2010 Building Condition Survey Instrument

1.	Name of School District					
2.	SED District Number	District BEDS Code				
3.	Building Name					
4.	SED Control Number					
5.	Survey Inspection Date					
6.	Building 911 Address					
7.	City	8. Zip Code				
9.	Certificate of Occupancy Status	10. Certificate Expiration Date				
11. 12. 13.	Year of Original Building Gross square ft. of Building Number of Floors How many full-time and pa Full-time custodians:	e Footage and Maintenance Staff g as currently configured				
Part-time custodians Building Ownership and Occupancy Status 15. Building Ownership (check one):						
10.						
	a. Owned and used by dis					
		leased to non-district entity				
	c. Owned by District, part	used by district, part leased to non-district entity				
	d. Owned by non-district of	entity and leased to district				

10.	For which of the following purposes is the building currently used? (check all that apply)	
	a. Used for student instructional purposes	
	b. Used for district administration	
	c. Used for other district purposes Describe:	
	d. Used by other organization(s)	
Bui	ding Users	
17.	How many students were registered to receive instruction in this building as of October 1, 2009? (If none, enter "0") and skip to "Program Spaces" section. (Do not include evening class students)	
18.	Of these registered students, how many receive most of their instruction in:	
	a. Permanent instructional spaces (i.e., regular classrooms)	
	b. Temporary instructional spaces (i.e., portable or demountable classrooms) attached to the building:	
	c. Non-instructional spaces used as instructional spaces:	
	If the answer is greater than zero, which types of non-instructional spaces were being us instructional purposes on October 1, 2009 (check all that apply)	ed for
	1. Cafeteria 4. Library 7. Storage space	
	2. Gymnasium 5. Lobby 8. Other (please describe	·)
	3. Administrative spaces 6. Stairwell	
19.	Grades Housed:	
20.	For how many instructional days during the 2008-09 school year (July 1 through June 30, was the building closed due to facilities failures, system malfunctions, structural problems, fire, etc? (if none, enter "0")	
21.	Is the building used for instructional purposes in the summer? Yes	No
22.	Have there been renovations or construction in the building during the past 12 Yes months?	No
Pro	ram Spaces	
23.	Number of instructional classrooms:	
24.	Gross square footage of all instructional classrooms (combined):	

25.	Other spaces pro	ovided (check all that apply):		
	a. N/A (none)	h. Guidance	o. Multipurpose rooms	u. Special education
	b. Administration	i. Gymnasium	p. Music	v. Swimming pool
	c. Art	j. Health suite	q. Pre-K	w. Teacher resource
	d. Audio Visual	k. Home & Careers	r. Remedial rooms	x. Technology/Shop
	e. Auditorium	1. Kitchen	s. Resource rooms	y. Other (describe)
	f. Cafeteria	m. Lg.group instruction	t. Science labs	
	g. Computer room	n. Library		
a				
Spa	ce Adequacy			
26.	Rating of space a	adequacy Good	Fair	Poor
Com	ments:			
27	Estimated conite	l	in akad fan thia haildin a thuanah	
27.	2015-2016 school	year excluding maintenance	cipated for this building through the (to be answered after the	\$
	building inspecti	on is complete)		
28.	Overall building	rating (to be answered after	the building inspection is comp	lete)
	Excellent	Satisfactory	Unsatisfactory	Poor
'			,	
29.	Was overall build safety committee		consultation with health and	Yes No
	safety committee	•		Tes No
Ove	rall Building Ratir	ng Definitions:		
E	Excellent		Ith and safety or structural rated 'ive maintenance plan in place.	"excellent," no systems rated
S	Satisfactory	All systems categorized as he system rates "non-functioning	ealth and safety or structural rated g" or "critical failure."	l "satisfactory" or better. No
U	Unsatisfactory	Any system categorized as he	ealth and safety or structural rated marted "non-functioning" or "crit	
F	Failing	Any system categorized as he	ealth and safety or structural rated ertificate of Occupancy may be re	"non-functioning" or
		crucal famure. Building C	ertificate of Occupancy may be re	escinded.
30.	A/E Firm Name:		31. Firm Address	
32.	Phone Number			
33.	E-mail:			
34.	A/E Name		35. A/E License #	
	*			

NOTE:

Visual inspection of all structural systems is required. In some cases this may necessitate opening ceilings, walls, or using other invasive inspection techniques. Please use the "comments" section for each building feature to note limitations to visual inspections of structural elements and actions taken to overcome these limitations. Please see the Building Condition Survey guide for additional information.

