



**Survey of Income
and
Housing:
Australia,
2017-18
(cat no. 6553.0)**

Prompt Cards

SAMPLE ONLY

1. Spends time with another parent/guardian living elsewhere
2. Study related (i.e. boarding school, university student, exchange student)
3. Work/job related
4. Hospital/illness
5. Holiday/travel
6. Other (specify)

SAMPLE ONLY

You may choose more than one of the following:

1. Mains electricity
2. Mains gas
3. LPG/Bottled Gas
(excluding small bottles used occasionally outside this dwelling e.g. for BBQs/patio heaters)
4. Wood
5. Solar
(solar electricity or solar hot water)
6. Oil
7. Other (please specify)

This page has been intentionally left blank

Thank you for your help with this survey

SAMPLE ONLY

11. Real Estate Agent

12. State or Territory Housing Authority

Person **not** in the same household

13. Parent/Other relative not in the same household

14. Other unrelated person not in the same household

Caravan Park

15. Owner of caravan park/Manager of caravan park

Employer

16. Employer - Defence Housing Authority

17. Employer - Government

18. Other Employer

Continued next page

Other

19. Housing co-operative/Community/Church group

20. Other (please specify)

SAMPLE ONLY

You may choose more than one of the following:

1. Water and sewerage rates
2. General council rates
3. Combined water and general council rates

SAMPLE ONLY

You may choose more than one of the following:

1. Combined water and general council rates
2. Water and sewerage rates
3. General council rates
4. Body corporate
5. Land tax

SAMPLE ONLY

11. Real Estate Agent
12. State or Territory Housing Authority

Person living in the same household

13. Parent/Other relative in the same household
14. Other unrelated person in the same household

Person **not** living in the same household

15. Parent/Other relative not in the same household
16. Other unrelated person not in the same household

Caravan Park

17. Owner of a caravan park/Manager of caravan park

Continued next page

Employer

18. Employer - Defence Housing Authority
19. Employer - Government
20. Other Employer

Other

21. Housing co-operative/Community
/Church group
22. Other (please specify)

SAMPLE ONLY

Examples of Household Contents:

- **Bedroom**
(e.g. furniture, bedding, clothes, jewellery, cosmetics)
- **Dining Room**
(e.g. furniture, glassware)
- **Lounge Room**
(e.g. furniture, TV, game console/games, home theatre, DVD recorder, stereo units, speakers, videos/DVDs/CDs)
- **Kitchen**
(e.g. toaster, food processors, microwave, refrigerator, dishwasher, crockery, cutlery)
- **Study**
(e.g. home computer, laptops, printer, furniture, computer games, electronic devices)

Continued next page

H16 (Cont.)

- Laundry
(e.g. washing machine, dryer, vacuum cleaner)
- Outdoor
(e.g. table, chairs, portable BBQ, spa, lawn mower, hoses, tools, bicycles)
- Fittings
(e.g. carpet, rugs, curtains, mirrors, clocks, lamps)
- Other
(e.g. phones and other digital devices, sewing machines, aquariums, plants, toys, cameras, musical instruments, linen, collectables, luggage, books, prams)

Examples of properties other than this dwelling:

- Rental properties
- Second homes
- Holiday homes
- Vacant land
- Commercial properties
- Farms
- Overseas properties

SAMPLE ONLY

You may choose more than one of the following:

1. Repainting
2. Reroofing
3. Electrical work
4. Plumbing
5. Other types of repairs or maintenance

SAMPLE ONLY

Examples of vehicles:

- Car/Utility/Van/Truck
- Motorcycle
- Caravan
- Trailer
- Boat
- Bicycle
- Aircraft (e.g. aeroplanes, helicopters, microlights, gliders)
- Other type of vehicle (e.g. tractors, jet skis)

You may choose more than one of the following:

1. Private health insurance
(e.g. medical benefit funds, hospital benefit funds, dental benefit funds, MBF, HCF, Medibank Private)
2. Ambulance insurance only

SAMPLE ONLY

You may choose more than one of the following:

11. Pensioner Concession Card (issued by Department of Human Services)



12. Pensioner Concession Card (issued by Dept. Veterans' Affairs)



Continued next page

13. Health Care Card



14. Commonwealth Seniors Health Card (Issued by Department of Human Services)



Continued next page

15. Commonwealth Seniors Health Card
(issued by Dept. of Veterans' Affairs)



16. Veterans' Affairs Gold Card
(For All Conditions)



Continued next page

17. Veterans Affairs White Card
(For Specific Conditions)



18. Veterans' Affairs Orange Card
(Pharmaceutical Benefits)



Examples of loans and mortgages

- Loans/mortgages to buy or build this property (including alterations and additions)
- Loans/mortgages to buy or build other properties (including alterations and additions)
- Personal loans
- Hire purchase
- Other loans
- Holiday homes and vacant land
- Holidays
- Motor vehicles

Please exclude:

- Business loans
- Rental loans
- Investment loans

Main purpose of loan:

1. To buy or build this property
2. To buy or build other property
3. For alterations and additions to this property
4. For alterations and additions to other property
5. To buy motor vehicles
6. For a holiday
7. For another purpose

Percentage of actual care	Equal to number of nights a fortnight
7%	1
14%	2
21%	3
29%	4
36%	5
43%	6
50%	7
57%	8
64%	9
71%	10
79%	11
86%	12
93%	13
100%	14

1. Spends time with another parent or guardian living elsewhere
2. Study related (i.e. boarding school, university student, exchange student)
3. Work/job related
4. Hospital/illness
5. Holiday/travel
6. Other (specify)

