Alaska
Department of
Education

Guide for School Facility Condition Surveys

PRIMARY CONTRIBUTOR

Harley Hightower, AIA
Architect
LCMF, Inc.
Anchorage, Alaska

CONTRIBUTORS

Tim Mearig, AIA
Architect
Alaska Department of Education
Juneau, Alaska

Edwin Crittenden, FAIA
Educational Facilities Consultant
Alaska Department of Education
Anchorage, Alaska

Michael Morgan, PMP
Facilities Manager
Alaska Department of Education
Juneau, Alaska

ACKNOWLEDGEMENTS

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Directions for Use

Introduction

This publication is provided for convenience to establish a minimum requirement for evaluating facilities. The use of this document is not mandatory. Other forms and documents providing this information are acceptable.

The condition survey should begin by review of record documents and completion of a code analysis prior to the on-site survey.

It is anticipated that the condition survey will be accomplished by a team of professionals and/or tradespersons with the necessary expertise to assess the various areas. However, with the exception of the **Regulatory Data** section, most of the checklists could be utilized by experienced maintenance personnel which districts may have on staff.

Formatting

This document is designed to be not only a guide, describing areas of potential concern, but also a source of working checklists for use in actually performing a condition survey. A final condition survey report may either be produced "manually" by filling out information directly on a paper copy or "electronically" by recording information on a copy of the electronic file and printing a paper copy. In either case, the checklist headers, footers and numbering should be adjusted to show the specific information obtained on the building assessed. Some checklist pages such as Exterior Doors and Interior Rooms are expected to be used many times in the report (i.e. one for each item or space). Sequential numbering for these checklists is provided by a letter suffix. If more than 26 checklists are needed for any one category, devise a supplemental numbering system which is workable for your report. Some sample pages of what a final report should look like follow these directions.

Section 1 - **Condition Survey Record** is self explanatory. The information matches much of that found in the CEFPI School Facility Appraisal Guide's **Building Data Record**.

Section 2 - **Regulatory Data**: Codes used for evaluating the facilities shall be referenced. The data listed in the form is not all inclusive and each facility requires analysis based on the particular design and construction. Any code information or discrepancies noted should be provided with code references including title, edition, chapter, section, paragraph, and sub-paragraph.

Survey, reports, and other documentation such as ADA Surveys, AHERA Surveys, Fire Marshal Inspection Reports, and similar documentation shall be referenced under this section of the survey and attached as an appendix if available. Results of these surveys and studies shall be considered in the recommendations and cost summary.

Section 3 - **Site Data**: This section provides for the evaluation of general site conditions as well as areas and equipment which support athletics and play. The latter portion addresses the civil engineering and utility requirements of the building. The use of this section is self explanatory.

Section 4 - **Building Envelope/Structure**: Several forms work together to assess the complete architectural and structural exterior features and systems. In complex buildings, the building should be broken down into discrete areas (e.g. wings, etc.) and separate information obtained for each area. In addition, changes in materials or structural systems may require a separate form be generated. Use as many forms as is necessary.

Directions for Use (Cont.)

Section 5 - **Interior Spaces**: This section is intended to capture all interior information on a room-by-room basis. Three basic types of forms are included: a form for a general room with standard amenities (e.g. classrooms, administrative offices, etc.), a form for general rooms with the addition of plumbing elements (e.g. science labs, art rooms, janitor rooms, etc.) and several forms customized for special use spaces including Corridors/Commons, Kitchens, Shops, Locker Rooms/Restrooms, Auditoriums and Gymnasiums. If additional special use forms are needed (for example, media center, etc.), create one from the other forms or request assistance from the Department's Facilities staff.

Section 6 - **Mechanical**: This section covers general mechanical systems found in various areas of a building. It also uses a form for Mechanical Rooms to gather significant information on the heating, cooling and ventilation systems supplying the building's spaces. Information gathered in Section 5 will augment the information in this section. However, the basic principle is that Section 5 is limited to the visual aspects of the appurtenances of the mechanical systems whereas Section 6 will address the functionality and support for the appurtenance. This section also deals with some specific regulatory data not covered in Section 2

Section 7 - **Electrical**: This section covers electrical systems in similar fashion as Section 6 treats mechanical systems. Information gathered in Section 5 will augment the information in this section. Again, the basic principle is that Section 5 is limited to the visual aspects of the appurtenances of the electrical systems whereas Section 7 will address the functionality and support for the appurtenance. This section, too, deals with some specific regulatory data not covered in Section 2.

Findings and Cost
Upon completion of the condition survey, recommendations shall be provided for all discrepancies and upgrades described. Cost associated with each discrepancy and upgrade shall be provided. Each recommendation shall reference the corresponding item contained in the Condition Survey by section, paragraph, and sub-paragraph designations. A sample page of a Recommendations narrative is included in the examples in the following section.

Supplement and Appendices
Supplements may be included in an Appendix to the Condition Survey report. Appendices may include subjects such as special inspections, engineering calculations, photographs, drawings, and etc.. Floor plans, with building area designations, room identification and door numbers used in the checklists are encouraged.

The checklists, as shown, are very limited in their provision of comment areas. Comments should be added and used as required to explain conditions and/or cover subjects that are not included in the evaluation form. When using the manual method, attach additional sheets. If the checklists in this document are modified electronically, extensive comments may simply be typed into the checklist form (see examples).

Disclaimer
This guide is not considered all inclusive and should be added to based upon the design and construction of each facility and on the structure's condition. Subjects contained in this survey form that are not applicable may also be deleted.

Input is requested from users of this Condition Survey relative to its improvement.

The State of Alaska, Department of Education provides this School Facility Condition Survey as a convenience and assumes no liability for its use.

Examples

Excerpts from a completed School Condition Survey are attached on the following five pages to show the examples of the evaluation and summary forms.

5. Site Utilities

   a. Water
      Supply Source ■ Well   □ River   □ Lake   □Lagoon
                   □ Rainwater Collection   □ Water Haul
      Distance from Building ___220ft___
      Condition   ■ Good   □ Fair   □ Poor

   b. Water Treatment Plant   □ None   ■ Provided
      Type: Sediment Filter_   Capacity ___200gal._____
      Condition   □ Good   ■ Fair   □ Poor

   c. Wastewater
      Type   □ Primary   ■ Secondary   □ Waste Storage/Haul
      Discharge   ■ Lagoon   □ Holding Tank □ Other
      Design Data Capacity_____ Average Daily_____ Daily Peak_____
      Characteristics BODs5_____

   d. Natural/LP Gas   ■ None   □ Provided
      Serving   □ Kitchen   □ Home Economics   □ Shop   □ Other
      Condition   □ Good   □ Fair   □ Poor

   e. Fuel Oil   □ None   ■ Provided
      Capacity: 32,000gal.   Duration (Days): 60 days
      Distance (From Building): 155 feet
      Condition   □ Good   ■ Fair   □ Poor

   f. Comments: Site utilities are well maintained though age is beginning to make this effort very difficult. No major difficulties in water supply have been experienced. Wastewater treatment is marginal; equipment replacement will be required within 5 years. Fuel oil represents some hazard with leaks at threaded pipe joints occurring during freeze/thaw cycles.

6. Miscellaneous

   a. Satellite Dish   □ None   ■Provided
      Condition   □ Good   ■ Fair   □ Poor

   b. Vehicle Storage Structure   ■ None   □ Provided
      Type _____
      Condition   □ Good   □ Fair   □ Poor

Building Envelope/Structure 4.1

FOUNDATIONS

1. Foundation Type

   a. Construction   ☐ Reinforced Concrete   ■ Timber Pile   ☐ Steel Pile
                         ☐ All Weather Wooden Concrete Footing
                         ☐ Masonry On Concrete Footing
                         ☐ Mud Sills   ☐ Other:

   b. Area of
      Building: Gymnasium addition in 1977 (Area B on attached floor plan diagram)

2. Components

   a. Footing   ■ N/A   ☐ Provided   ☐ Size/Material_____

Condition:		Yes	No
	Cracks	☐ Yes	☐ No
	Unsupported areas	☐ Yes	☐ No
	Rot/Decay	☐ Yes	☐ No
	Water Penetration	☐ Yes	☐ No

Comments: _____

   b. Post/Pile   ☐ N/A   ■ Provided   ■ Size/Material: Treated, 12" diameter

Condition:		Yes	No
	Cracks	☐ Yes	■ No
	Heaving/Jacking	■ Yes	☐ No
	Rot/Decay	☐ Yes	■ No

Comments: Previous reports have questioned the reliability of the passive heat pumps that maintain the integrity of the permafrost and the structural requirements for the foundation. The thermoprobes were inspected as part of this condition survey with air temperatures as summarized in Appendix E.

Of the 63 thermoprobes, 13 were operating with indicated temperatures from +6.0 to +17.1 °F. Non-operating probes varied in indicated temperatures from -11.9 to +2.0 °F in the shade with one non-operating probe in the sun indicating +2.1°F. Temperatures were based on assumed emissivity of 0.95. Radiators had varying degrees of rust with accumulations of silt and organic matter caught between the fins; limiting air flow across the fins. These accumulations and rust reduce the heat transfer capacity to an estimated 30-85% of design capacity.