Building System Condition Ratings and Definitions:

E	Excellent	System is in new or like-new condition and functioning optimally; only routine
		maintenance and repair is needed.

S Satisfactory System functioning reliably; routine maintenance and repair is needed.

U Unsatisfactory System is functioning unreliably or has exceeded its useful life. Repair or

replacement of some or all components is needed.

NF Non-Functioning System is non-functioning, not functioning as designed, or is unreliable in ways that

could endanger occupant health and/or safety. Repair or replacement of some or all

components is needed.

CF Critical Failure Same as "NF" with the addition that the condition of at least one component is so

poor that at least part of the building or grounds should not be occupied pending

needed repairs/replacement or some or all components is needed.

Building System Type Definitions:

H Health and Safety

S Structural

NOTE:

Cost estimates are required ONLY for systems/features rated "U", "NF", or "CF." Cost estimates are NOT REQUIRED for systems rated "E" or "S." These estimates are for state and local planning purposes only.

Site Utilities

36.	Water (H)
a.	Type of service: Municipal or utility provided Well Other
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
37.	Site Sanitary (H)
a.	Type of service: Municipal or Utility sewer Site septic Other
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
£	Comments

38.	Site Gas (H)
a.	Does the building have gas service or use liquid petroleum gas?
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
39.	Site Fuel Oil (H)
a.	Type of service:
b.	If the building has fuel tanks: 1. # Above Ground: a. Capacity of above ground tanks (gallons)
	2. # Below Ground: a. Capacity of below ground tanks (gallons)
c	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
d.	Year of Last Major e. Expected Remaining Useful Life Reconstruction/Replacement (Years):
f.	Cost to Reconstruct/Replace \$
g.	Comments:
40.	Site Electrical, Including Exterior Distribution (H)
a.	Service Provider (check all that apply): Utility Provided Self-Generated Other
b.	Type of Service: Above Ground Below Ground
c	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
d.	Year of Last Major Reconstruction/Replacement e. Expected Remaining Useful Life (Years):
f.	Cost to Reconstruct/Replace \$
g.	Comments:
41.	Closed Drainage Pipe Stormwater Management System
a.	Does the facility have a closed pipe system? Yes No (skip to next section)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f	Comments

42.	Open Drainage Stormwater Management System
a.	Does the facility have a open stormwater system (ditch)? Yes No (skip to next section)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
43.	Catch Basins/Drop Inlets/Manholes
a.	Does the facility have catch basins/drop inlets/manholes? Yes No (skip to next section)
b	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
44.	Culverts
a.	Does the facility have culverts? Yes No (skip to next section)
b	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
45.	Outfalls
a.	Does the facility have outfalls? Yes No (skip to next section)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:

40.	Inflitration dasins/chamders
a.	Does the facility have infiltration basins/chambers? Yes No (skip to next section)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
47.	Retention basins:
a.	Does the facility have retention basins? Yes No (skip to next section)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
48.	Wetponds
a.	Does the facility have wetponds? Yes No (skip to next section)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
49.	Manufactured stormwater proprietary units
a.	Does the facility have proprietary units? Yes No (skip to next section)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:

50.	Point of outfall discharge (check all that apply)
	Municipal storm sewer system Combined sewer system Surface Water
	On-site recharge Other (please describe)
51. Ot	Outfall reconnaissance inventory. Were all stormwater outfalls inspected during dry weather for signs of non-stormwater discharge? There Site Features
52.	Pavement (Roadways and Parking Lots)
a.	Type (check all that apply)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
53.	Sidewalks
a.	Type (check all that apply)
b.	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
54.	Playgrounds and Playground Equipment
a.	Condition:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure N/A
b.	Year of Last Major c. Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$
e.	Comments:

