

2020 Building Condition Survey Instrument

1. Name of School District Greenburgh Central School District
2. Building Name Highview Elementary School
3. SED District Number

6	6	0	4	0	7	0	6
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District BEDS Code
4. SED Control Number

0	0	0	2
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5. Survey Inspection Date February 27, 2020
6. Building 911 Address 200 North Central Avenue
7. City Hartsdale 8. Zip Code 10530
9. Certificate of Occupancy Status:
- | | |
|-------------------------------------|---------------|
| <input checked="" type="checkbox"/> | A – Annual |
| <input type="checkbox"/> | T – Temporary |
| <input type="checkbox"/> | N – None |
10. Certificate of Occupancy Expiration Date: April 1, 2021
- 10a. Is this a manufactured building? (Relocatable, modular, portable)
- ☐ Yes ☒ No
11. Have there been renovations or construction in the building during the past 12 months?
- ☐ Yes ☒ No
12. Was major construction/renovation work since 2015 conducted when school was in session?
- ☒ Yes ☐ No
13. Estimated capital construction expenses estimated for the building through the 2024 calendar year excluding maintenance (to be answered after building inspection is complete)
- \$15,233,600**
14. Overall building rating (to be answered after the building inspection is complete)
- ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Poor
15. Was overall building rating established after consultation with Health and Safety committee in accordance with Commissioner's Regulations 155.4(c)(1)?
- ☐ Yes ☒ No

16. A/E Firm Name BBS Architects, Landscape Architects, & Engineers, P.C.
17. Firm Address 244 E. Main Street, Patchogue, New York 11772
18. Phone/Fax Number 631-475-0349/631-475-0361
19. E-mail jweydidg@bbsarch.com
20. A/E Name James W. Weydig AIA, LEED AP
21. A/E License number 024653

Building Age and Gross Square Footage

22. Building Age

	Year
Original Construction	<u>1955</u>
Addition #1	<u>1964</u>
Addition #2	<u></u>
Addition #3	<u></u>
Addition #4	<u></u>
Addition #5	<u></u>
Addition #6	<u></u>

23. Square feet of Construction

	Sq. Feet
Original Construction	<u>28,686</u>
Addition #1	<u>11,199</u>
Addition #2	<u></u>
Addition #3	<u></u>
Addition #4	<u></u>
Addition #5	<u></u>
Addition #6	<u></u>

24. Gross Square Footage building as currently configured: 39,855

25. Number of Floors: 2

26. How many full-time and part-time custodians are employed at the school (or work in the building)?

	Count Employees
Full-time custodians:	<u>3</u>
Part-time custodians:	<u>0</u>
Totals:	<u></u>

Building Ownership and Occupancy Status

27. Building Ownership (check one):

- ☒ Owned and used by district
- ☐ Owned by District and leased to non-district entity
- ☐ Owned by district, part used by district, part leased to non-district entity
- ☐ Owned by non-district entity and leased to district

28. For which of the following purposes is the building currently used? (check all that apply)

- ☒ Used for student instructional purposes
- ☐ Used for district administration
- ☐ Used for other district purposes
- ☐ Used by other organization(s)

28a. Describe for use for other district purposes:

Building Users

29. How many students were registered to receive instruction in this building as of October 1, 2019? (If none, enter "0") and skip to "Program Spaces" section. (Do NOT include evening class students)

244

30. Of these registered students, how many receive most of their instruction in:

Permanent instructional spaces (i.e., regular classrooms)

Temporary instructional spaces (i.e., portable or demountable classrooms) attached to the building:

Non-instructional spaces used as instructional spaces:

31. If the number of non-instructional spaces used as instructional spaces is greater than zero, which types of non-instructional spaces were being used for instructional purposes on October 1, 2019? (check all that apply)

- | | | |
|------------------------------------|----------------------------------|--|
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Library | <input type="checkbox"/> Storage Space |
| <input type="checkbox"/> Gymnasium | <input type="checkbox"/> Lobby | <input type="checkbox"/> Other (please describe) |

☐ Administrative Spaces ☐ Stairwell _____

31a. Describe other types of non-instructional spaces being used for instructional purposes:

32. Grades Housed (check all that apply):

<input type="checkbox"/> Pre-K	<input type="checkbox"/> 7
<input type="checkbox"/> K	<input type="checkbox"/> 8
<input type="checkbox"/> 1	<input type="checkbox"/> 9
<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 10
<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 11
<input type="checkbox"/> 4	<input type="checkbox"/> 12
<input type="checkbox"/> 5	<input type="checkbox"/> Ungraded
<input type="checkbox"/> 6	<input type="checkbox"/> Other

33. For how many instructional days during the 2018-19 school year (July 1 through June 30, was the building closed due to facilities failures, system malfunctions, structural problems, etc? (If none, enter "0") 0

34. Is the building used for instructional purposes in the summer? ☒ Yes ☐ No

Program Spaces

35. Number of Instructional classrooms: 22

36. Gross square footage of all instruction classrooms (combined): 21,120

37. Other spaces provided (check all that apply):

<input type="checkbox"/> N/A (none)	<input type="checkbox"/> Guidance	<input checked="" type="checkbox"/> Multipurpose Rooms	<input checked="" type="checkbox"/> Special Education
<input checked="" type="checkbox"/> Administration	<input checked="" type="checkbox"/> Gymnasium	<input checked="" type="checkbox"/> Music	<input type="checkbox"/> Swimming Pool
<input checked="" type="checkbox"/> Art	<input checked="" type="checkbox"/> Health Suite	<input type="checkbox"/> Pre-K	<input checked="" type="checkbox"/> Teacher Resource
<input type="checkbox"/> Audio Visual	<input type="checkbox"/> Home & Careers	<input type="checkbox"/> Remedial Rooms	<input type="checkbox"/> Technology/Shop
<input type="checkbox"/> Auditorium	<input checked="" type="checkbox"/> Kitchen	<input type="checkbox"/> Resource Room	<input type="checkbox"/> Other (describe)
<input checked="" type="checkbox"/> Cafeteria	<input type="checkbox"/> Large Group Instruction	<input checked="" type="checkbox"/> Science Lab	_____
<input checked="" type="checkbox"/> Computer Room	<input checked="" type="checkbox"/> Library		