The lower end of the radiators had insufficient support, and, as a result, the upper end of the ¾ inch copper evaporator has a reverse grade on 13 units. Eleven non-operating units and two operating units had reverse grades. Reverse grades reduce the performance of the units to one-fourth of what it would be otherwise. Five units had kinked copper tubing which would further reduce heat transfer out of the ground. One radiator was lying on the ground without support. Thermocouples appear in good condition though female plugs require cleaning.

   c. Stem wall   ■ N/A   ☐ Provided   ☐ Size/Material_____

Condition:		Yes	No
	Cracks	☐ Yes	☐ No
	Unsupported Areas	☐ Yes	☐ No
	Rot/Decay	☐ Yes	☐ No
	Water Penetration	☐ Yes	☐ No

FOUNDATIONS - PAGE 2

Comments: _____

d.   Water/Dampproof ■ N/A   ☐ Provided   ☐ Size/Material_____
Condition: ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

e.   Insulation   ■ N/A   ☐ Provided   ☐ Size/Material_____
Condition: ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

f.   Flashings   ■ N/A   ☐ Provided   ☐ Size/Material_____
Condition: ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

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Recommendations

General

Narrative information, recommendations and costs are discussed in the order that they are described in the preceding school facility condition survey forms. Each item is cross-referenced by the section, paragraph and subparagraph number to the survey forms.

Deficiencies Requiring Corrective Action

Item	*cf*	Recommendation	Cost
1. *Stack in Boiler Room*: Review of the record drawings indicate that the boiler stack extends through the roof structure in an unprotected manner. The UBC-91, Table 17A requires one-hour protection of vertical shafts and the UMC-91 requires one-hour protection of boiler stacks.	2.1, A, 13a	*Provide an enclosure for one-hour protection of the boiler stack where it penetrates the ceiling/roof structure.*	$6,500
2. *Draft Stops*: The UBC-91, Sec. 2516(f) requires draft stops in the attics for each 3000sf of area and not to exceed 60' horizontally. Review of record drawings indicates draft stops are not provided.	2.1, A, 13a	*Provide draft stops in accordance with UBC requirements.*	$12,000
3. *Unrated Corridor Walls*: The walls between the classroom and the multipurpose room and exit corridors are not constructed in accordance with one-hour requirements. The walls have one layer of 5/8" gypsum board on each side of framing, however, the gypsum board does not continue above the corridor ceiling. The ceiling is not fire rated.	2.1, A, 16b	*An additional layer of 5/8" gypsum board could be applied to the corridor ceiling or to the wall portions above the ceiling. The ceiling application is probably the most cost effective.*	$15,000
4. *Thermoprobe Inspection*: A detailed inspection of the passive heat pumps was conducted and the results are outlined in the condition survey.	4.1, 2b	*Reconditioning of the system for an anticipated 20 year life under 1a) or 50 years for 1b) as follows:* *1a) Clean all radiators of debris and rust on site, repaint, pressure test, repair where necessary and recharge with CO_2.* *1b) Remove all radiators, transport to Anchorage, sandblast, aluminum coat, fusion epoxy coat, return to site, reconnect to evaporators, pressure test and recharge*	Solution 1a: $58,700 Solution 1b: $93,690

		with CO_2. *2)Evaporators should be extended to raise bottom of radiator above floor level and should be checked for volume. Leaking probes may have ice accumulations in the evaporator which will permanently reduce evaporator capacity in a few probes.* *3) Thermocouples should be checked in late summer along with probe temperatures (from absolute pressures) to better define any subsurface water channels that may have developed during flooding.* *4) Clean thermocouple with a small caliber rifle brush.* *5) For raising the elevation of the building if 1a) is selected, evaporator copper tubing would be cut between the radiator and ground surface and sealed to prevent moisture infiltration. The exposed tubing and cap should be spray painted with reflective orange paint. They should also be protected during building lifting operations. After lifting is completed, evaporator cap would be removed, tubing extended, refinished radiators connected, units pressure tested, recharged and pressures maintained.*	
5. *Seismic and Wind Design*: Based on the structural calculations attached as Appendix C, the structure appears adequate relative to seismic and wind design. The roof is slightly under-designed for current snow load criteria based on very conservative data.	4.1, 3	*Costs are not provided for corrective action on this data.*	Unk.
6. *Door 102 Smoke Gasketing and Latch*: Door requires tight-fitting door with smoke gasketing for conformance with UBC-91, Sec. 3305(g).	4.4a	*Provide smoke gasketing and latching hardware (panic hardware type on this door)*	$1,000
7. *Door 102A Smoke Gasketing and Latch*: Door requires tight-fitting door with smoke gasketing for conformance with UBC-91, Sec. 3305(g).	4.4b	*Provide smoke gasketing and latching hardware (panic hardware type on this door)*	$1,000

Condition Survey Record

1.1

Survey Information

Participants/Team   Contact Information

_____   _____

_____   _____

_____   _____

_____   _____

Dates of Survey:_____ to _____

District Information

District Name: _____

Address: _____

                 _____

                 _____

Telephone: _____

Superintendent: _____

Maintenance Director: _____

Facility Information

Name of School: _____

Address: _____

                _____

                _____

Telephone: _____

Principal: _____

Plant Manager: _____

Original
Construction   _____GSF   _____YR
1st Addition   _____GSF   _____YR
2nd Addition   _____GSF   _____YR
3rd Addition   _____GSF   _____YR

Gross Area: _____

Grades Served: _____

Comments:

Regulatory Data

A. UNIFORM BUILDING CODE DATA (19xx Edition)

1. OCCUPANCY CLASSIFICATION(S)_____

2. TYPE OF CONSTRUCTION_____

3. LOCATION OF PROPERTY (SETBACK FROM PROPERTY LINE)

    North   East   South   West
    _____   _____   _____   _____

4. FIRE RESISTANCE OF EXTERIOR WALLS

    Provided   Allowed   Opening Protection
    N _____   _____   _____
    S _____   _____   _____
    E _____   _____   _____
    W _____   _____   _____

5. FLOOR AREA

    Provided   Allowed
    _____   _____

6. AREA SEPARATIONS

    Required   Provided
    _____Hour   _____Hour

7. HEIGHT/STORIES

    Provided   Allowed
    _____   _____

8. MIXED OCCUPANCY

$$\frac{\text{Actual Group X}}{\text{Allowable Group X}} + \frac{\text{Actual Group E}}{\text{Allowable Group E}} < 1 \quad \frac{X = \text{------ S.F}}{X = \text{------ S.F.}} + \frac{E = \text{----- S.F.}}{E = \text{----- S.F.}} \quad < 1$$

9. SPECIAL HAZARDS

    a. Labs, shops, and similar areas separated by one hour occupancy separations
        ☐ Provided   ☐ Not Provided

    b. Labs in excess of 200 square feet provided with two exits
        ☐ Provided   ☐ Not Provided

    c. Distance to exits in labs
        Provided_____   Allowed <u>75' Maximum</u>

    d. Exterior openings in boiler rooms
        Protected   ☐ Yes   ☐ No / Distance from doors or windows   _____feet

    e. Boiler Room separated by one hour occupancy separation
        ☐ Provided   ☐ Not Provided

10. FIRE ALARM REQUIRED

    ☐ Provided   ☐ Not Provided

11. OCCUPANCY SEPARATIONS

   a. Group E - Div._____/Group_____Div._____

     Required   Provided
     _____Hour   _____Hour

   b. Group A - Div._____/Group_____Div._____

     Required   Provided
     _____Hour   _____Hour

12. AREA SEPARATIONS

Required For Each _____Square Feet
Required _____(No.)   Provided_____(No.)

13. FIRE RESISTIVE REQUIREMENT (For various occupancies)

   a. Group E - Div._____/Group_____Div._____

	Required	Provided
Exterior Bearing Walls	_____Hour	_____Hour
Interior Bearing Walls	_____Hour	_____Hour
Exterior None Bearing Walls	_____Hour	_____Hour
Structural Frame	_____Hour	_____Hour
Permanent Partitions	_____Hour	_____Hour
Shaft Enclosures	_____Hour	_____Hour
Floors & Ceiling/Floors	_____Hour	_____Hour
Exterior Doors & Windows	_____Hour	_____Hour
Stairway Construction	_____Hour	_____Hour

   b. Group A - Div._____/Group_____Div._____

	Required	Provided
Exterior Bearing Walls	_____Hour	_____Hour
Interior Bearing Walls	_____Hour	_____Hour
Exterior None Bearing Walls	_____Hour	_____Hour
Structural Frame	_____Hour	_____Hour
Permanent Partitions	_____Hour	_____Hour
Shaft Enclosures	_____Hour	_____Hour
Floors & Ceiling/Floors	_____Hour	_____Hour
Exterior Doors & Windows	_____Hour	_____Hour
Stairway Construction	_____Hour	_____Hour

14. DOORS (Analyze doors for ratings in area separations, occupancy separations, and rated exitways)

15. DRAFT STOPS

☐ Provided   ☐ Not Provided

16. FIRE STOPS

☐ Provided   ☐ Not Provided

17. EXITS (FROM BUILDING)

Number: _____   Required _____   Provided _____
Distance: _____   Required (Maximum)___ Provided _____
Width: _____   Required _____   Provided _____

18. EXITS (GENERAL)

(Analyze exits from each floor and each room)

19. PLUMBING FIXTURES

  a.   Water Closets: _____   Required _____   Provided _____
  b.   Lavatories: _____   Required _____   Provided _____
  c.   Urinals: _____   Required _____   Provided _____
  d.   Drinking Fountains:___   Required _____   Provided _____

20. AUTOMATIC FIRE EXTINGUISHING SYSTEM

(Analyze Requirements)

21. STAGES AND PLATFORMS

(Analyze Requirements)

