

Copy of Activity 3: Ongoing Supplier performance

Actions & Resources: appoint & train one volunteer per camp to record this information on each depot, one day per week. This work continues for as long as people are provided with LPG.

1. Enumerator's name:

2. Depot location:

3. Date:

Example: December 15, 2012

4. Please choose 10 cylinders and 1) write empty weight of cylinders (printed on the cylinder), and 2) weight the cylinder and write the results in kg. (example: 24.521 / 24.500 / 24.300 / etc.)

Mark only one oval per row.

	Empty cylinder	Cylinder weight
Cylinder 1	<input type="radio"/>	<input type="radio"/>
Cylinder 2	<input type="radio"/>	<input type="radio"/>
Cylinder 3	<input type="radio"/>	<input type="radio"/>
Cylinder 4	<input type="radio"/>	<input type="radio"/>
Cylinder 5	<input type="radio"/>	<input type="radio"/>
Cylinder 6	<input type="radio"/>	<input type="radio"/>
Cylinder 7	<input type="radio"/>	<input type="radio"/>
Cylinder 8	<input type="radio"/>	<input type="radio"/>
Cylinder 9	<input type="radio"/>	<input type="radio"/>
Cylinder 10	<input type="radio"/>	<input type="radio"/>

5. Ask the supplier how many full cylinders are in stock

6. Ask the supplier how many empty cylinders are in stock

7. Ask how many staff are working at the depot everyday

8. Ask staff what is the average time they are working per day

9. Ask staff what is the average length of contract

10. Ask staff how many deliveries they receive per week

11. Ask staff if there are issues with road access

12. Ask staff if there are issues between them and the customers (the refugee households)

Additional questions to be asked when households come for refills.

Survey for households

13. Please measure time taken for 1 household to exchange cylinders

Mark only one oval per row.

	0-5 min	5-10 min	10-20 min	20-40 min	40-60 min	60+ min
Household 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 7	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 8	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 9	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household 10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Ask this household about the quality of the LPG delivery from the supplier. 1) Happy (staff is friendly) 2) it takes too much time to get a refill 3) Staff is not friendly

Check all that apply.

	Happy	Takes too much time	Staff not friendly
Household 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household 10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

