



H₂O Chelsea Water Survey

Dear Resident(s) of Chelsea,

Thank you for agreeing to participate in H₂O Chelsea's well water survey. **The ultimate aim of this research is to ensure the long-term sustainable management of our water resources.** The survey is designed to collect information regarding water quantity and quality in the Municipality of Chelsea. Your input will provide municipal planners and all residents of Chelsea with a better understanding of Chelsea's groundwater resources.

Your survey response will not be included in your property files at the Municipality. All questionnaire responses are confidential and will be used only by H₂O Chelsea for the purposes of this study.

Please note that the information contained in the report will be presented in such a way **that results for individual properties cannot be inferred.** Results of the survey will be compiled, and a public report of the findings produced early in 2006.

We have put together a collection of questions that we ask you to **please answer honestly and accurately** in order to make the survey as useful as possible. If you are unsure of an answer, please do not answer the question. Some questions may not apply to all respondents, so please only answer those that apply to you.

Once again, we thank you for your participation and encourage everyone to learn more about this and other H₂O Chelsea initiatives. Please see the fact sheet contained in this survey package for more information about the Water Survey and our other water-monitoring and education programs.

Sincerely,

H₂O Chelsea Water Survey, 2005
100, chemin Old Chelsea, Chelsea (Québec) J9B 1C1
(819)827-1124, extension 226

Surname : _____ Given name(s) : _____

Street No : _____ Street : _____ Postal Code : _____

E-mail* : _____ Telephone : _____

* By providing us with your email address, H₂O Chelsea will be able to forward you updates regarding this project and other water research initiatives. We do not share your information with any other organization.

Section 1: Residential Information

1.1 Are you or your spouse/partner the owner of this residence?

Yes No

1.2a Is this your permanent place of residence?

Yes No

1.2b If this is not your permanent place of residence, please check which season(s) you primarily spend time at this residence.

Winte Spring Summer Fall
Other : _____
(e.g. weekends)

1.2c How long have you been living here?

1-2 years 3-5 years 5-10 years
 10-20 years More than 20 years

1.2d How many people in each age group currently live in the residence?

Less than 4 years # _____
From 4 to 12 years # _____
From 13 to 19 years # _____
From 20 to 65 years # _____
Over 65 years of age # _____

1.2e For how long during the year is this residence occupied?

1 month or less 1-3 months 3-6 months
 6-9 months 9-12 months full year

1.3 What is the size of your property:

_____ (acres) Do not know

If possible, please refer to cadastral documents or your Plan de localisation if you are unsure about the size of your property. These documents are usually presented to you by your notary at the time of purchasing your property

Section 2: Water source information

This section is focused on gaining background information regarding your water source(s). Water sources include all types of wells (dug, sand points and drilled etc.) and intake pipes that draw water from lakes and rivers.

2.1a How many water sources do you have (wells + intakes from lakes + intakes from rivers)?

1 2 3 4 5

2.1b How many wells (surface and/or drilled) do you have on your property?

1 2 3 4 5

2.1c How many of those wells do you actually use?

1 2 3 4 5

2.1d If you have a well that you don't use, why don't you use it?

water quantity problem
 water quality problems
 technical problems (e.g. pump is broken)
 other

(please describe)

Water Source #1

Section 3 :

This section seeks detailed responses regarding each of your water sources. Please complete one Section 3 for each water source that you use. We have included two Section 3 forms. If you require additional copies (because you use more than two water sources), please contact us and we will forward you additional copies at (819)827-1124, extension 226)

Types of Water Use:

3.1a Please indicate the type of water source

- Deep/Drilled well
- Surface/Dug well
- Intake from a river
- Intake from a lake

3.1b Please check off the use(s) of this water source (i.e. check off as many boxes as apply)

- drinking cooking washing
- outdoor use (e.g. lawn watering)

3.1c Do you treat this water before drinking it (e.g. ultraviolet system water softeners)?

- Yes No
- n/a (I do not drink this water)

3.1d If you do treat this water before drinking it, why do you do so?

- one bad water quality test result in the past
 - several bad water quality test results in the past
 - uncomfortable with the idea of drinking untreated water
 - do not know why I treat it
 - other
-

3.1e If you do not use this water source for drinking, what do you use for drinking?

- bottled water
- another water source (i.e. another well, lake or stream intake)

Shared Wells

Please answer questions 3.2a and 3.2b only if the water source is a well.

3.2a Is this well used by more than one residence?

- Yes No

Please refer to your well driller's report for questions 3.3c to 3.3g. Answer only the questions for which the required information is included in your well driller's report. If you are unsure about a question, please leave those question blank and proceed to the next. If you do not have your well driller's report or have not made the measurements yourself recently, please skip questions 3.3c to 3.3i and proceed to question 3.4 (well maintenance) .