22. FIRE EXTINGUISHERS

_____No. Required   _____No. Provided

23. AUTOMATIC FIRE SUPPRESSION SYSTEM

☐ Required   ☐ Not Required
☐ Provided   ☐ Not Provided

B. AHERA SURVEY   **C. ADA SURVEY**

Completed	☐Yes	☐No	Completed	☐Yes	☐No
Attached	☐Yes	☐No	Attached	☐Yes	☐No

Site Data

1. **General Site Information**

   a. Area (Size of Site) _____   S.F. _____ Acres

   b. Topography   ☐ Flat   ☐ Sloping   ☐ Hilly
       Drainage   ☐ Good   ☐ Fair   ☐ Poor

   c. Pavement   ☐ None   ☐ Concrete   ☐ Asphalt
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   d. Side Walks   ☐ None   ☐ Concrete   ☐ Asphalt
                      ☐ Wood   ☐ Gravel
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   e. Landscaping   ☐ Well Maintained ☐ Average   ☐ Not Maintained
       Trees   ☐ None   ☐ Birch   ☐ Alder   ☐ Willow
                    ☐ Spruce   ☐ Cottonwood   ☐ Black Spruce   ☐ Other

   f. Fencing   ☐ None   ☐ Chain Link   ☐ Wood (Type)
       Finish   ☐ Galvanized   ☐ Painted   ☐ Semi Transparent Stain
                    ☐Solid Body Stain ☐ Other
                    ☐ Condition   ☐ Fair   ☐ Poor

   g. Comments_____

       _____

2. **Athletic Fields**

   a. Softball Field   ☐ None   Number
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   b. Baseball Field   ☐ None   Number
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   c. Hockey Rink   ☐ None   Number
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   d. Football Field   ☐ None   Number
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   e. Softball Field   ☐ None   Number
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   f. Comments _____

       _____

3. **Playground Equipment**

   a. Swings   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   b. Slides   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   c. Parallel Bars   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   d. Balance Beam   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   e. Horizontal Ladders   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   f. Horizontal Bars   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   g. Climbing Pole   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   h. Merry-Go-Round   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   i. Other   ☐ None   Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   j. Comments _____

           _____

4. **Site Utility (Municipal or Utility Company Provided)**

   a. Water   Service Line Size _____   Type _____
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   b. Sewer   Waste Line Size _____   Type _____
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   c. Natural Gas   Service Line Size _____   Type _____
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   d. Electricity   ☐ Overhead   ☐ Underground
             Service   _____Amps   _____Volts   _____Phase

   e. Meter Number
             Condition   ☐ Good   ☐ Fair   ☐ Poor

   f. Comments _____

5. Site Utilities (Site Generated/Provided)

a. Water
Supply Source ☐ Well ☐ River ☐ Lake ☐ Lagoon
☐ Rainwater Collection ☐ Water Haul
Distance from Building _____
Condition ☐ Good ☐ Fair ☐ Poor

b. Water Treatment Plant ☐ None ☐ Provided
Type Capacity _____
Condition ☐ Good ☐ Fair ☐ Poor

c. Wastewater
Type ☐ Primary ☐ Secondary ☐ Waste Storage/Haul
Discharge ☐ Lagoon ☐ Holding Tank ☐ Other
Design Data Capacity_____ Average Daily_____ Daily Peak_____
Characteristics BODs5_____

d. Natural/LP Gas ☐ None ☐ Provided
Serving ☐ Kitchen ☐ Home Economics ☐ Shop ☐ Other
Condition ☐ Good ☐ Fair ☐ Poor

e. Fuel Oil ☐ None ☐ Provided
Capacity Gallons Duration (Days)
Distance (From Building)
Condition ☐ Good ☐ Fair ☐ Poor

f. Comments _____

_____

6. Miscellaneous

a. Satellite Dish ☐ None ☐Provided
Condition ☐ Good ☐ Fair ☐ Poor

b. Vehicle Storage Structure ☐ None ☐ Provided
Type _____
Condition ☐ Good ☐ Fair ☐ Poor

Building Envelope/Structure

FOUNDATIONS

1. **Foundation Type**

   a. Construction   ☐ Reinforced Concrete   ☐ Timber Pile   ☐ Steel Pile
   ☐ All Weather Wooden Concrete Footing
   ☐ Masonry On Concrete Footing
   ☐ Mud Sills   ☐ Other:

   b. Area of
   Building   _____

         _____

2. **Components**

   a. Footing   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: Cracks   ☐ Yes   ☐ No
               Unsupported areas   ☐ Yes   ☐ No
               Rot/Decay   ☐ Yes   ☐ No
               Water Penetration   ☐ Yes   ☐ No

   Comments: _____

   b. Post/Pile   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: Cracks   ☐ Yes   ☐ No
               Heaving/Jacking   ☐ Yes   ☐ No
               Rot/Decay   ☐ Yes   ☐ No

   Comments: _____

   c. Stem wall   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: Cracks   ☐ Yes   ☐ No
               Unsupported Areas   ☐ Yes   ☐ No
               Rot/Decay   ☐ Yes   ☐ No
               Water Penetration   ☐ Yes   ☐ No

   Comments: _____

   d. Water/Dampproof   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   e. Insulation   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   f. Flashings   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

Building Envelope/Structure

STRUCTURAL FLOOR

1. **Floor Structure Type**

   a. Construction ☐ Reinforced Concrete Slab On Grade
                     ☐ Reinforced Structural Concrete Slab On Grade
                     ☐ Concrete/Metal Deck/Metal Joists
                     ☐ Plywood Deck On Wood Trusses
                     ☐ Plywood Deck On Wood Joist
                     ☐ Concrete Deck On Plywood On Wood Structure
                     ☐ Other:

   b. Area of   _____
       Building
                    _____

2. **Components**

   a. Beams   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: Cracks   ☐ Yes   ☐ No
               Unsupported ends   ☐ Yes   ☐ No
               Rot/Decay   ☐ Yes   ☐ No
               Deflection   ☐ Yes   ☐ No

   Comments: _____

   b. Joists ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: Cracks   ☐ Yes   ☐ No
               Unsupported ends   ☐ Yes   ☐ No
               Rot/Decay   ☐ Yes   ☐ No
               Deflection   ☐ Yes   ☐ No

   Comments: _____

   c. Deck   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: Cracks   ☐ Yes   ☐ No
               Deflection   ☐ Yes   ☐ No
               Rot/Decay   ☐ Yes   ☐ No

   Comments: _____

   d. Insulation   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   e. Vapor Barrier   ☐ N/A   ☐ Provided   ☐ Size/Material_____
   Condition: ☐ Good   ☐ Fair   ☐ Poor

       Comments: _____

Building Envelope/Structure

4.3x

EXTERIOR WALLS/COLUMNS

1. Exterior Wall Type

a. Construction   ☐ Monolithic   ☐ Post & Beam   ☐ Light Frame

b. Material   ☐ Concrete   ☐ Masonry   ☐ Steel
            ☐ Timber   ☐ Wood   ☐ Other:

c. Area of   _____
     Building

           _____

2. Components

a. Exterior Cladding   ☐ Concrete   ☐ Masonry/Tile   ☐ Metal. Panel
            ☐ Plaster   ☐ Hardboard   ☐ Wood Panel
            ☐ Wood (board)   ☐ EIFS   ☐ Other:

Condition: Cracks/Gaps   ☐ Yes   ☐ No
          Adequate Flashing   ☐ Yes   ☐ No
          Rot/Decay   ☐ Yes   ☐ No
          Stains   ☐ Yes   ☐ No

Comments: _____

b. Exterior Trim   ☐ Wood   ☐ Hardboard   ☐ Metal   ☐ Other:
Condition: Warping/Cracks   ☐ Yes   ☐ No
          Rot/Decay   ☐ Yes   ☐ No
          Stains   ☐ Yes   ☐ No

Comments: _____

c. Exterior Finish   ☐ Paint   ☐ Stain   ☐ Clear Sealer
Condition: Flaking   ☐ Yes   ☐ No
          Mold/Mildew   ☐ Yes   ☐ No
          Stains   ☐ Yes   ☐ No
          Deteriorated   ☐ Yes   ☐ No

Comments: _____

d. Insulation   ☐ N/A   ☐ Provided   ☐ Size/Material_____
Condition: ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

e. Vapor Barrier   ☐ N/A   ☐ Provided   ☐ Size/Material_____
Condition: ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

DOORS

1. **Basic Information**

   a.   Door No._____   Size_____   Fire Rating_____

   b.   Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other:_____

2. **Components**

   a.   Door Unit   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other:_____
   Condition: Splits/Gaps   ☐ Yes   ☐ No
                        Binding   ☐ Yes   ☐ No
                        Rust/Decay   ☐ Yes   ☐ No
                        Stains/Poor Finish   ☐ Yes   ☐ No

   Comments: _____

   b.   Frame   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other:_____
   Condition: Loose   ☐ Yes   ☐ No
                        Rust/Decay   ☐ Yes   ☐ No
                        Stains/Poor Finish   ☐ Yes   ☐ No

   Comments: _____

   c.   Weather-stripping ☐ N/A   ☐ Provided   ☐ Material_____
   Condition: ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   d.   Insulation   ☐ N/A   ☐ Provided   ☐ Thickness/Material_____
   Condition: ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   e.   Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Threshold	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐

