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| 6B | | PART I – PRESENCE/AVAILABILITY OF AGRICULTURAL, AQUACULTURAL, AND FISHERY FACILITIES, INPUT DEALERS, AND SERVICE PROVIDERS IN THE BARANGAY | | L | |
| C. SERVICE PROVIDER | | | | | |
| In your barangay, is there a/an . . . ? | | | | | |
| 1 | Q1 | veterinary/paraveterinary clinic/service? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | Q2 | mobile veterinary/paraveterinary clinic/service ? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| 2 | Q1 | rental service of farm machinery/equipment? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| 3 | Q1 | financial credit institution: | | | |
| | | i. commercial bank (including rural bank)? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | L ii. government bank? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | iii. cooperative bank? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | iv. microfinance institution? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | v. individual money lender? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | vi. self-help group? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | vii. other sources? SPECIFY _____ | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | | |
| 4 | Q1 | training and/or extension services to farmers and fisherfolks offered by: | | | |
| | | i. cooperative? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | ii. farmers'/fishermen's organization? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | iii. local government unit? | <input type="checkbox"/> 1 Yes | <input type="checkbox"/> 2 No | |
| | | iv. nongovernment organization? | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| | | v. others? SPECIFY _____ | <input type="checkbox"/> 1 Yes, how many? _____ | <input type="checkbox"/> 2 No | |
| PART II – DESTRUCTIVE NATURAL CALAMITY IN THE PAST FIVE YEARS | | | | | |
| Q1 During the past five years, that is, from January 2008 to December 2012, did your barangay experience destructive natural calamities such as a/an . . . | | | | | |
| 1 | | typhoon? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 2 | | flood? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 3 | | earthquake? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 4 | | volcanic eruption? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 5 | | tsunami? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 6 | | landslide/mudslide? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 7 | | infestation/animal disease? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 8 | | drought? | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | |
| 9 | | others, SPECIFY _____ | <input type="checkbox"/> 1 Yes, how many times? _____ | <input type="checkbox"/> 2 No | J |
| PART III – DOMINANT TERRAIN OF THE BARANGAY | | | | | |
| Q1 What is the dominant terrain of your barangay ? | | | | | |
| | <input type="checkbox"/> 1 coastal | | <input type="checkbox"/> 3 plain | | |
| L | <input type="checkbox"/> 2 mountainous/hilly | | <input type="checkbox"/> 4 others, SPECIFY _____ | | J |
| REMARKS: | | | | | |
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