SAMPLE ONLY

You may choose more than one of the following:

1. Superannuation
2. Motor vehicle
3. Computer
4. Child care
5. Telephone
6. Housing (rent/mortgage)
7. Household/personal bills
8. Other (please specify)

SAMPLE ONLY

You may choose more than one of the following:

1. Fuel and oil
2. Registration
3. Insurance
4. Tyres
5. Regular vehicle servicing
6. Other items

SAMPLE ONLY

You may choose more than one of the following:

Non-cash Benefits

11. Superannuation (any employer contributions over and above the minimum compulsory contributions)
12. Motor vehicle and/or associated running costs (i.e. petrol, petrol/fuel card, mileage allowance)
13. Computer
14. Child care
15. Telephone and/or contribution to private telephone calls
16. Housing rent free or at less than normal market rent
17. Car park
18. Shares
19. Low interest loans
20. Other (please specify)

11. Newstart Allowance
12. Service Pension (DVA)
(exclude superannuation, e.g. Defence Force Retirement & Death Benefits Scheme (DFRDB))
13. Disability Support Pension (Centrelink)
(exclude Disability Pension, Dept. Veterans' Affairs)
14. Wife Pension (Centrelink)
15. Sickness Allowance
16. Widow Allowance (Centrelink)
17. Special Benefit
18. Partner Allowance
19. Carer Payment
(exclude Carer Allowance)

You may choose more than one of the following:

1. War Widow(er)'s Pension (DVA)
(including income support supplement DVA)
2. Disability Pension (DVA)
3. Parenting Payment
4. Carer Allowance
(Child Disability Allowance and Domiciliary Nursing Benefit)
5. Youth Allowance
6. Austudy/ABSTUDY
7. Overseas Government Pensions/Benefits

You may choose more than one of the following:

1. Pension Education Supplement
2. Mobility Allowance
3. Energy Supplement
4. Any other government payment

SAMPLE ONLY

You may choose more than one of the following:

1. Bank accounts
(including everyday accounts, savings accounts, cheque accounts, term deposit accounts, etc.)
2. Offset accounts
3. Debentures and/or bonds
4. Shares
5. Public Unit Trusts
(such as cash management trusts, property trusts, equity trusts, managed funds etc.)
6. Loans to persons not in this household
7. Any other financial investments
(excluding superannuation)

You may choose more than one of the following:

1. Child support/maintenance
2. Workers' compensation
3. Accident/sickness insurance (e.g. Income protection)

SAMPLE ONLY

You may choose more than one of the following:

1. Married or moved in with a new spouse/partner
2. Separated from a spouse/partner
3. Widowed

SAMPLE ONLY

Examples of credit cards and charge accounts:

- VISA card
- MasterCard
- American Express
- Diner's Club
- Store account cards (e.g. Myer, BP)

Note:

Exclude debit cards including VISA debit and MasterCard debit cards.

You may choose more than one of the following:

1. Preschool/Kindergarten
2. Government Primary School
3. Catholic Primary School
4. Other non-Government Primary School
5. Government Secondary School
6. Catholic Secondary School
7. Other non-Government Secondary School

SAMPLE ONLY

You may choose more than one of the following:

1. A before or after school care program
2. A long day care centre
3. Family day care
4. An occasional care centre
5. Vacation care
6. Any other formal child care arrangement (excluding Preschool/Kinder)

SAMPLE ONLY

You may choose more than one of the following:

1. A long day care centre
2. Family day care
3. An occasional care centre
4. Any other formal child care arrangement (excluding Preschool/Kinder)

SAMPLE ONLY

- A before or after school care program
- A long day care centre
- Family day care
- An occasional care centre
- Vacation care
- Any other formal child care service (excluding Preschool/Kinder)

SAMPLE ONLY

You may choose more than one of the following:

11. Prefer to look after child
12. Child too young/old
13. Transport/distance
14. Cost/too expensive
15. Booked out/no places
16. Time/days available not suitable
17. Child's preference
18. Child has special needs
(illness/disability)
19. Not flexible enough/not available at
short notice
20. Other child care reason (please specify)

You may choose more than one of the following:

1. Shortness of breath
2. Chronic or recurring pain
3. A nervous or emotional condition
4. Long term effects as a result of a head injury, stroke or other brain damage
5. Any other long term condition that requires treatment or medication
6. Any other long term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia etc.

You may choose more than one of the following:

11. Sight problems not corrected by glasses or contact lenses
12. Hearing problems
13. Speech problems
14. Blackouts, fits or loss of consciousness
15. Difficulty learning or understanding things
16. Limited use of arms or fingers
17. Difficulty gripping things
18. Limited use of legs or feet
19. Any condition that restricts physical activity or physical work (e.g. back problems, migraines)
20. Any disfigurement or deformity
21. Any mental illness for which help or supervision is required

1. Self-care

For example:

- bathing/showering
- dressing/undressing
- eating/feeding
- going to the toilet
- bladder/bowel control

2. Mobility

For example:

- moving around away from home
- moving around at home
- getting in or out of a bed or chair

3. Communication in own language

For example:

- understanding/being understood by strangers, friends or family, including use of sign language/lip reading

- Not attending school/further study due to condition
- Need time off school/study
- Attend special classes/school
- Other related difficulties

SAMPLE ONLY

- Type of job that you could do
- Number of hours that you can work
- Finding suitable work
- Needing time off work
- Permanently unable to work

SAMPLE ONLY

This page has been intentionally left blank

Thank you for your help with this survey

SAMPLE ONLY