   Comments _____

   _____

Building Envelope/Structure 4.5x

WINDOWS/LOUVERS

1. **Basic Information**

   a. Window No._____ Size_____ Fire Rating_____

   b. Type ☐ Fixed ☐ Tilt/Turn ☐ Double Hung ☐ Single Hung

   ☐ Sliding ☐ Awning ☐ Combination ☐ Other:_____

2. **Components**

   a. Glazing ☐ Single Pane ☐ Double Pane ☐ Triple Pane ☐ Wire

   ☐ Plastic ☐ Lexan ☐ Laminated ☐ Other:_____

   Condition: Breakage ☐ Yes ☐ No

   Scratched/Unclear ☐ Yes ☐ No

   Condensation ☐ Yes ☐ No

   Poor Thermal Properties ☐ Yes ☐ No

   Comments: _____

   b. Frame ☐ Plastic ☐ Aluminum ☐ Wood ☐ Steel

   ☐ Alum. Clad ☐ Vinyl Clad ☐ Other:_____

   Condition: Binding ☐ Yes ☐ No

   Rust/Decay ☐ Yes ☐ No

   Stains/Poor Finish ☐ Yes ☐ No

   Comments: _____

   c. Weather-stripping ☐ N/A ☐ Provided ☐ Material_____

   Condition: ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   e. Hardware

Item	Provided	Type	Quantity	Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Latches	☐	_____	_____	☐	☐	☐
Counter-weights	☐	_____	_____	☐	☐	☐
Other_____	☐	_____	_____	☐	☐	☐

   Comments _____

3. **Louvers**

   a. Material ☐ Steel ☐ Aluminum ☐ Wood ☐ Other:_____

Finish	☐	_____	_____	☐	☐	☐
Screen	☐	_____	_____	☐	☐	☐
Sealants	☐	_____	_____	☐	☐	☐
Other_____	☐	_____	_____	☐	☐	☐

   Comments: _____

Building Envelope/Structure 4.6x

ROOF

1. **Roof Structure Type**

   a. Construction ☐ Metal Deck on Metal Trusses/Joists
      ☐ Plywood or Lumber Deck On Wood Trusses/Joists
      ☐ Plywood or Lumber Deck on Metal Trusses/Joists
      ☐ Concrete on Metal Deck on Metal Trusses/Joists
      ☐ Other:_____

   b. Slope _____in 12

   c. Area of
      Building: _____

2. **Components**

   a. Beams ☐ Concrete ☐ Metal ☐ Wood Other_____
   Condition: Unsupported Ends ☐ Yes ☐ No
   Rot/Decay ☐ Yes ☐ No
   Deflection ☐ Yes ☐ No

   Comments: _____

   b. Trusses/Joists ☐ Concrete ☐ Metal ☐ Wood Other_____
   Condition: Unsupported Ends ☐ Yes ☐ No
   Rot/Decay ☐ Yes ☐ No
   Deflection ☐ Yes ☐ No

   Comments: _____

   c. Deck ☐ Concrete ☐ Metal ☐ Wood Other_____
   Condition: Cracks ☐ Yes ☐ No
   Rot/Decay ☐ Yes ☐ No
   Deflection ☐ Yes ☐ No

   Comments: _____

   d. Roofing ☐ Preformed Metal Roofing ☐ Built Up ☐ Asphalt Shingle
      ☐ Single Ply Membrane ☐ IRMA ☐ Other_____
   Condition: Failures/Splits/Cracks ☐ Yes ☐ No ☐ N/A
   Blistered ☐ Yes ☐ No ☐ N/A
   Corrosion ☐ Yes ☐ No ☐ N/A
   Deterioration ☐ Yes ☐ No ☐ N/A

   Comments: _____

   e. Penetrations ☐ Curbs ☐ Flashing Boots ☐ Pitch Pans Other_____
   Condition: Deterioration ☐ Yes ☐ No ☐ N/A
   Corrosion ☐ Yes ☐ No ☐ N/A

   Comments: _____

ROOF - PAGE 2

f.   Insulation   ☐ N/A   ☐ Provided   ☐ Size/Material_____

Condition: ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

g.   Vapor Barrier   ☐ N/A   ☐ Provided   ☐ Size/Material_____

Condition: ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

h. Roof Drains	☐ Interior	☐ Eave	☐ Gutter	☐ Other_____
Material	☐ Metal	☐ Wood	☐ Plastic	☐ Other_____
Condition: Missing Components	☐ Yes	☐ No	☐ N/A	
Debris/Vegetation	☐ Yes	☐ No	☐ N/A	
Corrosion	☐ Yes	☐ No	☐ N/A	
Damage	☐ Yes	☐ No	☐ N/A	

Comments: _____

Interior Spaces

INTERIOR ROOMS (TYPE 1 - STANDARD)

1. Basic Information

    a. Room Number: _____ Room Identification:_____

    b. Area (Size): _____ S.F.

    c. Occupant Load: _____

    d. No. of Exits: Required _____   Provided _____

2. Room Enclosure

	Material	**Finish**

a. Walls

Condition   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

Comments: _____

b. Floor

Condition   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

Comments: _____

c. Base

Condition   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

Comments: _____

d. Ceiling

Condition   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

Comments: _____

3. Door Information

    a. Door No._____   Size: _____   Fire Rating: _____

    b. Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other: _____

    c. Material   ☐ Hollow Metal ☐ Aluminum ☐ Wood   ☐ Other: _____

    Condition   ☐ Good   ☐ Fair   ☐ Poor

    Comments: _____

    d. Frame Type ☐ Hollow Metal ☐ Aluminum ☐ Wood   ☐ Other

    Condition   ☐ Good   ☐ Fair   ☐ Poor

    Comments: _____

INTERIOR ROOMS (TYPE 1 - STANDARD) - PAGE 2

e. Hardware

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Threshold	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Power Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

Comments _____

4. Amenities

a. Window Coverings   ☐ Yes   ☐ No
   Type   ☐ Drapes   ☐ Blinds   ☐ Other: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

b. Chalkboards   ☐ Yes   ☐ No   ☐ Quantity:_____
   Size _____x_____   Material: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

c. Casework   ☐ Yes   ☐ No   ☐ Quantity:_____
   Size _____x_____   Material: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

d. Lockers   ☐ Yes   ☐ No   ☐ Quantity:_____
   Size _____x_____   Material: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

Comments _____

5. Mechanical/Electrical

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Baseboard Units	☐	_____	_____	☐	☐	☐
Supply Air Grills	☐	_____	_____	☐	☐	☐
Return Air Grills	☐	_____	_____	☐	☐	☐
Lighting	☐	_____	_____	☐	☐	☐
Conv. Outlets	☐	_____	_____	☐	☐	☐
Television Outlets	☐	_____	_____	☐	☐	☐
Computer Outlets	☐	_____	_____	☐	☐	☐

Comments _____

INTERIOR ROOMS (TYPE 2 - DAMP)

1. **Basic Information**

   a. Room Number: _____   Room Name:_____   Area (Size): _____ sf.
   b. Occupant Load: _____   No. of Exits: Required: _____   Provided _____

2. **Room Enclosure**

	Material	**Finish**

   a. Walls   _____   _____
   Condition ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   b. Floor   _____   _____
   Condition ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   c. Base   _____   _____
   Condition ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   d. Ceiling   _____   _____
   Condition ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

3. **Door Information**

   a. Door No._____   Size: _____   Fire Rating: _____

   b. Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other: _____

   c. Material   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   d. Frame Type   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other
   Condition   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   e. Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐

INTERIOR ROOMS (TYPE 2 - DAMP) - PAGE 2

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Threshold	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

Comments _____

4. Amenities

a. Window Coverings   ☐ Yes   ☐ No
     Type   ☐ Drapes   ☐ Blinds   ☐ Other: _____
     Condition   ☐ Good   ☐ Fair   ☐ Poor

b. Chalkboards   ☐ Yes   ☐ No   ☐ Quantity:_____
     Size   _____x_____   Material: _____
     Condition   ☐ Good   ☐ Fair   ☐ Poor

c. Shelving Casework   ☐ Yes   ☐ No   ☐ Quantity:_____
     Size   _____x_____   Material: _____
     Condition   ☐ Good   ☐ Fair   ☐ Poor

d. Cabinet Casework   ☐ Yes   ☐ No   ☐ Quantity:_____
     Size   _____x_____   Material: _____
     Condition   ☐ Good   ☐ Fair   ☐ Poor

e. Lockers   ☐ Yes   ☐ No   ☐ Quantity:_____
     Size   _____x_____   Material: _____
     Condition   ☐ Good   ☐ Fair   ☐ Poor

Comments _____

5. Mechanical/Electrical

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Baseboard Units	☐	_____	_____	☐	☐	☐
Supply/Return Grill	☐	_____	_____	☐	☐	☐
Sinks/Faucets	☐	_____	_____	☐	☐	☐
Faucets	☐	_____	_____	☐	☐	☐
Hoods	☐	_____	_____	☐	☐	☐
Lighting	☐	_____	_____	☐	☐	☐
Conv. Outlets	☐	_____	_____	☐	☐	☐
Television Outlets	☐	_____	_____	☐	☐	☐
Computer Outlets	☐	_____	_____	☐	☐	☐

Comments _____

Interior Spaces   5.3x

CORRIDORS/COMMONS

1. **Basic Information**

   a. Room Number: _____   Room Name:_____   Area (Size): _____ sf.

