FACILITIES TO BE ANALYZED

Each building to be included in the project shall be identified and described in the following form.

Date: ____________

Name of Agency or University:
Division:
Department:
Contact Person_________________________ Title ________________________________
Phone _______________ Fax ____________ Email______________________________

Address of Building or Complex:

Building Name:
Total Floors:
Building Age: ______ - Built in: ______ – Addition: ______ - Age: __________

Building Operator: _______________ Phone:
Building Engineer: _______________ Phone:
Building Manager: _______________ Phone:

Building Type: (Dorm, Office, Classroom)
Building Total Square Footage: ____________ sq. ft.
Additions/Renovations:
Describe Renovations:

Operating Schedule: Daily: Weekend:
Electric Meter for Building:
Gas Meter for Building:
Water Meter for Building:
Steam Meter for Building:
Chilled Water Meter for Building:

Issues to be Addressed by Performance Contract
(Including a short description of proposed project: Including problems to be addressed and technologies/equipment that may be required)

Special Needs or Circumstances
(May include critical temperature or humidity needs, security precautions, building availability, etc.)