

Building Condition Audit Form

Part 1

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

HEATING SYSTEM

Part 2

Heating System Characteristics:

1. Transfer Medium: Steam Hot Water Air Electric Other _____
2. Space Equipment: Radiators Convectors Finned Tube Baseboard 2 Pipe Fan Coil 4 Pipe Fan Coil
 Unit Ventilators Radiant Multizone Double Duct Terminal Reheat
 Constant Volume Single Zone Other _____
3. Energy Source: Central Plant Electricity Steam Gas / Oil Other _____
4. System Capacity: Total _____ BTUH
5. Control Type: Electric Pneumatic Other _____

Additional description _____

Part 3 Heating Components	Prioritization Categories (See Below)						System Rating Total	Deficiency Cost
	1	2	3	4	5	6		
1) Heating Capacity								
2) Temperature Controls								
3) Heating All Seasons								
4) Noise Level								
5) Energy Consumption								
6) Air Circulation & Venting								
7) Filtration								
8) Humidity Control								
9) 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