2. **Enclosure**

	Material	**Finish**

   a. Walls
   Condition   _____   _____
   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   b. Floor
   Condition   _____   _____
   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   c. Base
   Condition   _____   _____
   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   d. Ceiling
   Condition   _____   _____
   ☐ Good ☐ Fair ☐ Poor   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

3. **1st Door Information**

   a. Door No._____   Size: _____   Fire Rating: _____
   b. Type   ☐ Hinged Leaf ☐ Coiling ☐ Sectional ☐ Other: _____
   c. Material   ☐ Hollow Metal ☐ Aluminum ☐ Wood ☐ Other: _____
   Condition   ☐ Good ☐ Fair ☐ Poor
   d. Frame Type   ☐ Hollow Metal ☐ Aluminum ☐ Wood ☐ Other
   Condition   ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   e. Hardware

Item	Provided	Type	Quantity	Good	Fair	Poor
					Condition	
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

CORRIDORS/COMMONS - PAGE 2

4. **2nd Door Information**

   a.   Door No._____   Size: _____   Fire Rating: _____
   b.   Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other: _____
   c.   Material   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor
   d.   Frame Type   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other
   Condition   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   e.   Hardware

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

   Comments _____

5. **Amenities**

   a.   Display Cases   ☐ Yes   ☐ No
        Type   ☐ Recessed   ☐ Freestanding   ☐ Other: _____
        Condition   ☐ Good   ☐ Fair   ☐ Poor

   b.   Lockers   ☐ Yes   ☐ No   ☐ Quantity:_____
        Size   _____x_____ Material: _____
        Condition   ☐ Good   ☐ Fair   ☐ Poor

   c.   Other: _____   ☐ Yes   ☐ No   ☐ Quantity:_____
        Size   _____x_____ Material: _____
        Condition   ☐ Good   ☐ Fair   ☐ Poor

   Comments _____

6. **Mechanical/Electrical**

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Supply/Return Grill	☐	_____	_____	☐	☐	☐
Lighting	☐	_____	_____	☐	☐	☐
Conv. Outlets	☐	_____	_____	☐	☐	☐

   Comments _____

Interior Spaces

5.4x

KITCHEN

1. **Basic Information**

   a.   Room Number: _____   Room Name: **Kitchen**   Area (Size): _____ sf.

2. **Enclosure**

	Material	**Finish**

   a.   Walls
   Condition   _____   _____
   ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   b.   Floor
   Condition   _____   _____
   ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   c.   Base
   Condition   _____   _____
   ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   d.   Ceiling
   Condition   _____   _____
   ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

3. **Door Information**

	1st 2nd		1st 2nd		1st 2nd

   a.   Door No._____/_____   Size: _____/_____   Fire Rating: _____/_____
   b.   Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other: _____
   c.   Material   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor
   d.   Frame Type   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other
   Condition   ☐ Good   ☐ Fair   ☐ Poor
   e.   Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

   Comments: _____

KITCHEN - PAGE 2

4. **Amenities**

   a. Casework/Shelves   ☐ Yes   ☐ No
   Type   ☐ Recessed   ☐ Freestanding   ☐ Other: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

   b. Pantry   ☐ Yes   ☐ No   ☐ Quantity:_____
   Size   _____x_____   Material: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

   c. Other: _____   ☐ Yes   ☐ No   ☐ Quantity:_____
   Size   _____x_____   Material: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor

   Comments _____

5. **Equipment**

Item	Provided	Description	Quantity	Condition		
				Good	Fair	Poor
Cold Storage Room	☐	_____	_____	☐	☐	☐
Refrigeration System	☐	_____	_____	☐	☐	☐
Shelving, Cold Storage	☐	_____	_____	☐	☐	☐
Shelving, Dry Storage	☐	_____	_____	☐	☐	☐
Refrigerator, Reach-in	☐	_____	_____	☐	☐	☐
Freezer, Reach-in	☐	_____	_____	☐	☐	☐
Mixer, 20-quart	☐	_____	_____	☐	☐	☐
Mixer Stand, Mobile	☐	_____	_____	☐	☐	☐
Work Table w/sink	☐	_____	_____	☐	☐	☐
Wall Shelf w/spice rack	☐	_____	_____	☐	☐	☐
Food Preparation Sink	☐	_____	_____	☐	☐	☐
Wall Shelves	☐	_____	_____	☐	☐	☐
Trash Container, Mob.	☐	_____	_____	☐	☐	☐
3-Compartment Sink	☐	_____	_____	☐	☐	☐
Tiered Shelf Unit, Mob.	☐	_____	_____	☐	☐	☐
Ingredient Bin, Mobile	☐	_____	_____	☐	☐	☐
Can Opener	☐	_____	_____	☐	☐	☐
Hand Sink	☐	_____	_____	☐	☐	☐
Exhaust Ventilator	☐	_____	_____	☐	☐	☐
Convection Oven	☐	_____	_____	☐	☐	☐
Range	☐	_____	_____	☐	☐	☐
Equipment Stand	☐	_____	_____	☐	☐	☐
Bulk Milk Dispenser	☐	_____	_____	☐	☐	☐
Mobile Counter	☐	_____	_____	☐	☐	☐
Disposable. Cup Disp.	☐	_____	_____	☐	☐	☐
Exhaust Ventilator	☐	_____	_____	☐	☐	☐
Serving/Work Counter	☐	_____	_____	☐	☐	☐
Hot Food Well Unit	☐	_____	_____	☐	☐	☐
Pass Through Shelf	☐	_____	_____	☐	☐	☐
Microwave Oven	☐	_____	_____	☐	☐	☐

Interior Spaces

5.5x

SHOPS

1. **Basic Information**

   a. Room Number: _____   Room Name: _____   Area (Size): _____ sf.

2. **Enclosure**

	Material	**Finish**

   a. Walls
   Condition   _____   _____
        ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   b. Floor
   Condition   _____   _____
        ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   c. Base
   Condition   _____   _____
        ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   d. Ceiling
   Condition   _____   _____
        ☐ Good   ☐ Fair   ☐ Poor   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

3. **Door Information**

   a. Door No._____   Size: _____   Fire Rating: _____
   b. Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other: _____
   c. Material   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other: _____
     Condition   ☐ Good   ☐ Fair   ☐ Poor
   d. Frame Type   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other
     Condition   ☐ Good   ☐ Fair   ☐ Poor
   e. Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

   Comments: _____

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4. Amenities

a. Casework/Shelves   ☐ Yes   ☐ No
    Type   ☐ Recessed   ☐ Freestanding   ☐ Other: _____
    Condition   ☐ Good   ☐ Fair   ☐ Poor

b. Chalkboards   ☐ Yes   ☐ No   ☐ Quantity:_____
    Size   _____x_____   Material: _____
    Condition   ☐ Good   ☐ Fair   ☐ Poor

c. Dust Collection System   ☐ Yes   ☐ No   ☐ Quantity:_____
    Size   _____x_____   Material: _____
    Condition   ☐ Good   ☐ Fair   ☐ Poor

d. Other: _____   ☐ Yes   ☐ No   ☐ Quantity:_____
    Size   _____x_____   Material: _____
    Condition   ☐ Good   ☐ Fair   ☐ Poor

5. Mechanical/Electrical

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
HVAC	☐	_____	_____	☐	☐	☐
Lighting	☐	_____	_____	☐	☐	☐
220v. Power	☐	_____	_____	☐	☐	☐

Comments _____

6. Equipment

Item	Provided	Description	Quantity	Condition		
				Good	Fair	Poor
Drill Press	☐	_____	_____	☐	☐	☐
Belt Sander	☐	_____	_____	☐	☐	☐
Table Saw	☐	_____	_____	☐	☐	☐
Band Saw	☐	_____	_____	☐	☐	☐
Radial Arm Saw	☐	_____	_____	☐	☐	☐
Lathe	☐	_____	_____	☐	☐	☐
Work Benches	☐	_____	_____	☐	☐	☐
Hand Tool Storage	☐	_____	_____	☐	☐	☐
Welding Booth	☐	_____	_____	☐	☐	☐
Welder	☐	_____	_____	☐	☐	☐
Bench Grinder	☐	_____	_____	☐	☐	☐
Air Compressor	☐	_____	_____	☐	☐	☐
Parts Vat	☐	_____	_____	☐	☐	☐
Power Tool Storage	☐	_____	_____	☐	☐	☐

l. Comments _____

LOCKER ROOMS/RESTROOMS

1. **Basic Information**

   a. Room Number: _____   Room Name: _____   Area (Size): _____ sf.

2. **Enclosure**

	Material	**Finish**

   a. Walls
   Condition   _____   □ Good □ Fair □ Poor   _____   □ Good □ Fair □ Poor

   Comments: _____

   b. Floor
   Condition   _____   □ Good □ Fair □ Poor   _____   □ Good □ Fair □ Poor

   Comments: _____

   c. Base
   Condition   _____   □ Good □ Fair □ Poor   _____   □ Good □ Fair □ Poor

   Comments: _____

   d. Ceiling
   Condition   _____   □ Good □ Fair □ Poor   _____   □ Good □ Fair □ Poor

   Comments: _____

3. **Door Information**

   a. Door No._____   Size: _____   Fire Rating: _____
   b. Type   □ Hinged Leaf   □ Coiling   □ Sectional   □ Other: _____
   c. Material   □ Hollow Metal   □ Aluminum   □ Wood   □ Other: _____
   Condition   □ Good   □ Fair   □ Poor
   d. Frame Type   □ Hollow Metal   □ Aluminum   □ Wood   □ Other
   Condition   □ Good   □ Fair   □ Poor
   e. Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	□	_____	_____	□	□	□
Lockset	□	_____	_____	□	□	□
Closer	□	_____	_____	□	□	□
Kickplate	□	_____	_____	□	□	□
Mullion	□	_____	_____	□	□	□
Panic Bar	□	_____	_____	□	□	□
Push/Pull	□	_____	_____	□	□	□
Stop/Hold	□	_____	_____	□	□	□
Smoke Gaskets	□	_____	_____	□	□	□