Condition: Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure Year of Last Major Expected Remaining Useful Life b. c. Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ Comments: e. f. Check if synthetic turf field is present: Yes No Date installed: **Substructure 56.** Foundation (S) Type (check all that apply): Reinforced Concrete Masonry on Concrete Footing Other **Evidence of Structural Concerns:** Yes Structural Cracks No Water Penetration 1. Yes No 2. Heaving/Jacking Yes No **Unsupported Areas** Yes No Decay/Corrosion Yes No 6. Other Yes 3. No Satisfactory Condition Excellent Unsatisfactory Non-Functioning Critical failure **Expected Remaining Useful Life** Year of Last Major Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ f. Comments: g. **Building Envelope Structural Floors (S)** 57. Type (check all that apply): 1. Reinforced Concrete Slab on Grade 4. Wood Deck on Wood Trusses 7. Other (specify) 5. Wood Deck on Wood Joists 2. Concrete/Metal Deck/Metal Joists 3. Precast Concrete Structural System 6. Concrete Deck on Wood Structure

Athletic Fields, Play Fields, and Related Structures

(such as press boxes, stadiums, exterior bleachers, dugouts, climbing walls, etc.)

b. Evidence of structural Concerns with Floor Support System (Beams/Joists/Trusses, etc.):
1. Structural Cracks Yes No 4. Deflection Yes No
2. Unsupported Ends Yes No 5. Seriously Damaged/Missing Components Yes No
3. Rot/Decay/Corrosion Yes No 6. Other Problems
c. Evidence of Structural Concerns with Structural Floor Deck:
1. Cracks Yes No
2. Deflection Yes No
3. Rot/Decay/Corrosion Yes No
d. Overall Condition of Structural Floors:
Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
e. Year of Last Major f. Expected Remaining Useful Life (Years):
g. Cost to Reconstruct/Replace \$
h. Comments:
58. Exterior Walls/Columns (S)
a. Material (check all that apply: Concrete Masonry Steel Wood Other
b. Evidence of Structural Concerns with Support System (columns, base plates, connections, etc):
1. Structural Cracks Yes No
2. Rot/Decay/Corrosion Yes No
3. Other Problems:
c. Evidence of Concerns with Exterior Cladding:
1. Cracks/Gaps Yes No 4. Moisture Penetration Yes No
2. Inadequate Flashing Yes No 5. Rot/Decay/Corrosion Yes No
3. Efflorescence Yes No 6. Other Problems
d. Overall Condition of Exterior Walls/Columns::
Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
e. Year of Last Major f. Expected Remaining Useful Life (Years):
g. Cost to Reconstruct/Replace \$
h. Comments:

59.	Chimneys (S)
a.	Material (check all that apply):
b.	Overall condition of chimneys:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
60.	Parapets (S)
a.	Construction Type (check all that apply): Masonry Concrete Metal Other N/A
b.	Overall condition of parapets:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Year of Last Major d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
61. a.	Exterior Doors Overall condition of exterior door units:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
b.	Overall condition of exterior door hardware:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
c.	Do any exit doors have magnetic locking devices? Yes No
d.	Safety/Security features are adequate: Yes No
e.	Year of Last Major f. Expected Remaining Useful Life (Years):
g.	Cost to Reconstruct/Replace \$
h	Comments:

62. Exterior Steps, Stairs, and Ramps (S) Overall condition of exterior steps, stairs, and ramps Satisfactory Excellent Unsatisfactory Non-Functioning Critical Failure Year of Last Major Expected Remaining Useful Life c. Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ d. e. Comments: Fire Escapes (S) **63.** Yes No (skip to next question) Does the building have one or more fire escapes? Overall condition of fire escapes: b. Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure Safety features are adequate Yes No Year of Last Major Expected Remaining Useful Life d. e. Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ f. Comments: g. 64. Windows Type of windows (check all that apply): Steel Vinyl Solid Wood Wood w/ External Cladding System Aluminum Other Overall condition of windows: b. Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure

N/A

Expected Remaining Useful Life

No

(Years):

e.

Yes

Cost to Reconstruct/Replace \$ _____

All rescue windows are operable:

Year of Last Major

Comments:

Reconstruction/Replacement

c.

d.

f.

g.