3.2b If yes, how many residences share this well?

- 2 3 4 5 More than 5
- Unknown

3.3a. If this water source is a well, do you have the well driller's report?

- Yes No (skip to 3.4)

3.3b. Year Drilled _____ (e.g. 1998)

3.3c. Please indicate

- I. Depth to bedrock _____ meters feet
- II. Depth of hole _____ meters feet
- III. Depth to top of Screen _____ meters feet
- IV. Screen length _____ meters feet
- V. Length of casing _____ meters feet
- VI. Casing diameter _____ meters feet

3.3d. Material used to seal the casing

- cement-bentonite bentonite
- other _____

3.3e. Depth of pump at time of drilling

_____ meters feet

3.3f. Has the depth of the pump been altered since it was first installed?

- yes, it was raised
- yes, it was lowered
- no, never changed
- do not know

3.3g. Static level at time of drilling

_____ meters feet

3.3h. Flow rate at time of drilling

- _____ cubic meters/hour
- _____ gallons/hour
- _____ litres/min
- _____ gallons/min

3.4 If you use a well, what maintenance, retrofitting or repair has been performed on the well? Please check off the appropriate options and indicate the frequency and when the work was done.

Type of maintenance/repair:	# of times in last 20 years (frequency)	Most recent year
<input type="radio"/> Disinfection or shocking of well	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Disinfection of waterlines and plumbing	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Hydrofracturing	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Repair of waterline leak	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Landscaping to eliminate pooling of water around the well	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Replaced the pump	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> pump raised	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> pump lowered	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Drilled the well deeper	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Other, Please specify: _____ _____	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago

Section 3.5: Water shortages

The questions in this section are designed to provide information about the history of water shortages *for this water source*.

3.5a Have you experienced any water shortages so far during 2005?

- Yes No

3.5b If yes, please check off during which season(s) and the frequency and duration of the shortages ?

Please include any additional information regarding experienced water shortages in the comments section at the end of the survey.

Season	Month	Duration of shortage (Number of hours or days)	Frequency of Shortages (times/month)
<input type="radio"/> Winter	<input type="radio"/> December <input type="radio"/> January <input type="radio"/> February <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Spring	<input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Summer	<input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Fall	<input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know

3.6a Did you experience any water shortages during 2004?

- Yes No

3.6b If yes, please check off during which season(s) and the frequency and duration of the shortages ?

Season	Month	Duration of shortage (Number of hours or days)	Frequency of Shortages (times/month)
<input type="radio"/> Winter	<input type="radio"/> December <input type="radio"/> January <input type="radio"/> February <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Spring	<input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Summer	<input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Fall	<input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know

3.7 Do you recall any water shortage(s) before 2004?

- More than a couple of times a year
 Once or twice a year
 Never
 I don't remember

(b) insufficient water from the original water source

- Yes No

(c) Other

Please specify: _____

3.8 Have you ever installed an additional water source (i.e. drilled a second well, or installed an intake from a lake or river) because of:

(a) poor water quality of the original water source

- Yes No

Water Source # 2

Section 3 :

Please complete it only if you use more than one water source. If you do not use more than one water source, please move on to Section 4 on page 11 of the Water Census.

If you require additional copies of this Section 3 form (because you use more than two water sources), please contact us and we will forward you additional copies.

Types of Water Use:

3.1a Please indicate the type of water source

- Deep/Drilled well
- Surface/Dug well
- Intake from a river
- Intake from a lake

3.1b Please check off the use(s) of this water source (i.e. check off as many boxes as apply)

- drinking cooking washing
- outdoor use (e.g. lawn watering)

3.1c Do you treat this water before drinking it (e.g. ultraviolet system water softeners)?

- Yes No
- n/a (I do not drink this water)

3.1d If you do treat this water before drinking it, why do you do so?

- one bad water quality test result in the past
- several bad water quality test results in the past
- uncomfortable with the idea of drinking untreated water
- do not know why I treat it
- other

3.1e If you do not use this water source for drinking, what do you use for drinking?

- bottled water
- another water source (i.e. another well, lake or stream intake)

Shared Wells

Please answer questions 3.2a and 3.2b only if the water source is a well.

3.2a Is this well used by more than one residence?

- Yes No

3.2b If yes, how many residences share this well?

- 2 3 4 5 More than 5
- Unknown

3.3a. If this water source is a well, do you have the well driller's report?