   Comments: _____
   _____

LOCKER ROOM/RESTROOMS - PAGE 2

4. Amenities

   a. Toilet Partitions ☐ Floor mount ☐ Wall hung ☐ Ceil. Hung ☐ None
      Type ☐ Metal ☐ Laminate ☐ Solid Plastic ☐ Other: _____
      Condition ☐ Good ☐ Fair ☐ Poor Comments: _____

   a. Toilet Accessories ☐ PTD/Receptacle ☐ Mirrors ☐ San. Napkin ☐ TP Dispenser
      ☐ Soap Dispenser ☐ Hand Dryers ☐ Seat Covers ☐ Other: _____
      Condition ☐ Good ☐ Fair ☐ Poor

Comments _____

   c. Lockers ☐ Yes ☐ No ☐ Quantity:_____
      Size _____x_____ Material: _____
      Condition ☐ Good ☐ Fair ☐ Poor

   d. Other: _____ ☐ Yes ☐ No ☐ Quantity:_____
      Size _____x_____ Material: _____
      Condition ☐ Good ☐ Fair ☐ Poor

5. Mechanical/Electrical

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Heat Grills/Covers	☐	_____	_____	☐	☐	☐
Exhaust Grills	☐	_____	_____	☐	☐	☐
Light Covers	☐	_____	_____	☐	☐	☐
Cover plates	☐	_____	_____	☐	☐	☐

Comments _____

6. Fixtures/Equipment

Item	Provided	Description	Quantity	Condition		
				Good	Fair	Poor
Urinals	☐	_____	_____	☐	☐	☐
Water Closets	☐	_____	_____	☐	☐	☐
Lavatories/Sinks	☐	_____	_____	☐	☐	☐
Drinking Fountains	☐	_____	_____	☐	☐	☐
Shower Compartments	☐	_____	_____	☐	☐	☐
Exhaust Fans	☐	_____	_____	☐	☐	☐
Hair Dryers	☐	_____	_____	☐	☐	☐
Drains/Grates	☐	_____	_____	☐	☐	☐
Gang Showers	☐	_____	_____	☐	☐	☐
Other: _____	☐	_____	_____	☐	☐	☐
Other: _____	☐	_____	_____	☐	☐	☐

Comments _____

_____

AUDITORIUMS

1. Basic Information

a. Room Number: _____ Room Name:_____ Area (Size): _____ sf.

b. Occupant Load: _____ No. of Exits: Required: _____ Provided _____

2. Enclosure

	Material	**Finish**

a. Walls _____ _____

Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

Comments: _____

b. Floor _____ _____

Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

Comments: _____

c. Base _____ _____

Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

Comments: _____

d. Ceiling _____ _____

Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

Comments: _____

3. 1st Door Information

a. Door No._____ Size: _____ Fire Rating: _____

b. Type ☐ Hinged Leaf ☐ Coiling ☐ Sectional ☐ Other: _____

c. Material ☐ Hollow Metal ☐ Aluminum ☐ Wood ☐ Other: _____

Condition ☐ Good ☐ Fair ☐ Poor

d. Frame Type ☐ Hollow Metal ☐ Aluminum ☐ Wood ☐ Other

Condition ☐ Good ☐ Fair ☐ Poor

e. Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

Comments: _____

AUDITORIUM - PAGE 2

4. **2nd Door Information**

   a. Door No._____   Size: _____   Fire Rating: _____

   b. Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other: _____

   c. Material   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other: _____

       Condition   ☐ Good   ☐ Fair   ☐ Poor

   d. Frame Type ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other

       Condition   ☐ Good   ☐ Fair   ☐ Poor

Comments: _____

   e. Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

Comments _____

5. **Amenities**

   a. Seating   ☐ Yes   ☐ No

       Type   ☐ Fixed   ☐ Mobile   ☐ Other: _____

       Condition   ☐ Good   ☐ Fair   ☐ Poor

   b. Projection/Sound Booth ☐ Yes   ☐ No   ☐ Quantity:_____

       Size   _____x_____ Materials: _____

       Condition   ☐ Good   ☐ Fair   ☐ Poor

   c. Other: _____ ☐ Yes   ☐ No   ☐ Quantity:_____

       Size   _____x_____ Material: _____

       Condition   ☐ Good   ☐ Fair   ☐ Poor

Comments _____

6. **Mechanical/Electrical**

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Supply/Return Grill	☐	_____	_____	☐	☐	☐
Light Covers	☐	_____	_____	☐	☐	☐
Cover Plates	☐	_____	_____	☐	☐	☐

Comments _____

Interior Spaces

GYMNASIUM

1. **Basic Information**

   a. Room Number: _____ Room Name:_____ Area (Size): _____ sf.
   b. Occupant Load: _____ No. of Exits: Required: _____ Provided _____

2. **Enclosure**

	Material	**Finish**

   a. Walls _____ _____
   Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   b. Floor _____ _____
   Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   c. Base _____ _____
   Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

   Comments: _____

   d. Ceiling _____ _____
   Condition ☐ Good ☐ Fair ☐ Poor ☐ Good ☐ Fair ☐ Poor

   Comments: _____

3. **1st Door Information**

   a. Door No._____ Size: _____ Fire Rating: _____
   b. Type ☐ Hinged Leaf ☐ Coiling ☐ Sectional ☐ Other: _____
   c. Material ☐ Hollow Metal ☐ Aluminum ☐ Wood ☐ Other: _____
   Condition ☐ Good ☐ Fair ☐ Poor
   d. Frame Type ☐ Hollow Metal ☐ Aluminum ☐ Wood ☐ Other
   Condition ☐ Good ☐ Fair ☐ Poor
   e. Hardware

Item	Provided	Type	Quantity	Condition		
				Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

   Comments: _____

GYMNASIUM - PAGE 2

4. **2nd Door Information**

   a.   Door No._____   Size: _____   Fire Rating: _____
   b.   Type   ☐ Hinged Leaf   ☐ Coiling   ☐ Sectional   ☐ Other: _____
   c.   Material   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other: _____
   Condition   ☐ Good   ☐ Fair   ☐ Poor
   d.   Frame Type   ☐ Hollow Metal   ☐ Aluminum   ☐ Wood   ☐ Other
   Condition   ☐ Good   ☐ Fair   ☐ Poor

   Comments: _____

   e.   Hardware

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Hinges	☐	_____	_____	☐	☐	☐
Lockset	☐	_____	_____	☐	☐	☐
Closer	☐	_____	_____	☐	☐	☐
Kickplate	☐	_____	_____	☐	☐	☐
Mullion	☐	_____	_____	☐	☐	☐
Panic Bar	☐	_____	_____	☐	☐	☐
Push/Pull	☐	_____	_____	☐	☐	☐
Stop/Hold	☐	_____	_____	☐	☐	☐
Smoke Gasket	☐	_____	_____	☐	☐	☐

   Comments _____

5. **Amenities**

   a.   Display Cases   ☐ Yes   ☐ No
       Type   ☐ Recessed   ☐ Freestanding   ☐ Other: _____
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   b.   Bleachers   ☐ Yes   ☐ No   ☐ Quantity:_____
       Size   _____x_____   Material: _____
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   c.   Other: _____   ☐ Yes   ☐ No   ☐ Quantity:_____
       Size   _____x_____   Material: _____
       Condition   ☐ Good   ☐ Fair   ☐ Poor

   Comments _____

6. **Mechanical/Electrical**

Item	Provided	Type	Quantity	Condition Good	Fair	Poor
Supply/Return Grill	☐	_____	_____	☐	☐	☐
Light Covers	☐	_____	_____	☐	☐	☐
Coverplates	☐	_____	_____	☐	☐	☐

   Comments _____

Mechanical

EXTERIOR ELEMENTS

1. **Hose Bibbs** ☐ Yes ☐ No
   Freeze proof ☐ Yes ☐ No
   Vacuum Breaker ☐ Yes ☐ No
   Key Operated ☐ Yes ☐ No
   Condition ☐ Good ☐ Fair ☐ Poor

2. **Sewer Cleanouts**
   Within 5'
     of Building ☐ Yes ☐ No
   Condition ☐ Good ☐ Fair ☐ Poor

3. **Sprinkler System Exist?** ☐ Yes ☐ No
   FDC Exists? ☐ Yes ☐ No   Capped ☐ Yes ☐ No
   Labeled ☐ Yes ☐ No   Near Main Entry ☐ Yes ☐ No

4. **Air Inlets**
   More than 8' A/G ☐ Yes ☐ No   Near Contaminants ☐ Yes ☐ No
   More than 10'
     from exhaust ☐ Yes ☐ No   Screened (3/4") ☐ Yes ☐ No
   W/I 5' of PL ☐ Yes ☐ No
   Above Boiler Room ☐ Yes ☐ No
   Condition ☐ Good ☐ Fair ☐ Poor

5. **Air Outlets**
   Backdraft damper operational ☐ Yes ☐ No
   3' from windows/openings ☐ Yes ☐ No
   10' from inlets ☐ Yes ☐ No
   W/I 5' of property line ☐ Yes ☐ No
   Hooded? ☐ Yes ☐ No
   Louvered? ☐ Yes ☐ No
   Condition ☐ Good ☐ Fair ☐ Poor

Comments _____

_____

ROOF ELEMENTS

1. **Roof Drains**   ☐ Yes   ☐ No
   Plugged   ☐ Yes   ☐ No
   Qty/Size main drain   _____Qty   _____Size
   Qty/Size overflow   _____Qty   _____Size
   2" weir at overflow?   ☐ Yes   ☐ No
   Roof sloped drain?   ☐ Yes   ☐ No
   Drains visible   ☐ Yes   ☐ No
   Roof drains insulated?   ☐ Yes   ☐ No
   Relief drain tied to main?   ☐ Yes   ☐ No
   Overflow piped with offsets
   per MOA to main   ☐ Yes   ☐ No
   Heat tape visible   ☐ Yes   ☐ No
   Condition   ☐ Good   ☐ Fair   ☐Poor