65. Roof and Skylights (S)

a. Type of roof construction (check all that apply):
1. Metal deck on metal trusses/joists 4. Concrete on metal deck on metal trusses/joists
2. Wood deck on wood trusses/joists 5. Other
3. Wood deck on metal trusses/joists
b. Type of roofing material (check all that apply):
1. Single-ply membrane 3. Asphalt single 5. IRMA 7. Other
2. Built up 4. Pre-Formed metal 6. Slate
c. Evidence of structural concerns with support system (beams/joists/trusses, etc.):
1. Structural Cracks Yes No 4. Deflection Yes No
2. Unsupported Ends Yes No 5. Seriously Damaged/Missing Components Yes No
3. Rot/Decay/Corrosion Yes No 6. Other Problems
d. Evidence of structural concerns with structural floor deck:
1. Cracks Yes No
2. Deflection Yes No
3. Rot/Decay/Corrosion Yes No
e. Does the building have skylights? Yes No If No, go to (h)
f. If yes, what material are the skylights made?
g. Condition of skylights:
Excellent Satisfactory Non-Functioning Critical Failure N/A
h. Evidence of concerns with roofing, skylights, flashing, and drains:
1. Failures/Splits/Cracks Yes No
2. Rot/Decay/Corrosion Yes No
3. Inadequate flashing/curbs/pitch pockets Yes No
4. Inadequate or poorly functioning roof drains Yes No
5. Evidence of water penetration/active leaks Yes No
Other concerns (specify):

1.	Overall Condition of roof:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
j.	Year of Last Major k. Expected Remaining Useful Life (Years):
1.	Cost to Reconstruct/Replace (include costs for repairs): \$
m.	Comments:
Int	erior Spaces
66.	Interior bearing walls and fire walls (S)
a.	Overall condition of interior walls:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
b.	Year of Last Major c. Expected Remaining Useful Life Reconstruction/Replacement (Years):
d.	Cost to Reconstruct/Replace \$
e.	Comments:
67. a.	Other Interior Walls Overall condition of interior walls:
	Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
b.	Year of Last Major c. Expected Remaining Useful Life Reconstruction/Replacement (Years):
d.	Cost to Reconstruct/Replace \$
e.	Comments:
	Floor Finishes
68.	Carpet
a.	Where located? (check all that apply) Instructional space Common area
	Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure
b	
c.	Year of Last Major d. Expected Remaining Useful Life Reconstruction/Replacement (Years):
d.	Cost to Reconstruct/Replace \$
e.	Comments:

Resilient tiles or sheet flooring Where located? (check all that apply) Instructional space Common area a. Condition Excellent Satisfactory Unsatisfactory | Non-Functioning Critical failure b Year of Last Major Expected Remaining Useful Life C. Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ e. f. Comments: 70. Hard flooring (concrete; ceramic tile; stone etc.) Where located? (check all that apply) Instructional space Common area Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure b Condition Year of Last Major d. Expected Remaining Useful Life c. Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ e. f. Comments: 71. Wood Where located? (check all that apply) Instructional space Common area Condition Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure b **Expected Remaining Useful Life** Year of Last Major Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ Comments: Ceilings (H) 72. Overall condition of ceilings: Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure Year of Last Major Expected Remaining Useful Life c. Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ d.

69.

Comments:

73. Lockers Overall condition of lockers: Excellent Satisfactory Unsatisfactory Non-Functioning Critical failure Year of Last Major **Expected Remaining Useful Life** Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ d. Comments: **Interior Doors** 74. Overall condition of interior door units: Excellent Satisfactory Unsatisfactory | Non-Functioning Critical failure Overall condition of interior door hardware: Excellent Unsatisfactory Non-Functioning Critical failure Satisfactory Year of Last Major Expected Remaining Useful Life Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____ e. Comments: **Interior Stairs (S)** *75.* Overall condition of interior stairs: Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure N/A **Expected Remaining Useful Life** Year of Last Major b. Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ ___ d. Comments: Elevator, lifts and escalators (H) Overall condition of elevators, lifts and escalators Critical Failure Excellent Satisfactory Unsatisfactory Non-Functioning Year of Last Major c. **Expected Remaining Useful Life** Reconstruction/Replacement (Years): Cost to Reconstruct/Replace \$ _____

Comments:

