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## Household Travel Survey December and Annual 2022

Please return completed form to  
Tourism and Travel Section  
Central Statistics Office  
Skehard Road  
Cork  
T12 X00E

**Dear Householder,**

I am contacting you on behalf of the Central Statistics Office (CSO) to ask you to complete the Household Travel Survey (HTS). This survey asks about overnight trips and day trips (same-day trips) taken by you or a member of your household in **December 2022**. Participation in this survey is voluntary. The survey only asks about trips taken outside the island of Ireland. It does not ask about trips in the Republic of Ireland or Northern Ireland. The survey also has some questions about overnight trips taken to any destination in 2022.

**Why is it important that you participate?**

Tourism and travel by Irish residents is very important to the economy and is a major source of employment. The information you provide in this questionnaire will help to measure the extent and the economic importance of tourism and travel, and will assist the tourism industry and government to make key decisions about the tourism sector.

**Why is it important to participate - even if you did not travel in December 2022?**

If you have not taken any trips outside the island of Ireland in December 2022, we would still appreciate it if you answered a few questions on the form. Information from people who have not taken any trips is equally important to us and will help us ensure that the figures represent the full picture.

**Did you take any trips in 2022?**

In 2022 we are aware that Covid-19 continued to impact travel. At the end of this form there are three additional questions which ask about all personal overnight trips taken anytime during 2022. Unlike the other questions in the form these trips can be domestic or foreign (which includes the Republic of Ireland and Northern Ireland).

**Why were you selected for this survey?**

Each month 4,600 private households are randomly selected from the CSO household register. The CSO's household register is based on data from public sector databases used for statistical purposes by the CSO under the Statistics Act, 1993.

**What next?**

Please return this form when completed, in the free-post envelope provided, before **13th January 2023**. If you have any queries, please contact us at [tourism@csso.ie](mailto:tourism@csso.ie) or call one of the phone numbers at the top of this form. Thank you in advance for your cooperation regarding this important survey.

**Tá leagan Gaeilge den fhoirm seo le fail ach í a iarraidh ón oifig seo.**

**Legal basis, Statistical Confidentiality and Data Protection**

The Household Travel Survey is conducted by the CSO each month under Section 24 of the Statistics Act, 1993, to provide aggregate statistics relevant to tourism planning and to provide tables required by EU Regulation No 692/2011 on Tourism Statistics. **Please be assured that all information that you provide to the CSO is treated as strictly confidential under the Statistics Act, 1993 and may be used for statistical purposes only.** For information on your Data Protection rights please see the following documentation on the CSO website.

<https://www.csso.ie/en/methods/tn/householdtravelsurvey>

*Pádraig Dalton*  
Pádraig Dalton  
Director General

Please complete this form even if no trips were taken

### Question 1 Household Composition Details

Please complete the following details for each person usually resident in this household.

Person Code	First name	Age	Gender	
			Male	Female
e.g. A	Joe	4 2	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A			<input type="checkbox"/>	<input type="checkbox"/>
B			<input type="checkbox"/>	<input type="checkbox"/>
C			<input type="checkbox"/>	<input type="checkbox"/>
D			<input type="checkbox"/>	<input type="checkbox"/>
E			<input type="checkbox"/>	<input type="checkbox"/>
F			<input type="checkbox"/>	<input type="checkbox"/>
G			<input type="checkbox"/>	<input type="checkbox"/>
H			<input type="checkbox"/>	<input type="checkbox"/>
I			<input type="checkbox"/>	<input type="checkbox"/>

#### What is a trip?

**For the purposes of this survey, a trip is an overnight or same-day trip taken outside the Republic of Ireland or Northern Ireland.**

Please include overnight and same-day trips which were taken outside the island of Ireland for personal or professional purposes e.g. holidays, visiting friends or relatives, business or professional trips, sporting or religious events, medical visits, shopping trips.

Exclude all weekly or more frequent trips that are part of your normal routine.

If you need more information, just follow this link for more details of what trips should be counted - <https://www.cso.ie/en/methods/surveybackgroundnotes/householdtravelsurvey/>

### Question 2 During the month of December 2022, did any member of the household return from any trips outside the Republic of Ireland or Northern Ireland?

2(a) Overnight Trip

Yes ☐ No ☐

2(b) Same-day Trip

Yes ☐ No ☐

If an overnight trip was taken please **continue to Q3**, otherwise please **skip to Q11** on same-day trips.

If you answered no to both overnight and same-day trips, please **skip to Question 17**.



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## Overnight Trips

Please only include overnight trips that any member of the household **returned from** during the month of **December 2022 outside the Republic of Ireland or Northern Ireland.**

**Question 3** For each overnight trip taken during the month of December 2022, where did you (i.e. *members of the household*) return from?

