## 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:	T:01-
Phone Fax	Title Email
Address of Building or Complex:	
Building Name: Total Floors: Building Age: Built in:	– Addition: Age:
Building Operator:Building Engineer:Building Manager:	Phone:
Building Type: (Dorm, Office, Classi Building Total Square Footage: Additions/Renovations: Describe Renovations:	
Operating Schedule: Daily: Electric Meter for Building: Gas Meter for Building: Water Meter for Building: Steam Meter for Building: Chilled Water Meter for Building:	Weekend:

## **Issues to be Addressed by Performance Contract**

(Include 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.)