77.	Interior Electrical Distribution (H)			
a.	Interior electrical supply meets current needs:		Yes	No No
b.	Condition of interior electrical distribution:			
	Excellent Satisfactory Unsatisfactory		Non-Functioning	Critical Failure N/A
c.	Year of Last Major Reconstruction/Replacement	d.	Expected Remaining Us (Years):	eful Life
e	Cost to Reconstruct/Replace \$		_	
f.	Comments:			
78.	Lighting Fixtures			
a.	Condition of interior lighting fixtures:			
	Excellent Satisfactory Unsatisfactory		Non-Functioning	Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Us (Years):	eful Life
d.	Cost to Reconstruct/Replace \$		_	
e.	Comments:			
79.	Communications Systems (H)			
a.	Communication systems are adequate		Yes	No
b.	Condition of communications system:			
	Excellent Satisfactory Unsatisfactory		Non-Functioning	Critical Failure N/A
c.	Year of Last Major Reconstruction/Replacement	d.	Expected Remaining Us (Years):	eful Life
e.	Cost to Reconstruct/Replace \$		_	
f.	Comments:			
80.	Swimming Pool and Swimming Pool Systems			
a.	Overall condition of swimming pool and pool syste.	ms:		
	Excellent Satisfactory Unsatisfactory		Non-Functioning	Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Us (Years):	eful Life
d.				
	Cost to Reconstruct/Replace \$		_	

Plumbing (Excluding HVAC Systems)

81. Water Distribution System (H)	
a. Types of pipes (check all that apply):	
Iron Galvanized Copper Lead PVC Other N/A	
b. Overall condition of water distribution system:	
Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure N	A
c. Year of Last Major d. Expected Remaining Useful Life (Years):	
e. Cost to Reconstruct/Replace \$	
f. Comments:	
82. Plumbing Drainage System (H)	
a. Types of pipes (check all that apply):	
Iron Galvanized Copper Lead PVC Other N/A	
b. Overall condition of drainage system:	
Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure	
c. Year of Last Major d. Expected Remaining Useful Life (Years):	
e. Cost to Reconstruct/Replace \$	
f. Comments:	
83. Hot Water Heaters (H)	
a. Type of fuel (check all that apply):	
Oil Natural Gas Electricity Other N/A	
b. Overall condition of water heaters:	
Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure	
c. Year of Last Major d. Expected Remaining Useful Life (Years):	
e. Cost to Reconstruct/Replace \$	
f. Comments:	

84.	Plumbing Fixtures
a.	Overall condition of plumbing fixtures (including toilets, urinals, lavatories, etc.):
]	Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure
b.	Year of Last Major c. Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$
e.	Comments:
HV 85.	AC Systems HVAC Systems Type
a.	Does this building have a central HVAC system? Yes No (skip to next section)
b.	If yes, what type of technology does it use (check all that apply):
	Constant volume (CV) Variable air volume (VAV) Dual-duct or multi-zone Other
86.	Heat Generating Systems (H)
a.	Heat generation source (check all that apply):
]	Boiler/ hot water Boiler/Steam Furnace/forced air Unit ventilation
b.	Overall condition of heat generating systems:
]	Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure
c.	Year of Last Major Reconstruction/Replacement d. Expected Remaining Useful Life (Years):
e.	Cost to Reconstruct/Replace \$
f.	Comments:
87.	Heating Fuel/Energy Systems (H)
a.	Overall condition of heating fuel/energy systems:
]	Excellent Satisfactory Unsatisfactory Non-Functioning Critical Failure
b.	Year of Last Major c. Expected Remaining Useful Life Reconstruction/Replacement (Years):
d.	Cost to Reconstruct/Replace \$
e	Comments:

88.	Cooling/Air Conditioning Generating Systems		
a.	Overall condition of cooling/air conditioning gener	ating s	systems:
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		_
e.	Comments:		
89.	Air Handling and Ventilation Equipment: Supp	ply Ur	nits, Exhaust Units, Relief/Return Units, etc. (H)
a.	Overall condition of air handling and ventilation sy	stems:	
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		_
e.	Comments:		
90. a.	Piped Heating and Cooling Distribution Systems Insulation, etc. (H) Overall condition of piped heating and cooling distribution		
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		_
e.	Comments:		
91.	Ducted Heating and Cooling Distribution System VAVs, Insulation, etc. (H)	ns: D	uctwork, Control Dampers, Fire/Smoke Dampers,
a.	Overall condition of ducted heating and cooling dis	tributi	on systems:
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		_
e	Comments:		