State main destination Country	Example trip	Trip 1	Trip 2	Trip 3	Trip 4
	Spain				

**Question 4** What date in December 2022 did you return from each trip?

Date of Return	DD / MM / YY	DD / MM / YY	DD / MM / YY	DD / MM / YY	DD / MM / YY
	21 / 12 / 22				

**Question 5** How many nights were spent away from home on each trip?

Please enter total nights spent away from home (e.g. 3 people away for 4 nights, then enter 4).

Nights spent away from home?					
	7				

**Question 6** Please identify each individual who went on each trip?

Please circle the letter(s) under each trip, using those allocated to each person in Q1 on page 2, indicating which members of the household went on each trip.

(In the example, Joe went on a trip to Spain so the person code "A" is circled in respect of the person code for Joe in question 1.)	A	A	A	A
	B	B	B	B
	C	C	C	C
	D	D	D	D
	E	E	E	E
	F	F	F	F
	G	G	G	G
	H	H	H	H
	I	I	I	I

**Question 7** What was the main reason for each trip?

Please mark (X) in one box only under each trip.

<b>Personal</b>				
1. Holiday/leisure/recreation	X			
2. Visiting friends/relatives				
3. Other personal (including education & training, work/looking for work, sporting events, health & medical care, religious, shopping)				
<b>Professional</b>				
4. Business & professional (including conference/seminar)				

**Question 8 What was the main type of accommodation used on each trip?**

Please mark (X) in one box only under each trip.

<b>Paid Accommodation</b> (including that paid for by third party)	<b>Example trip</b>	<b>Trip 1</b>	<b>Trip 2</b>	<b>Trip 3</b>	<b>Trip 4</b>
1. Hotel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Guesthouse/B&B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Campsite/caravan park/tent/ rented mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Self-catering holiday centre, youth hostel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Rented accommodation (e.g. house/villa/apartment/room(s) in a private dwelling)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. All other paid accommodation (e.g. Ship or cruise, marinas, health farm, spa)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Free Accommodation</b>					
7. Accommodation provided by friends/relatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Own holiday home/own mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. All other free accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Question 9 For each trip, what was the main type of transportation used in getting to and from the destination?**

Please mark (X) in one box only under each trip.

1. Air	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Waterway (passenger ferry, cruise liner, yacht, rented vessel)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Rail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Bus/Coach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Private motor vehicle (owned or leased, including friends/relatives' car)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Rented motor vehicle (including car-sharing and car-pooling)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Other (including bicycle)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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## Calculating Trip Costs?

The cost of each trip should include all expenditure for each trip (e.g. air fares, taxi fares, accommodation costs) regardless of the method of payment. The cost should cover both payments made by all household members in the travel party and all expenses paid for or reimbursed by others (e.g. employer).

Please exclude any expenditure on housing, land, real estate, goods for resale, donations to charities/institutions or cash presents/payments to relatives and friends who are not part of the travel party.

If you need more information just follow this link for details of what trip costs should be counted  
<https://www.cso.ie/en/methods/surveybackgroundnotes/householdtravelsurvey/>

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### Question 10 How much did each trip cost (€)?

	Example trip	Trip 1	Trip 2	Trip 3	Trip 4
1. Accommodation costs	<input type="text"/> <input type="text"/> , <input type="text" value="8"/> <input type="text" value="7"/> <input type="text" value="5"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	+	+	+	+	+
2. Transport costs to, from and at destination	<input type="text"/> <input type="text"/> , <input type="text" value="7"/> <input type="text" value="9"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	+	+	+	+	+
3. Package Tour or all-inclusive holiday costs	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	+	+	+	+	+
4. Expenditure on valuables (e.g. jewellery, works of art)	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	+	+	+	+	+
5. Expenditure on durable consumer goods (e.g. electronic equipment, cars, boats, mobile homes, caravans, furniture)	<input type="text"/> <input type="text"/> , <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	+	+	+	+	+
6. All other expenditure (e.g. meals, drinks, shopping, excursions)	<input type="text"/> <input type="text"/> , <input type="text" value="7"/> <input type="text" value="2"/> <input type="text" value="2"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	=	=	=	=	=
Total expenditure (sum of 1 to 6)	<input type="text" value="1"/> <input type="text"/> , <input type="text" value="8"/> <input type="text" value="7"/> <input type="text" value="6"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

## Same-day Trips

Remember, please only include same-day trips which are not part of your normal routine, and that took place during the month of **December 2022 outside the Republic of Ireland or Northern Ireland.**

**Question 11** During the month of December 2022, where did you (i.e. members of the household) travel to on same-day trips?

