

Building Condition Audit Form

Part 1

Inspector(s): _____
 Building name: _____
 Date: _____

COOLING / VENTILATION SYSTEM

Part 2

Cooling / Ventilation System Characteristics:

1. Space Equipment:
 - a: Direct Expansion: Window Units Single Zone Single Zone Constant Volume Through the Wall All Air Multi-zone Double Duct Other _____
 - b: Air-Water: 2 Pipe Fan Coil Induction Terminal Reheat Variable Volume Reheat Unit Ventilators 4 Pipe Fan Coil Variable Volume Other _____
2. Refrigeration Type & Quality: Reciprocating DX Water Chiller Central Absorption Other _____
 - b: Wood Rafter & Sheathing Wood Truss & Sheathing Other _____
3. Energy Source: Central Plant Electricity Steam Gas / Oil Other _____
4. Heat Rejection Device: Air Condensor Wood Tower Metal Tower Other _____
5. System Capacity: Total _____ Tons
5. Control Type: Electric Pneumatic Other _____

Additional description _____

Part 3 Cooling / Ventilation Components	Prioritization Categories (See Below)						System Rating Total	Deficiency Cost
	1	2	3	4	5	6		
1) Cooling Capacity								
2) Temperature Controls								
3) Piping Ductwork								
4) Noise Level								
5) Energy Consumption Reasonable								
6) Air Circulation & Venting								
7) Reliability								
8) Economizer Cyc. Inst.								
9) Filtration								
10) Humidity								
11) Maintainability								
Rating System Totals								

Part 4

System Rating		System Multiplier		System Deficiency		Building Value		Deficiency Cost For System
	X		Equals		X		Equals	\$

Part 5

Rating Explanation:

Row	Column	Notes