94.	nvac Control Systems (n)		
a.	Overall condition of control systems:		
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		_
e.	Comments:		
Fir	re Safety Systems		
93.	Fire Alarm Systems (H)		
a.	Overall condition of fire alarms:		
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		-
e.	Comments:		
94.	Smoke Detection Systems (H)		
a.	Overall condition of smoke detection systems:		
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		
e.	Comments:		
95.	• • • • • • • • • • • • • • • • • • • •	es, Ki	tchen Hoods, etc. (H)
a.	Overall condition of fire suppression systems:		Non-Europiania Caldinal Edit of N/A
	Excellent Satisfactory Unsatisfactory		Non-Functioning Critical Failure N/A
b.	Year of Last Major Reconstruction/Replacement	c.	Expected Remaining Useful Life (Years):
d.	Cost to Reconstruct/Replace \$		
e	Comments:		

96.	Emergency/Exit Lighting Systems (H)			
a.	Overall condition of emergency/exit lighting systems:			
E	xcellent Satisfactory Unsatisfactory Non-Functioning Critical Failure N/A			
	Year of Last Major c. Expected Remaining Useful Life (Years):			
d. (Cost to Reconstruct/Replace \$			
e. (Comments:			
97.	Emergency/Standby Power Systems (H)			
a. l	Does the building have an emergency or standby power system? Yes No (skip to next section)			
b.	Overall condition of emergency/standby power systems:			
E	xcellent Satisfactory Unsatisfactory Non-Functioning Critical Failure N/A			
	Year of Last Major d. Expected Remaining Useful Life (Years):			
e. (Cost to Reconstruct/Replace \$			
f.	Comments			
Acc	essibility			
98.	Exterior Route (H)			
At lea	le with disabilities should be able to arrive on site, approach the building, and enter as freely as everyone else. ast one route of travel should be safe and accessible for everyone, including people with disabilities. This route include handicapped parking, curb cuts, ramps, and automatic door operators as necessary to enter the ing.			
Is the	ere an accessible exterior route as specified above? Yes No			
99.	Interior Route, Access to Goods and Services, and Restroom Facilities (H)			
The layout of the building should allow people with disabilities to obtain materials or services and use the facilities without assistance. This should include access to general purpose and specialized classrooms, public assembly spaces (such as libraries, gymnasiums, auditoriums), nurse's office, main office, and restroom facilities. Services include drinking fountains, telephones, and other amenities.				
Is the	ere an accessible interior route as specified above? Yes No			
100.	Additional Information on Accessibility			
If the	building lacks accessible interior or exterior routes:			
a. (Cost of improvements needed to provide accessible exterior and interior routes as specified above. \$			
b. (Comments:			

Environment/Comfort/Health

101.	General Appearance					
a.	Overall rating:	Good		Fair	Poor	
b.	Comments:					
102.	Cleanliness					
a.	Overall rating:	Good		Fair	Poor	
b.	Comments:					
103.	Are there walk off 1	natts; grills in entry	way?	Yes	No	
	If Yes: at least 6 Ft.	Long?		Yes	No	
104.	Acoustics					
a.	Overall rating:	Good		Fair	Poor	
b.	Comments:					
105.	Lighting Quality					
a.	Types of lighting in gen	neral purpose classroc	oms (check all t	hat apply):		
	1. Daylight	Fluorescent-not fu	ıll spectrum	3. I	Fluorescent full spectrum	
4	4. Incandescent	5. Other		6. N/A	A	
b.	Overall rating:	Good		Fair	Poor	
c.	Comments:					
106.	Evidence of Vermin					
Is the	ere evidence of active in	festations of?				
a.	Rodents		Yes		No	
b.	Wood-boring or woo	od-eating insects	Yes		No	
c.	Cockroaches		Yes		No	
d.	Other vermin		Yes		No	

Indoor Air Quality

107. Mold
a. Are there visible stains, mold or water damage?
If yes , where? (check all that apply)
Classrooms Supply return grille Other places
b. Are there any noticeable moldy odors? Yes No
If yes , where? (check all that apply)
Classrooms Supply return grille Other places
c. Are interior surfaces constructed of any of the following materials?
Paper-faced or gypsum products? Yes No
Cellulose products (typical ceiling tiles) Yes No
d. Estimated cost of necessary improvements: \$
e. Comments
108. Humidity/Moisture
a. Are any of the following found in/or around the following area?
a. In classrooms b. In other areas
1. Active leaks in roof Yes No
2. Active leaks in plumbing Yes No Yes N
3.Moisture condensation Yes No
b. Rating of humidity/moisture condition in building: Good Fair Poor

