

## Questionnaire on Economic and Environmental Impacts of Zoning in Islamabad

### I. General information

- a. Name of the household head? \_\_\_\_\_
- b. Name of the respondent? \_\_\_\_\_
- c. Location of the area? \_\_\_\_\_
- d. Why are you living in this particular house? \_\_\_\_\_
- e. Why are you living in this particular area? \_\_\_\_\_

f. What is the education of the household head in Year?	g. What is your age in Year?	h. Occupation of the Head of the HH?	I. Total number Of school going Children in HH?	j. Per month income of the HH?	k. Total Number of people in the HH?

### II. Environmental Amenities:

Is there any refreshment site near your house?	Yes	No
If yes, what is the distance to the site in km?		
What type of refreshment site is it? Specify		
Is there any landfill/ dumping site near your house?	Yes	No
If yes, what is the distance to the site in km?		

a. Is there greenery outside your house?	Yes	No	
b. Is there any good view near your house?	Yes	No	
c. How many hours daily the sun shine fall on the house			
d. House front to sun?	Yes	No	
e. Is there any lake view in front of your house?	Yes	No	
f. Is there any open drain in front of your house?	Yes	No	
g. Is there any hygiene problem near your House	Yes	No	
If yes, what type of problem are you facing?	<input type="checkbox"/> Flies	Yes	No
	<input type="checkbox"/> Mosquitoes		
	<input type="checkbox"/> Insects		
	<input type="checkbox"/> Cockroaches		
	<input type="checkbox"/> Lizards		
	<input type="checkbox"/> Others		
Is there any polluting industry near your house?	Yes	No	
If yes, what is the distance to the site in Km			

### III: Housing Regulation

- a) What is the plot size \_\_\_\_\_?
- b) Was the land confirmed by any authority for the construction of house? Yes No  
If yes do you have any proof of that?
- c) What is the distance between houses near to your house \_\_\_\_\_?
- d) What is the distance of your house from main road \_\_\_\_\_?

e) Do you have any basement in your house? Yes No

f) What is the height and length of basement \_\_\_\_\_?

g) Have you affected by the construction of other houses close to your home? Yes No

If yes have you made any complaint against them?

h) Due to construction of the house close to your home what type of problems do you face please specify \_\_\_\_\_?

#### **IV: Congestion**

	Questions	Yes	No
a.	Does weather condition effects car speed?		
b.	Do you think heavy rain can cause the road congestions in the area you are living?		
c.	Are you conscious about the traffic signals when you being late?		
d.	Do you feel/face problem of congestion in your area? If “Yes” to question (d) then at what time you feel/face the problem of congestion in your area _____?		

e. What are the main causes of congestion in the area?

a) Tourist Increase

b) Design of the area (zoning)

c) Weather condition

d) Traffic signals time

e) School and office timing

f) Road width

g) If Others, please specify \_\_\_\_\_

f. What is your opinion to solve the congestion problem?

- a) Increase width of the road
- b) Proper parking zone
- c) Fly over
- d) Service road
- e) Following traffic strictly
- f) VIP Movements

**V. Perception of air pollution**

- |  |     |    |
|--|-----|----|
| a. Do you have a car?  | Yes | No |
| b. Do you clean your car every day?  | Yes | No |
| c. Do you feel the dust on the windows of your car?                              | Yes | No |
| d. Do you clean your windows daily?  | Yes | No |
| e. Do you feel the dust on windows of your house?                                | Yes | No |
| f. Do you feel any difficulty in breathing?                                      | Yes | No |
| g. Do you feel smoke in the air?   | Yes | No |
| h. Do you feel irritation due to dust while walking on the road side?            | Yes | No |
| i. Do you suffer any kind of allergy due to dust while walking on the road side? | Yes | No |
| j. Do you feel any smell in the air?   | Yes | No |

**VI. Noise Pollution**

a. Does traffic create noise pollution? Yes No

b. Do you feel noise disturbance, while working or walking in the area? Yes No

c. What kind of irritation you feel from noise? Specify

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d. Which time is noisier during 24 hours? \_\_\_\_\_

**VII. Access to safe drinking water facility**

a. Do you think the water you are using is safe for drinking? Yes No

b. Do you have access to safe drinking water? Yes No

c. Do you have facility of filtration plant close to your home? Yes No

d. Do you use water of the filtration plant? Yes No

e. How much is the distance of filtration plant from your residence in kilometers? \_\_\_\_\_

f. Do you buy safe drinking water from market? Yes No

g. Do you think that contaminated water can cause disease? Yes No

h. What is the source of water pollution?

a) Drainage system

b) pipeline damage

c) If other, specify please

i. Do you take any precautionary measure to make the drinking water safer? Yes  
No

j. Do you boiled the water for drinking purpose? Yes No

k. What is the frequency of water supply per day? Please specify \_\_\_\_\_

l. What is the duration of water per day? Please specify \_\_\_\_\_

m. Do you store the water? Yes    No

**VIII. Environmental behavior**

**a) Visual pollution**

a. Are you satisfied with your environmental condition? Yes    No

b. How do you manage the waste of daily life? Please specify

\_\_\_\_\_

c. Where do you throw the waste of daily use?

