|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| School Facility Report Card (please print or type) | | | | | | | | |
|  | School District/BOCES |  | | Building Name | |  | |  |
|  | School Building Address |  | | | | | |  |
|  | Certificate of Occupancy Status: Annual \_\_\_\_\_ 30 Day Temp \_\_\_\_\_ None \_\_\_\_\_ | | | | Expiration Date | |  |  |
|  | **Location where certificate of occupancy is posted** | |  | | | | |  |
|  |  | |  | | | | |  |

## Section 1: School Building General Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1. Person Completing this School Facility Report Card: |  | Date |  |  |

|  |  |
| --- | --- |
|  | 1. Right-to-Know designee concerning this school building and School Facility Report Card: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Name: |  | Position: |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Telephone: |  | Fax: |  | e-mail: |  |  |
|  | Address: |  | City: |  | Zip: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | 1. a. Original Construction Date (year) |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | b. Present size of school building in gross square feet |  | # floors | |  | Basement? | |  |  |
|  | 1. Grade Levels currently housed in this building? |  | | Current enrollment? | | |  | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | 2. Upgrades to school building systems can be viewed on the Building Condition Survey? | Y |  | N |  |  |
|  | 3. The number of different types of program spaces currently in this school building can be viewed on the Building Condition Survey? | Y |  | N |  |  |

## Section II: School Building Ratings

|  |  |  |  |
| --- | --- | --- | --- |
|  | 1. Date current 5-year building condition survey conducted: |  |  |

Overall school building safety rating from Building Condition Survey as certified by the Board Of Education:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Excellent |  | Good |  | Satisfactory |  | Unsatisfactory |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | 1. Date current year annual visual inspection conducted: |  |  |

Overall condition:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Excellent |  | Good |  | Satisfactory |  | Unsatisfactory |  |  |

## Section III: Building Capital, Maintenance, and Operations Information

1. List any current unsatisfactory building systems that have not been corrected since the previous building condition survey (attach additional sheets if necessary)

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | 1. Estimated remaining useful life of school building and systems can be viewed on the Building Condition Survey? | Y |  | N |  |  |
| 1. The need for routine maintenance, repairs, rehabilitation, reconstruction, and construction can be viewed on the five year Capital Facilities Plan? | | Y |  | N |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | 1. List prioritized health and safety improvements for this facility as indicated in the five year plan: | | |
|  | 1. |  |  |
|  | 2. |  |  |
|  | 3. |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | 9. Estimated costs to restore school building to state of good repair | 10. Annual estimated cost to keep school building in state of good repair | 11. Projected annual Operations & Maintenance spending (budget) |
| Site elements | $ | $ | $ |
| Roofing | $ | $ | $ |
| Envelope Elements | $ | $ | $ |
| Structural Interior  Elements/Finishes | $ | $ | $ |
| Electrical | $ | $ | $ |
| Plumbing | $ | $ | $ |
| HVAC | $ | $ | $ |
| Special Construction | $ | $ | $ |
| Emergency Systems (fire alarm, sprinklers, public address, etc. | $ | $ | $ |
| **TOTAL** est. cost | **$** | **$** | **$** |

1. Estimated energy costs for current school year by type:

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Electricity | $ | Gas | $ | Fuel Oil | $ | Other | $ |  |  |  |
|  |  | Total estimated energy costs | | | | | $ | |  |  |  |

## Section IV: Health and Safety

1. Description of Health and Safety Committee activities:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Y | N |  | | |
|  | a. Does the district have a health and safety committee? |  |  |  | | |
|  | b. Does the Health and Safety Committee have a chairperson? |  |  | Name |  |  |
|  | c. Phone number of Health and Safety Committee Chairperson: | ( ) | | Email |  |  |
|  | d. Basic Health and Safety Committee membership: |  |  |  |  |  |
|  | * District Officials |  |  |  |  |  |
|  | * Staff |  |  |  |  |  |
|  | * Bargaining Units |  |  |  |  |  |
|  | * Parents |  |  |  |  |  |
| e. Health and Safety Committee membership expanded during construction to include district officials, staff, bargaining units, parents and: | | | | | | |
|  | | Y | N |  | | |  |  |
| * Project Architect | |  |  |  | | |  | N |
| * Construction Manager | |  |  |  | | |  | N |
| * Contractors | |  |  |  | | |  | N |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | f. Frequency of Health and Safety Committee meetings (check one): | | | |
| * 1-2 times/school year | |  |  |  |
| * 3-5 times/school year | |  |  |  |
| * 6-8 times/school year | |  |  |  |
| * > 9 times/school year | |  |  |  |