State main destination Country	Example trip	Trip 1	Trip 2	Trip 3	Trip 4
	England				

**Question 12** On what date in December 2022 did each trip take place?

Date of trip	DD / MM / YY	DD / MM / YY	DD / MM / YY	DD / MM / YY	DD / MM / YY
	05 / 12 / 22				

**Question 13** How many hours were spent at the destination on each trip?

Please exclude travel time.

Hours spent at destination?					
	12				

**Question 14** Please identify each individual who went on each trip?

Please circle the letter(s) under each trip, using those allocated to each person in Q1 on page 2, indicating which members of the household went on each trip.

(In the example, Joe went on a trip to England so the person code "A" is circled in respect of the person code for Joe in question 1.)

A	A	A	A	A
B	B	B	B	B
C	C	C	C	C
D	D	D	D	D
E	E	E	E	E
F	F	F	F	F
G	G	G	G	G
H	H	H	H	H
I	I	I	I	I

**Question 15** What was the main reason for each same-day trip?

Please mark (X) in one box only under each trip.

<b>Personal</b>				
1. Holiday/leisure/recreation	X			
2. Visiting friends/relatives				
3. Other personal (including education & training, work/looking for work, sporting events, health & medical care, religious, shopping)				
<b>Professional</b>				
4. Business & professional (including conference/seminar)				



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## Calculating Trip Costs?

If you need more information just follow this link for details of what trip costs should be counted  
<https://www.cso.ie/en/methods/surveybackgroundnotes/householdtravelsurvey/>

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### Question 16 How much was spent on each same-day trip (€)?

	Example trip	Trip 1	Trip 2	Trip 3	Trip 4
1. Transport costs	<input type="text"/> <input type="text"/> , <input type="text"/> 5 <input type="text"/> 5	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	+	+	+	+	+
2. Food & drink costs	<input type="text"/> <input type="text"/> , <input type="text"/> 7 <input type="text"/> 9	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	+	+	+	+	+
3. All other costs (include expenditure on goods and services, excursions)	<input type="text"/> <input type="text"/> , <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 8	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	=	=	=	=	=
Total expenditure (sum of 1 to 3)	<input type="text"/> <input type="text"/> , <input type="text"/> 2 <input type="text"/> 6 <input type="text"/> 2	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

## Annual Trips

Please include **all overnight trips for personal purposes** e.g. holidays, visiting friends or relatives, sporting or religious events, medical visits, shopping trips, that any member of the household returned from **during 2022**. These trips can be **both domestic (within the Republic of Ireland) and foreign (outside the Republic of Ireland and including Northern Ireland)**. Exclude trips for business or professional purposes and all weekly or more frequent trips that are part of your normal routine.

### Question 17 During 2022, did any member of the household return from at least one domestic trip for personal purposes, involving at least one overnight stay?

Please mark (X) in the appropriate boxes for each member of the household.  
 Use more than one box if necessary for each person.

		Person code									
		Example	A	B	C	D	E	F	G	H	I
Domestic personal trip with at least one overnight stay	Yes	<input checked="" 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"/>
	No	<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"/>
If YES, tick if Short trip and/or Long trip	(1-3 nights)	<input checked="" 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"/>
	(4 or more nights)	<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"/>

**Question 18 During 2022, did any member of the household return from at least one foreign trip for personal purposes, involving at least one overnight stay?**

Please mark (X) in the appropriate boxes for each member of the household.  
Use more than one box if necessary for each person.

		Person code									
		Example	A	B	C	D	E	F	G	H	I
Foreign personal trip with at least one overnight stay	Yes	<input checked="" 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"/>
	No	<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"/>

  

		Example	A	B	C	D	E	F	G	H	I
If YES, tick if Short trip and/or Long trip	(1-3 nights)	<input checked="" 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"/>
	(4 or more nights)	<input checked="" 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"/>

**Question 19 Please give main reasons for not taking any trip with at least one overnight stay for personal purposes in 2022 for each member of the household.**

**Only to be completed if a member of the household has ticked No in both questions 17 and 18.**

Please mark (X) in the appropriate boxes for each member of the household.  
Use more than one box if necessary for each person.

		Person code									
		Example	A	B	C	D	E	F	G	H	I
1. Financial reasons (e.g. no money available/cannot afford to go)	<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"/>
2. Lack of free time due to family commitments	<input checked="" 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"/>
3. Lack of free time due to work or study commitments	<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"/>
4. Health reasons or reduced mobility	<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"/>
5. Prefer to stay at home, no motivation to travel	<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"/>
6. Safety	<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"/>
7. Other reasons	<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"/>

**Question 20 How many minutes did it take you to complete the form?**

<input type="text"/>	<input type="text"/>	<input type="text"/>
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**We really appreciate the time you took to participate in this important survey.**

**Please return this form in the free-post envelope provided.**



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