- a) In waste collection points      b) In open air  
c) In streets                              d) If other, specify please -----

d. Have you ever seen garbage collector in your street? Yes    No

e. Why do you throw the waste in open air and streets?

- a) Absence of authority regulation  
b) Less Importance to environment  
c) Garbage collector not available  
d) if Other, specify please

f. Do you believe that open air waste/ throwing garbage in streets can cause any health hazard?

Yes      No

If "Yes" then which type of health problems will be face? Please specify \_\_\_\_\_?

g. If proper waste collection points are arranged at your area then are you willing to pay for the facility?

Yes      No

If "Yes" then what would be your willingness to pay for that facility PKRs \_\_\_\_\_ per month?

If "No" then specify the reason \_\_\_\_\_

h. If the services of garbage collector are provided at your area then are you willing to avail that facility?

If "Yes" then what would be your willingness to pay for that facility PKRs \_\_\_\_\_ per month?

If "No" then specify the reason \_\_\_\_\_

**b) Free time spending**

a. Where do you spent most of your free time?

a) Outside home    b) Recreation sites      c) Inside home

b. Why do you spend free time at home?

a) Lack of recreational sites      b) dust in the air      c) noise

d) Congestion      e) others

c. Why do you spend free time outside home? Please specify

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d. Do you get satisfaction when you spend free time outside the home? Yes No

e. Do you willing to avail the facility if the facility of parks provided near to your home?

Yes No

If "Yes" then what would be your willingness to pay for Parks in PKRs \_\_\_\_\_ per month/per day/number of visits per month?

f. Do you willing to avail the facility if the facility of roads provided near to your home? Yes No

If "Yes" then what would be your willingness to pay for the facility of road in PKRs \_\_\_\_\_ per month?

g. Are you willing to pay more if the road quality is improve near to your home?

Yes No

h. Do you willing to avail the facility if the facility of Hospital provided near to your home?

Yes No

If "Yes" then what would be your willingness to pay for the facility in PKRs \_\_\_\_\_ per month?

i. Do you willing to avail the facility if the facility of schools provided near to home?

Yes No



If “Yes” then what would be your willingness to pay for that facility in PKRs \_\_\_\_\_ per month?

j. Are you willing to pay more for the plot or home if the road quality improves? Yes No

k. if the road quality improves then the plot prices increase or decrease?

### **IX. Welfare losses and gains**

#### **a) Cost of pollution**

a. Does noise pollution of traffic affect you? Yes No

If “Yes” how it affect your health?

a) Sleeping disturbance                      b) Mental stress    c) Tiredness hours

d) Hearing impairment                      e) others

b. How much health cost do you bear due to noise pollution? PKRs \_\_\_\_\_ per month (if your health effect has been diagnosed due to noise pollution by doctor/lab test)

c. Does garbage increase in your area? Yes No

If “Yes” how its impacts on environment?

a) Smell    b) Insect, mosquito and flies birth

c) Infection diseases                      d) Other, Specify

d. How much health (Malaria, Typhoid etc) cost do you bear due to garbage pollution?  
PKR\_\_\_\_\_ per months (if your health effect has been diagnosed due to garbage pollution by doctor/lab)

e. How much adaptation cost (Net, Mosquito sprays etc) do you bear due to garbage effects? PKRs\_\_\_\_\_ per month

f. Is there any garbage collector in your area?

If "No" then do you want to hire a garbage collector? Yes      No

g. How much you willing to pay for hiring local body/staff for waste collection?  
PKRs\_\_\_\_\_ per month

h. What is your source of drinking water?

- a) Tape water                      b) Mineral water  
c) Bored water                      d) others specify please \_\_\_\_\_

i. What kind of diseases are most frequently facing by your family because of unsafe water?

- a) Cholera                      b) Diarrhea                      c) Malaria  
d) Typhoid                      e) others, specify

j. Do you think that the water you are using is safe for drinking? Yes      No

k. How much health (Cholera, Diarrhea etc) cost do you bear due to water pollution?  
PKR\_\_\_\_\_ per months (if your health effect has been diagnosed due to water pollution by doctor/lab)

l. Does air pollution is increase in your area? Yes      No



b. How much you spent on children education from your income? PKRs \_\_\_\_\_

Per month.

**d) Accessibility to health facility**

a. Where do you have most of your treatment? \_\_\_\_\_

b. How much additional burden do you have if you get treatment from outside of your area?

## **Appendix\_ B**

### **Questionnaire for property dealer**

#### **I. General information**

- a. What is your name? \_\_\_\_\_
- b. What is your office name? \_\_\_\_\_
- c. Location of your office? \_\_\_\_\_

#### **II. Information about plot**

- a. What is the price per Marla in your area?
- b. What is the price of corner plot?
- c. If boulevard near to the plot then what would be the price of the plot?
- d. What is the price if plot is near to the road?
- e. What is the price if plot is near to the market?

- f. What is the price if plot is near to the electric line?
- g. What is the price if plot is near to the stream?
- h. What is the price if plot is near to the mosque?
- I. What is the price if plot is near to the graveyard?
- j. What is the price if condition of the plot is not good (depression, mean plots in kaddas)?
- k.** What is the price of commercial plot?