## Section V: Environmental Awareness

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 14. Lead testing: | | | | | Y | N |
| 1. Has this building been tested for the presence of lead: paints, plumbing, etc? | | | | |  |  |
| 1. Based on the testing results, are there elements in this building that would require construction or maintenance projects to be conducted in accordance with the US Department of Housing and Urban Development Guidelines for the Evaluation and Control of Led Based Paint Hazards in Housing? | | | | |  |  |
| 1. If yes, has this type of work been done in accordance with the Guidelines? | | | | |  |  |
|  | | | | |  |  |
| 15. Federal Asbestos Hazard Emergency Response (AHERA) Plan: | | | | |  |  |
| 1. Does this building contain known or assumed asbestos containing building materials (ACBM)? | | | | |  |  |
| 1. If yes, has an original AHERA management plan been developed for this building? (The AHERA Management Plan for this building may be viewed at the main office during normal business hours). | | | | |  |  |
| 1. When was the AHERA management plan last updated? | | | | |  |  |
|  | | | | |  |  |
| 16. Radon testing: | | | | | Y | N |
| 1. Has the district reviewed the geological potential for the presence of radon from the NYSDOH Radon Measurement Database? | | | | |  |  |
| 1. Did the geological potential indicate testing this facility was necessary? | | | | |  |  |
| 1. If yes, did the highest test in this building exceed 4pCi/L? | | | | |  |  |
| 1. If yes, describe mitigation activities | |  |  | | | |
|  | | | | |  |  |
|  | | | | |  |  |
|  | | | | |  |  |
| 17. Integrated Pest Management Program: | | | | |  |  |
| 1. Does this school have an integrated pest management program? | | | | |  |  |
| 1. Does this school have a person designated to oversee the pest management program? | | | | |  |  |
| 1. Has this school established a list of persons to notify at least 48 hours prior to the application of pesticides? | | | | |  |  |
| 1. Have pesticide application summary reports been provided to all parents and staff pursuant to CR 155.24? | | | | |  |  |
|  | | | | |  |  |
| 18. Status of measures taken to assure acceptable indoor air quality: | | | | |  |  |
| 1. Does this school utilize the *EPA Indoor Air Quality Tools for Schools Action Kit?* | | | | |  |  |
| 1. Does this school have a procedure in place for reporting indoor air quality concerns? | | | | |  |  |
| 1. Is ventilation with outdoor air available in all occupied spaces? | | | | |  |  |
| * 1. Is all ventilation and exhaust equipment operational? | | | | |  |  |
| * 1. Are all outdoor air intakes unobstructed and clear of foreign objects? | | | | |  |  |
| * 1. Are all outside air damper controls in place and operational? | | | | |  |  |
| * 1. Have facilities operations been reviewed with respect to impact on outside air intakes (i.e., vehicle emissions, waste storage, mowing, etc.)? | | | | |  |  |
| 1. Are there any unresolved complaints regarding indoor air at this facility? | | | | |  |  |
| If yes, describe: |  | | |  | | |
|  | | | | |  |  |
| 1. Maintenance: Heating, ventilation, and air conditioning equipment are cleaned and maintained in accordance with manufacturer’s instructions (i.e., filter changes, coils cleaned, etc.) | | | | |  |  |
| 1. Has the interior of ductwork (air passageways) been inspected for cleanliness? | | | | |  |  |
| 1. Have exterior ductwork and rooftop air handling units been inspected for leaks? | | | | |  |  |
|  | | | | |  |  |
| 1. Operations and maintenance program: | | | | | Y | N |
| 1. Does the District have a policy encouraging the use of environmentally friendly products? | | | | |  |  |
| 1. Products entering a school building are reviewed with the intent of reducing or eliminating hazardous chemicals, including volatile organic compounds (VOCs), semi-volatile organic compounds, etc. (cleaning supplies, repair and maintenance supplies, materials, etc.). | | | | |  |  |
| 1. Review performed to ensure hazardous chemicals used as part of instructional program are used and stored properly. | | | | |  |  |
| i. Buildings are inspected for roof leaks, growth of mold, evidence of rodent infiltration, and other potential problems to acceptable IAQ. | | | | |  |  |

Forms/school facility report card