently outside of the homesite structure(s) (check all that apply):

- Poisons Live Traps
 Glue boards Spring Traps Other, *specify* _____

COMMENTS: (Please use the space below to provide additional information or to explain any responses which may be difficult to understand from the previous three tables of rodent signs. Please also note if information is being collected from a potential exposure site other than homesite: work site, recreational site, etc. Please note any other pertinent environmental characteristics from these sites which may not be adequately addressed with the Homesite Environmental Assessment. Attach any trapping results to back of form.)

IDENTIFICATION # _____

_____ Surveyor

HOMESITE MAP

In the space below, sketch a map of the homesite property, including all building structures (residential dwellings and outbuildings) and prominent ecologic features described in questions 15-17. Please label areas or structures where obvious rodent infestation was observed or where the potential for infestation is high, using the information detailed in the survey of environmental conditions and the survey of rodent signs.

N
W E
S