## Survey report for domestic unit

Name:	Designation:	Date:

## Area=(gali no./road/bazaar/colony/locality):

SI. no.	Name of head of the family	H. no.	Mobile no.	Using LPG Y/N?	If uesd, Source of Supply?	Single/ Double?	Require more than 12 refill Y/N?	Do you know about PLL Y/N?	If yes , Source of Information?	Conn. Req. Y/N?	If no, why?	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13