109. Ventilation: fresh air intake locations, air filters, etc.

a.	Are there fresh air intakes near the following?						
1.	Near the bus loading area	Yes	No No				
2.	Near truck delivery areas	Yes	No No				
3.	Near garbage storage/disposal areas	Yes	No				
b.	Is there accumulated dirt, dust, or debris arou	and fresh air intakes	s? Yes	No			
c.	Are fresh air intakes free of blockage?		Yes	No			
d.	Is accumulated dirt, dust, or debris in ductwo	ork?	Yes	No			
e.	Are dampers functioning as designed?		Yes	No			
f.	Condition of air filters:	Good	Fair 1	Poor			
g.	Outside air is adequate for occupant load:		Yes	No			
h.	Rating of ventilation/indoor air quality:	Good Fai	r Poor				
i.	Comments						
110.	Indoor air quality (IAQ) plan						
110. a.	Indoor air quality (IAQ) plan Does the school district use EPA's Tools for S	Schools program?	Yes	☐ No			
			Yes Yes	No No			
a.	Does the school district use EPA's <i>Tools for S</i>	sed?					
a. b.	Does the school district use EPA's <i>Tools for S</i> If not, is some other IAQ management plan use Has the District assigned IAQ responsibilities	sed?	Yes	No			
a. b.	Does the school district use EPA's <i>Tools for S</i> . If not, is some other IAQ management plan use Has the District assigned IAQ responsibilities individual?	sed?	Yes	No			
a. b. c.	Does the school district use EPA's <i>Tools for S</i> . If not, is some other IAQ management plan use Has the District assigned IAQ responsibilities individual?	sed? to a designated	Yes Yes	No No			
a.b.c.	Does the school district use EPA's <i>Tools for S</i> If not, is some other IAQ management plan use Has the District assigned IAQ responsibilities individual? Does the school practice IPM?	sed? to a designated milding?	Yes Yes Yes	No No No			
a.b.c.111.	Does the school district use EPA's <i>Tools for S</i> If not, is some other IAQ management plan use Has the District assigned IAQ responsibilities individual? Does the school practice IPM? Is vegetation kept 1 ft. from away from the but Are crevices and holes in walls, floors and particles.	to a designated dilding? vement sealed or	Yes Yes Yes Yes	No No No No No			
a.b.c.111.a.b.	Does the school district use EPA's <i>Tools for S</i> . If not, is some other IAQ management plan use Has the District assigned IAQ responsibilities individual? Does the school practice IPM? Is vegetation kept 1 ft. from away from the but Are crevices and holes in walls, floors and pareliminated?	to a designated dilding? vement sealed or	Yes Yes Yes Yes Yes Yes Yes				

112.	Is there noise in classrooms from HVAC units, traffic, etc. that may impact education?	Yes	No
113.	Has this facility been tested for the presence of Radon?	Yes	No
	If yes:		
a.	Has a passive mitigation system been installed?	Yes	No No
b.	Has an active mitigation system been installed?	Yes	No No
c.	Is Radon test data available?	Yes	No
114.	American Red Cross		
a.	Is there a written agreement with the the American Red Cross for the use of this building as an emergency shelter?	Yes	No
b.	Does this building have an emergency generator to support sheltering operations? (lights, HVAC, etc.)?	Yes	No
If ye :	s, where? (check all that apply)		
	Communication system Fire alarm system Sec	urity system	Lighting
	HVAC Sump pump		
c.	Does this facility have a cooking /food preparation kitchen?	Yes	No
If yes	s, is the area outfitted for:		
	Full preparation Warming capability only		
d.	Check items powered by emergency generator:		
	Kitchen equipment Cooking equipment Ref	rigeration equipm	ent
e.	Potable water:		
	Provided by municipal system?	Yes	No
	On-site wells?	Yes	No
	If on site wells are present, are the wells connected to emergency generator?	Yes	No
f.	Sanitary:		
	Gravity discharge?	Yes	No
	Force main pumping station?	Yes	No
	If pumping station exists, are they connected to emergency generator?	Yes	No