- Yes No (skip to 3.4)

Please refer to your well driller's report for questions 3.3b to 3.3h. Answer only the questions for which the required information is included in your well driller's report. If you are unsure about a question, please leave those question blank and proceed to the next. If you do not have your well driller's report or have not made the measurements yourself recently, please skip questions 3.3b to 3.3h and proceed to question 3.4 (well maintenance) .

3.3b. Year Drilled _____ (e.g. 1998)

3.3c. Please indicate

- I. Depth to bedrock _____ meters feet
- II. Depth of hole _____ meters feet
- III. Depth to top of Screen _____ meters feet
- IV. Screen length _____ meters feet
- V. Length of casing _____ meters feet
- VI. Casing diameter _____ meters feet

3.3d. Material used to seal the casing

- cement-bentonite
- bentonite
- other _____

3.3e. Depth of pump at time of drilling

_____ meters feet

3.3f. Has the depth of the pump been altered since it was first installed?

- yes, it was raised
- yes, it was lowered
- no, never changed
- do not know

3.3g. Static level at time of drilling

_____ meters feet

3.3h. Flow rate at time of drilling

- _____ cubic meters/hour
- _____ gallons/hour
- _____ litres/min
- _____ gallons/min

3.4 If you use a well, what maintenance, retrofitting or repair has been performed on the well? Please check off the appropriate options and indicate the frequency and when the work was done.

Type of maintenance/repair:	# of times in last 20 years (frequency)	Most recent year
<input type="radio"/> Disinfection or shocking of well	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Disinfection of waterlines and plumbing	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Hydrofracturing	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Repair of waterline leak	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Landscaping to eliminate pooling of water around the well	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Replaced the pump	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> pump raised	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> pump lowered	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Drilled the well deeper	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago
<input type="radio"/> Other, Please specify: _____ _____	<input type="radio"/> once <input type="radio"/> several times <input type="radio"/> many times <input type="radio"/> every year	<input type="radio"/> this year <input type="radio"/> last year <input type="radio"/> 2-5 years ago <input type="radio"/> 5-10 years ago <input type="radio"/> more than 10 years ago

Section 3.5: Water shortages

The questions in this section are designed to provide information about the history of water shortages *for this water source*.

3.5a Have you experienced any water shortages so far during 2005?
 Yes No

3.5b If yes, please check off during which season(s) and the frequency and duration of the shortages ?

Please include any additional information regarding experienced water shortages in the comments section at the end of the survey.

Season	Month	Duration of shortage (Number of hours or days)	Frequency of Shortages (times/month)
<input type="radio"/> Winter	<input type="radio"/> December <input type="radio"/> January <input type="radio"/> February <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Spring	<input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Summer	<input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Fall	<input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know

3.6a Did you experience any water shortages during 2004?

- Yes No

3.6b If yes, please check off during which season(s) and the frequency and duration of the shortages ?

Season	Month	Duration of shortage (Number of hours or days)	Frequency of Shortages (times/month)
<input type="radio"/> Winter	<input type="radio"/> December <input type="radio"/> January <input type="radio"/> February <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Spring	<input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Summer	<input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know
<input type="radio"/> Fall	<input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> Don't know	<input type="radio"/> Several hours <input type="radio"/> Several hours to a day <input type="radio"/> Several days <input type="radio"/> More than a week <input type="radio"/> Don't know	<input type="radio"/> Once <input type="radio"/> 2-5 <input type="radio"/> More than 5 <input type="radio"/> Don't know

3.7 Do you recall any water shortage(s) before 2004?

- More than a couple of times a year
 Once or twice a year
 Never
 I don't remember

(b) insufficient water from the original water source

- Yes No

(c) Other

Please specify: _____

3.8 Have you ever installed an additional water source (i.e. drilled a second well, or installed an intake from a lake or river) because of:

(a) poor water quality of the original water source

- Yes No

Section 4: Indoor Water Use

4.1 Please check indicate the number of appliances of each kind in your house and the number of times the appliances are used during an average week.

Appliance	Quantity	Times used/week
<input type="radio"/> Shower		<input type="radio"/> 1 to 10 <input type="radio"/> 11 to 20 <input type="radio"/> 21 to 30 <input type="radio"/> 31 or more
<input type="radio"/> Flushing toilet		<input type="radio"/> 1 to 25 <input type="radio"/> 26 to 50 <input type="radio"/> 51 to 75 <input type="radio"/> 76 to 100 <input type="radio"/> more than 100
<input type="radio"/> Bathtub		<input type="radio"/> 1 to 5 <input type="radio"/> 6 to 10 <input type="radio"/> 11 to 20 <input type="radio"/> 21 or more
<input type="radio"/> Dishwasher		<input type="radio"/> 1 or 2 <input type="radio"/> 3 or 4 <input type="radio"/> 5 or 6 <input type="radio"/> 7 or 8 <input type="radio"/> more than 8
<input type="radio"/> Washing machine		<input type="radio"/> 1 or 2 <input type="radio"/> 3 or 4 <input type="radio"/> 5 or 6 <input type="radio"/> 7 or 8 <input type="radio"/> more than 8
<input type="radio"/> Other <i>specify</i> _____		<input type="radio"/> 1 or 2 <input type="radio"/> 3 or 4 <input type="radio"/> 5 or 6 <input type="radio"/> 7 or 8 <input type="radio"/> more than 8

