

DATE: _____ RATER: _____

Individual

YEAR OF BIRTH: _____

SEX: ___ MAN ___ WOMAN
(Mark with a cross)

DIAGNOSIS:

MOBILITY AIDS:

Indoors: _____

Outdoors: _____

Other: _____

OTHER INFORMATION:

DATE: _____ RATER: _____

Group/population

AGE GROUP(S): _____

DIAGNOSIS/DIAGNOSES:

OTHER INFORMATION:

DATE: _____ RATER: _____

Housing

FORM OF HOUSING (Note: This part is based on current Swedish conditions)
(Mark with a cross)

SPECIAL HOUSING

Specify:

- SERVICE HOUSE
- SERVICE FLAT
- GROUP DWELLING
- OTHER

The apartment is on the following floor (chiefly for multi-dwelling blocks):

- BASEMENT
- GROUND FLOOR
- UP ½ FLIGHT OF STAIRS
- 1ST FLOOR
- 2ND FLOOR
- 3RD FLOOR
- _____

ORDINARY HOUSING

Specify:

- MULTI-DWELLING BLOCK
- ONE-FAMILY HOUSE
- OTHER

The apartment is on the following floor:

- BASEMENT
- GROUND FLOOR
- UP ½ FLIGHT OF STAIRS
- 1ST FLOOR
- 2ND FLOOR
- 3RD FLOOR
- _____

Specify one-family house:

(Mark with a cross)

- SINGLE-STOREY HOUSE WITH BASEMENT
- SINGLE-STOREY HOUSE WITHOUT BASEMENT
- 1½ STOREY HOUSE WITH BASEMENT
- 1½ STOREY HOUSE WITHOUT BASEMENT
- _____

Specify multi-dwelling block:

- "ORDINARY" BLOCK OF FLATS
- ONLY GROUND-FLOOR FLATS
- BUILDING WITH GROUND-FLOOR FLATS AND "ORDINARY" FLOORS ABOVE THIS
- BALCONY ACCESS BLOCK
- GROUND-FLOOR FLAT WITH ITS OWN UPSTAIRS
- TERRACED OR ROW HOUSE
- _____

(Fill out the items below for ALL forms of housing)

APPROXIMATE YEAR OF BUILDING: _____

YEAR OF REBUILDING/RENOVATION: _____

SEASON AND WEATHER CONDITIONS AT TIME OF ASSESSMENT:

HOUSING STANDARD

(Note: This part is based on current Swedish legislation)

THE FOLLOWING NECESSARY HOUSING FUNCTIONS ARE ABSENT

in the dwelling as a whole: (Mark with a cross)

- hygiene area = toilet function
- hygiene area = bath/shower function
- room or separable part of room for everyday socializing
- kitchen/kitchen alcove
- dining place
- place with laundry facilities (either in the flat or communal)
- place for armchairs/sofa
- place for housework (desk etc.)
- storage space (wardrobe etc.)
- entrance area
- store (for storage of seasonal equipment, bicycle, wheelchair, etc.)

The following features ARE ABSENT on the ground floor:

- hygiene area = toilet function
- hygiene area = bath/shower function
- separable bed place
- kitchen/kitchen alcove
- dining place
- place for armchairs/sofa
- storage space (wardrobe etc.)

HOUSING ADAPTATION GRANT RECEIVED: YES NO

(Mark with a cross)

If yes, state year: _____

Type of measures: _____