   Comments _____

   _____

2. **Flues at Roof**
   Estimate height from appliance _____
   Caps installed   ☐ Yes   ☐ No
   Guyed if >5' high?   ☐ Yes   ☐ No
   Within 10' of air inlet?   ☐ Yes   ☐ No
   Within 5' of property line? ☐ Yes   ☐ No
   Rusted?   ☐ Yes   ☐ No
   Condition   ☐ Good   ☐ Fair   ☐Poor

   Comments _____

   _____

3. **Access to Roof**
   Type (Stairs needed if>4 stories) _____
   Size openings (2' min)   _____
   Lockable?   ☐ Yes   ☐ No
   Platform for sloped roof?   ☐ Yes   ☐ No
   Powerlines within 8' of roof? ☐ Yes   ☐ No
   Condition   ☐ Good   ☐ Fair   ☐Poor

   Comments _____

   _____

MECHANICAL ROOM

1. **Boilers/Burner**

	1		2		3	
Make	_____		_____		_____	
Model	_____		_____		_____	
BTU Output	_____		_____		_____	
Fuel Type	_____		_____		_____	
LWCO Installed?	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
LWCO operational?	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Operating Limit	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Red Hi Limit operational?	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Red Limited Man reset? (>400 MBH)	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Disconnect installed	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Gas shutoff present?	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Relief Valve?	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Size	_____		_____		_____	
Piped To Floor	_____		_____		_____	
Visual Inspection Leakage?	_____		_____		_____	
Condition	☐ Good		☐ Fair		☐ Poor	

2. **Hydronic System**

Filter/Strainer	☐ Yes	☐ No	
Air Separator/Purger	☐ Yes	☐ No	
Expansion Tank Type?	☐ Bladder	☐ Steel Tank	
waterlogged or MT?	_____		
System Pressure	_____ PSIG		
Exp Tank at Pump Suction	☐ Yes	☐ No	
Min 8PSI @ Circulator Suction	☐ Yes	☐ No	
Hydronic medium	_____		
Glycol fill system type	_____		
Possible water cross connect?	☐ Yes	☐ No	
Double check at fill	☐ Yes	☐ No	☐ N/A
Number of Zones	_____		
Condition	☐ Good	☐ Fair	☐ Poor

3. **Hot Water Heaters/Generators**

	1	2	3
Make	_____	_____	_____
Model	_____	_____	_____
BTU Input	_____	_____	_____
Fuel Type	_____	_____	_____
Heating Media	_____	_____	_____
Double walled	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Relief Valve?	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A

MECHANICAL ROOM - PAGE 2

Piped to Floor	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Disconnect installed	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Gas shutoff present?	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Visual Inspection Leakage	_____	_____	_____
Corrosion?	_____	_____	_____
Condition	☐ Good	☐ Fair	☐Poor

4. Forced Air Furnace/Air Handler

	1	2	3
Tag	_____	_____	_____
Make	_____	_____	_____
Model	_____	_____	_____
BTU Input	_____	_____	_____
CFM Blower	_____	_____	_____
OSA at Inlet	_____	_____	_____
Filters Installed	_____	_____	_____
Filters condition	_____	_____	_____
R/A ducted?	_____	_____	_____
R/A open to room	_____	_____	_____
Mixing Box	_____	_____	_____
Dampers operational	_____	_____	_____
Flue clearance to Combustibles	_____	_____	_____
Fuel Gas Piping Size	_____	_____	_____
SOV	_____	_____	_____
Heater Exchanger Rusty, Cracked?	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A

5. Combustion Air

Size?	_____	Vertical/Horizontal?	_____
Locations?	_____	Separate Ventilation System?	_____

6. Fuel Oil Qty.

Burner Below Fuel?	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
2" Fill Pipe	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Tigerloop?	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Filter?	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
OSV (if fuel above)	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Fusible SOV Valve	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Fuel Leaks	☐Yes☐No☐N/A	☐Yes☐No☐N/A	☐Yes☐No☐N/A
Fuel Pipe Type	_____	_____	_____
Soldered Joints?	☐Yes☐No	☐Yes☐No	☐Yes☐No
Pipe Supports?	☐Yes☐No	☐Yes☐No	☐Yes☐No
Valves in F.O.R.	☐Yes☐No	☐Yes☐No	☐Yes☐No
Daytank	☐Yes☐No	☐Yes☐No	☐Yes☐No
Vent to Exterior	☐Yes☐No	☐Yes☐No	☐Yes☐No
Rapture Basin	☐Yes☐No	☐Yes☐No	☐Yes☐No
Overfill Protection	☐Yes☐No	☐Yes☐No	☐Yes☐No
Alarms	☐Yes☐No	☐Yes☐No	☐Yes☐No

MECHANICAL ROOM - PAGE 3

	Condition	☐ Good	☐ Fair	☐Poor

Comments _____

_____

7. Heat Exchanger ☐Provided   ☐Not Provided
Type_____   Size_____
Condition   ☐ Good   ☐ Fair   ☐Poor

Mechanical 6.4x

DUCTWORK

1. Fire Dampers

Fire Dampers @ Mechanical Room	☐Yes	☐No	☐Can't tell	☐N/A
Fire Dampers @ 1 Hour assemblies	☐Yes	☐No	☐Can't tell	☐N/A
OSA insulation present/type	☐Yes	☐No	☐Can't tell	☐N/A
Condition	☐ Good		☐ Fair	☐Poor

2. Return Air

Plenum return?	☐Yes	☐No	☐Can't tell	☐N/A
If Plenum return:				
Combustibles in plenum?	☐Yes	☐No	☐Can't tell	☐N/A
Wiring plenum rated?	☐Yes	☐No	☐Can't tell	☐N/A
Exhaust ducts in plenum?	☐Yes	☐No	☐Can't tell	☐N/A
Condition	☐ Good		☐ Fair	☐Poor
Ducted return system	☐Yes	☐No	☐Can't tell	☐N/A
If ducted return:				
Are all rooms served?	☐Yes	☐No	☐Can't tell	☐N/A
Adequate size?	☐Yes	☐No	☐Can't tell	☐N/A
Fire dampers A/R?	☐Yes	☐No	☐Can't tell	☐N/A
Corridor Return?	☐Yes	☐No	☐Can't tell	☐N/A
Condition	☐ Good		☐ Fair	☐Poor

3. Supply Air

All occupied spaces served?	☐Yes	☐No	☐Can't tell	☐N/A
Volume dampers on supply branches?	☐Yes	☐No	☐Can't tell	☐N/A
>6' flex duct?	☐Yes	☐No	☐Can't tell	☐N/A
Ducts in unconditioned spaces?	☐Yes	☐No	☐Can't tell	☐N/A
Diffusers dirty?	☐Yes	☐No	☐Can't tell	☐N/A
Fire dampers A/R?	☐Yes	☐No	☐Can't tell	☐N/A
Condition	☐ Good		☐ Fair	☐Poor

4. Description of Heating/Ventilating/Air Conditioning System

_____

_____

_____

Comments _____

_____

TOILET ROOMS/SHOWERS

Locations _____ _____ _____ _____

1. **Urinals:**

Quantity	_____		_____		_____		_____
Caulked	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Operational	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Caulked	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
HC Accessible (17" to Lip)	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
30 clear in front	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Flush Valve <44"AFF	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Condition	☐ Good		☐ Fair		☐Poor		

2. **Water Closets**:

Locations	_____		_____		_____		_____
Quantity	_____		_____		_____		_____
Floor/Wall mounted	_____		_____		_____		_____
Seal to Wall/Floor wall or floor mounted (require wall mount if <59" deep stall)	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
18" wall to center	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
17"-19" floor to seat	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
33"-36" floor to flush	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Flush valve <44" AFF	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Flush valve handle toward wide side?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Grab bars side/back	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Seat loose	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Open front seat?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Elongated bowl?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Condition	☐ Good		☐ Fair		☐Poor		

3. **Drinking Fountains**:

Spout 36" AFF	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
4" high flow	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Controls Front or side	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Knee Space? 27" front/apron	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
30" wide	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
17"-19" deep	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
30"X48" for parallel	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes☐No
Condition	☐ Good		☐ Fair		☐Poor		

TOILET ROOMS/SHOWERS - PAGE 2

4. Lavs:

Locations	_____		_____		_____		_____
Quantity	_____		_____		_____		_____
HC Accessible							
34" floor to rim	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
29" floor to apron							
bottom	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
30"X48" in front	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Hot/Cold mix hose bibb							
near shower room?							
(School)	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Temp of HW	_____deg. F.						
Condition	☐ Good		☐ Fair		☐Poor		

Comments _____

_____

5. Shower Compartment

Locations	_____		_____		_____		_____
ADA size 36"X36	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
ADA seat opposite control	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
17"X19" AFF	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Controls 38"X48" AFF	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Spray w/60" hose?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
1/2 max curb?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Hot water (110 deg.)	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Condition	☐ Good		☐ Fair		☐Poor		

6. Toilet Exhaust Fan:

Operational?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Operate with lights?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Ducted to outside ?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Condition	☐ Good		☐ Fair		☐Poor		

7. Janitor Closet:

Exhaust fan	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Vacuum breaker @							
faucet?	☐Yes	☐No	☐Yes	☐No	☐Yes	☐No	☐Yes ☐No
Condition	☐ Good		☐ Fair		☐Poor		