Section 5: Outdoor Water Use

5.1 Do you have any of the following pools or gardens?

- Outdoor above-ground pool
- Outdoor in-ground pool
- Indoor swimming pool Hot tub/whirlpool
- Greenhouse Fountain Water garden
- Other Please specify _____

5.2 How often are each of the following washed?

- Walkways: Once/week or More Every other week
 Once/month or less Never
- Driveway: Once/week or More Every other week
 Once/month or less Never
- Vehicles : 6 or more times/year 3 to 5 times/yr
 Once or twice/yr Never

Other Please specify:

5.3 My property includes (please check all that apply).

- lawns flower gardens vegetable gardens

5.4 During a typical summer season, how frequently do you irrigate(water) your lawn using water from your well(s)

- Never (skip to 6.1)
- Only when the ground is very dry
- Less than once a week
- 1 – 3 times a week
- 4 – 6 times a week
- Daily

5.5 During a typical summer season, how frequently do you irrigate(water) your flower gardens using water from your well(s)

- Never (skip to 6.1)
- Only when the ground is very dry
- Less than once a week
- 1 – 3 times a week
- 4 – 6 times a week
- Daily

5.6 During a typical summer season, how frequently do you irrigate(water) your vegetable gardens using water from your well(s)

- Never (skip to 6.1)
- Only when the ground is very dry
- Less than once a week
- 1 – 3 times a week
- 4 – 6 times a week
- Daily

5.7 During a typical summer season, what is the average length of time per week that you would run the outdoor hose (i.e. garden hose) in order to irrigate your lawn, flower and vegetable gardens, using water from your well(s)?

- I don't irrigate with well water
- 5-10 minutes 11-30 minutes
- 31-60 minutes 61-120 minutes
- 121-240 minutes 241-480 minutes
- more than 480 minutes I don't know

5.8 What percentage (%) of your property is lawn?

- zero %
- less than 10%
- 10–30 %
- 30–50 %
- 50–75 %
- more than 75%

5.9 What percentage (%) of your property are flower gardens?

- zero %
- less than 10%
- 10–30 %
- 30–50 %
- 50–75 %
- more than 75%

5.10 What percentage (%) of your property are vegetable gardens?

- zero %
- less than 10%
- 10–30 %
- 30–50 %
- 50–75 %
- more than 75%

5.11 Do you use any of the following alternate sources for irrigation water?

Please check all that apply.

- No
- Nearby surface water (stream, pond, river, lake)
- Rain barrel
- Other Please specify _____

Section 6: Personal Feedback

6.1 If the results of this survey indicate that certain areas of Chelsea have an elevated risk of water shortages, would you support water conservation bylaws (e.g. a lawn watering bylaw) in your neighborhood in order to reduce this risk ?

- very strongly support
- strongly support
- mildly support
- mildly oppose
- strongly oppose
- very strongly oppose
- neither support or oppose

6.2a Most urban residents pay for their water and have water meters to record water consumption. Would you support (in principle) a water meter pilot-project designed to determine average household consumption patterns in Chelsea (and that could help raise awareness of how households can reduce their annual water use)?

- very strongly oppose
- strongly oppose
- mildly oppose
- mildly support
- strongly support
- very strongly support
- neither support or oppose

6.2b If a water meter pilot-project was approved, would you be interested in participating (i.e. have a water meter installed on your well for the duration of the project).

- Yes
- No

6.2c If you have concerns of water in Chelsea, is it because of: please check all that apply

- concerns about drinking water quality
- concerns regarding domestic water quantity
- value of my home could be affected by water quality and/or quantity problems
- concerns regarding recreational water quality (e.g. swimming in local lakes)
- concerns regarding recreational water quantity (e.g. not enough water to fill my swimming pool)
- I do not have any significant concerns about water in Chelsea

6.2d Before this census, had you heard about the H₂O Chelsea project?

- Yes
- No

6.2e On a scale of 1-7, how would you grade the H₂O Chelsea project? (please circle)

1 2 3 4 5 6 7
(1= not worthwhile) (7= excellent, very worthwhile)

If you have any questions, comments, or concerns please include them below.