Comments _____

_____

KITCHENS

1. Grease Hood

Type One Hour?	☐Yes	☐No
Number of Hoods	_____	
Duct in Shaft	☐Yes	☐No
Hood 3" down /skirted from ceiling	☐Yes	☐No
Duct 18" from combustibles?	☐Yes	☐No
Outlet thru roof? 3' above?	☐Yes	☐No
Accessible cleanouts?	☐Yes	☐No
Welded steel ducts	☐Yes	☐No
Fire extinguisher system?	☐Yes	☐No
Manual activation system?	☐Yes	☐No
Condition	☐ Good	☐ Fair	☐Poor

2. Vapor Hood

Provided @ steam kettle?	☐Yes	☐No	☐N/A
Provided @ convection oven	☐Yes	☐No	☐N/A
Provided @ dishwasher	☐Yes	☐No	☐N/A
Condition	☐Good	☐Fair	☐Poor

3. Make Up Air

Interlocked w/grease hood?	☐Yes	☐No
Direct fire?	☐Yes	☐No
Condition	☐Good	☐Fair	☐Poor

4. Gas Piping @ Kitchen

Solenoid to fire system	☐Yes	☐No
E-stop to fire system if electric	☐Yes	☐No
Condition	☐ Good	☐ Fair	☐Poor

5. Hand Wash Sink

110 deg. hot water?	☐Yes	☐No
Condition	☐ Good	☐ Fair	☐Poor

6. Dishwasher

180 deg. F final rinse or Hydrochloride at 75 deg. F		
120 deg. F min for chemical	☐Yes	☐No
Floor sink drain	☐Yes	☐No
Booster heater present?	☐Yes	☐No
Condition	☐ Good	☐ Fair	☐Poor

KITCHENS - PAGE 2

7. **Sinks**

Food prep sink	☐Yes ☐No	
3 comp sink present	☐Yes ☐No	
140 deg. F hot, LH side	☐Yes ☐No	
Grease trap used	☐Yes ☐No	
Condition	☐ Good	☐ Fair ☐Poor

8. **Drains**

Ice machine to floor sink	☐Yes ☐No
3 comp sink	☐Yes ☐No
Pop machine to floor sink	☐Yes ☐No
Waitress station to floor sink	☐Yes ☐No
Food prep sink to floor sink	☐Yes ☐No
Condition	☐ Good ☐ Fair ☐Poor

Comments _____

_____

ELECTRICAL SERVICE

1. Service Entrance

Overhead	☐Yes ☐No	
Ground Resistance	_____OHMS	
Ground rod used	☐Yes ☐No	
Plumbing grounded?	☐Yes ☐No	
Steel Frame/Piling Grounded	☐Yes ☐No	
Meter#	_____	Meter Multiplier_____
Peak Demand	_____	Main Breaker Size_____
Make/Model	_____	Service Voltage_____
Transformer Size	_____	XFMR Location_____

Service Size (# & type of Conductors)_____

Insulation Type _____

Condition ☐Good ☐Fair ☐Poor

Comments _____

_____

2. Main Distribution Panel (MDP)

Neutrals/Grounds Separated
to Service ☐Yes ☐No

Feeder Size (Copper or Aluminum)	_____	Insulation Type_____
Buss Rating/MDP Ampacity	_____	Make/Model of MDP_____
Number of Poles	_____	Spare Capacity_____

Clearance in Front of Panel (36" min)_____

Overhead Breakers?	_____	Dry Type Transformers?_____
Voltage and KVA	_____	Make/Model_____

Separate grounding for
Transformers? _____

Condition ☐Good ☐Fair ☐Poor

Comments _____

_____

3. Sub Panels

Directory up-to-date?	☐Yes ☐No		☐Yes ☐No		☐Yes ☐No		☐Yes☐No
Neutrals/Grds separate?	☐Yes ☐No		☐Yes ☐No		☐Yes ☐No		☐Yes☐No
Open knockouts?	☐Yes ☐No		☐Yes ☐No		☐Yes ☐No		☐Yes☐No
Feeder size	_____		_____		_____		_____
Breaker size (Main)	_____		_____		_____		_____
Overheated breakers	☐Yes ☐No		☐Yes ☐No		☐Yes ☐No		☐Yes☐No
Make/Model	_____		_____		_____		_____

Condition ☐ Good ☐ Fair ☐Poor

Comments _____

EXTERIOR ELEMENTS

1 Exterior

Outlets-Qty_____	Lights-Entries _____
Outlets-GFIC_____	Lights-Parking Lot _____
Outlets-WP, Condition_____	(1/3 FC Min) _____
	Lights-Play Areas _____
	Lights-Type _____
	Photocell switching? _____

Condition   □Good   □Fair   □Poor

Comments _____

2. Roof

GFI receptacle W/I 10 feet of Electrical equipment	□Yes	□No	□N/A
Disconnect on fans, HVAC	□Yes	□No	□N/A
Heat tape in roof drains?	□Yes	□No	□N/A
Conduits threaded on roof (No EMT)	□Yes	□No	□N/A
Overhead power lines >8' above roof?	□Yes	□No	□N/A
Penetrations sealed?	□Yes	□No	□N/A
Condition	□Good	□Fair	□Poor

Comments _____

_____

EMERGENCY SYSTEMS

1. **Emergency Signage**

2 Exit Signs in Exit Corridor?	☐Yes	☐No	
Door Swings outward at Exit?	☐Yes	☐No	
Flashing exit sign if electric?	☐Yes	☐No	
Darkrooms or special occupancy?	☐Yes	☐No	☐N/A
Condition	☐Good	☐Fair	☐Poor

    Comments _____

2. **Emergency Lights**

Lighting each exit @ 1 F.C.	☐Yes	☐No	
Lighting corridor @ 1 F.C.	☐Yes	☐No	
Lighting at rooms	☐Yes	☐No	
Condition	☐Good	☐Fair	☐Poor

    Comments _____

3. **Fire Alarms Systems**

Pull Stations 400' O.C.	☐Yes	☐No	
Pull Stations @ exits	☐Yes	☐No	
Pull Stations @ 48" AFF	☐Yes	☐No	
Horn Strobes			
All Classrooms - 60 DB Min.	_____DB Actual		
All Corridors covered	☐Yes	☐No	
80" Max off floor	☐Yes	☐No	
Strobes in all areas of common use?	☐Yes	☐No	
Strobes 75 cadels #5 minimum	☐Yes	☐No	
Condition	☐Good	☐Fair	☐Poor

    Comments _____

    _____

4. **Heat/Smoke Detectors**

Heat in Boiler Room (190 deg.)	☐Yes	☐No	☐N/A
Heat in Janitor Closet	☐Yes	☐No	☐N/A
Heat Type in Toilet Room	☐Yes	☐No	☐N/A
W/I 15' of anywhere	☐Yes	☐No	☐N/A
More than 24" from S/A Diffuser	☐Yes	☐No	☐N/A
Fixed temp sensor in Entry	☐Yes	☐No	☐N/A
Condition	☐Good	☐Fair	☐Poor

    Comments _____

    _____

Electrical

STANDARD ROOM ELECTRICAL

1. Interior Lighting

Voltage	☐277V	☐120V	☐Both
Photocell Switching?	☐Yes	☐No	
Lens Condition	☐Good	☐Poor	
Bulb/Type Condition	☐Good	☐Poor	
PCB Ballasts	☐Yes	☐No	

Lighting Levels (Average)

Classrooms (50 FC Min) _____   Food Prep Areas (50 FC Min) _____

Gyms (50 FC Min)	_____	Shop_____	
Corridors (20 FC Min)	_____	Entries_____	
Office (50 FC Min)	_____	Others_____	
Condition	☐Good	☐Fair	☐Poor

Comments _____

_____

2. Electrical Devices

Switches 48" mounting height   ☐Yes   ☐No
(54" if side reach)

Receptacles 15" minimum mounting
   Height   ☐Yes   ☐No

Grounding type receptacle   ☐Yes   ☐No

Use of extension cords or multiple
   plug taps?   ☐Yes   ☐No

Condition	☐Good	☐Fair	☐Poor

Comments _____

_____

SPECIAL PURPOSE ROOM ELECTRICAL

1. **Wood Shops**

Sawdust Collector?	☐Yes	☐No	☐N/A
Explosion proof wiring in dust collection bag house	☐Yes	☐No	☐N/A
Sawdust for equipment	☐Yes	☐No	☐N/A
E stop for equipment	☐Yes	☐No	☐N/A
Separated from other Rooms 1 Hour	☐Yes	☐No	☐N/A
Condition	☐Good	☐Fair	☐Poor

   Comments _____

   _____

2. **Auto/Machine Shops**

GFCI for general receptacle	☐Yes	☐No	☐N/A
Explosion proof wiring W/I 18" of floor	☐Yes	☐No	☐N/A
Explosion proof wiring in any pit or depression	☐Yes	☐No	☐N/A
E stop for machinery	☐Yes	☐No	☐N/A
Condition	☐Good	☐Fair	☐Poor

3. **Welding Shops**

Disconnect W/I sight of welder or lockable?	☐Yes	☐No	☐N/A
E stop for machinery	☐Yes	☐No	☐N/A
Condition	☐Good	☐Fair	☐Poor

   Comments _____

   _____

4. **Kitchen**

GFI W/I 10' of sink?	☐Yes	☐No	☐N/A
Lighting cleanable?	☐Yes	☐No	☐N/A
Horn/Strobe?	☐Yes	☐No	☐N/A
Condition	☐Good	☐Fair	☐Poor

   Comments _____

   _____