Space Adequacy

38. Rating of Space Adequacy

☐ Good ☒ Fair ☐ Poor

38a. Enter Comments: The commons area of the 1964 addition is used for instructional purposes. Some one on one remedial teaching is conducted in corridor spaces. Girls locker room is utilized for storage of gym equipment and PE office

Site Utilities

39. Water (H)

☒ Yes ☐ No

a. Type of Service:

☒ Municipal or Utility provided ☐ Well ☐ Other

b. Types of Water Service:

☐ Iron

☐ Galvanized

☒ Copper

☐ Lead

☐ PVC

☐ Other

☐ N/A (None)

c. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

d. Year of Last Major Reconstruction/Replacement 1955

e. Expected Remaining Useful Life (Years): 10

f. Cost to Reconstruct/Replace: \$50,000

g. Comments: Provide an RPZ type backflow prevention device.

40. Site Sanitary (H)

☒ Yes ☐ No

a. Type of Service:

☒ Municipal or Utility provided ☐ Site Septic ☐ Other

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major Reconstruction/Replacement 1955

d. Expected Remaining Useful Life (Years): 10

- e. Cost to Reconstruct/Replace: \$ _____
- f. Comments: _____

41. Site Gas (H)

☒ Yes ☐ No

a. Type of Gas Service:

☒ Natural Gas ☐ Liquid Petroleum

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major
Reconstruction/Replacement 1955

d. Expected Remaining Useful Life
(Years): 10

e. Cost to Reconstruct/Replace: \$200,000

f. Comments: Upgrade gas service to allow for dual fuel firing of boilers.

42. Site Fuel Oil (H)

☒ Yes ☐ No

a. Number of above ground tanks _____

1. Capacity of above ground tanks (gallons) _____

b. The number of below ground tanks 1

1. Capacity of below ground tanks (gallons) 5,000

c. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

d. Year of Last Major
Reconstruction/Replacement 1998

e. Expected Remaining Useful Life
(Years): 18

f. Cost to Reconstruct/Replace: \$ _____

g. Comments: _____

43. Site Electrical, Including Exterior Distribution (H)

☒ Yes ☐ No

a. Service Provider:

☒ Municipal or utility provided

☐ Self-Generated

☐ Other

☐ N/A

b. Type of Service:

☐ Above Ground

☒ Below Ground

☐ N/A

c. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

d. Year of Last Major
Reconstruction/Replacement 1955

e. Expected Remaining Useful Life
(Years): 10

f. Cost to Reconstruct/Replace: \$

g. Comments: _____

Site Features

44. Closed Drainage Pipe Stormwater Management System

a. Does this facility have a closed drainage pipe stormwater management system?

☒ Yes

☐ No (If selecting No, skip to the next numbered question)

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major
Reconstruction/Replacement 1964

d. Expected Remaining Useful Life
(Years): 25

e. Cost to Reconstruct/Replace: \$70,000

f. Comments: Clear out and maintain existing drainage structures, provide additional drainage structures at north paved area used for mini bus turnaround

45. Open Drainage Pipe Stormwater Management System

a. Does this facility have an open stormwater system (ditch)?

☐ Yes

☒ No (If selecting No, skip to the next numbered question)

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: _____

46. Catch Basins/Drop Inlets/Manholes

a. Does this facility have catch basins/drop inlets/manholes?

☒ Yes ☐ No (If selecting No, skip to the next numbered question)

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major Reconstruction/Replacement 1964 d. Expected Remaining Useful Life (Years): 25

e. Cost to Reconstruct/Replace: \$30,000

f. Comments: Provide additional catch basins and manholes in conjunction with new drainage structures

47. Culverts

a. Does this facility have culverts?

☐ Yes ☒ No (If selecting No, skip to the next numbered question)

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. Infiltration basins/chambers

a. Does this facility have infiltration basins/chambers?

☐ Yes ☒ No (If selecting No, skip to the next numbered question)

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. Retention basins

a. Does this facility have retention basins?

☐ Yes ☒ No (If selecting, skip to the next numbered question)

- 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: _____

51. Wetponds

- a. Does this facility have wetponds?
- ☐ Yes ☒ No (If selecting No, skip to the next numbered question)
- 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: _____

52. Manufactured Stormwater Proprietary Units?

- a. Does this facility have proprietary units?
- ☐ Yes ☒ No (If selecting No, skip to the next numbered question)
- 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: _____

53. Point of Outfall Discharge: (check all that apply)

- ☐ Municipal storm sewer system
- ☐ Combined sewer system
- ☐ Surface Water
- ☐ On-Site Recharge
- ☐ Other (describe)
- ☐ Not Applicable

54. Outfall Reconnaissance Inventory

Were all stormwater outfalls inspected during dry weather for signs of non-stormwater discharge?

☐ Yes

☐ No

☐ Not Applicable

Other Site Features

55. Pavement (Roadways and Parking Lots)

☒ Yes ☐ No

a. Type: (check all that apply)

☐ Concrete

☒ Asphalt

☐ Gravel

☐ Other

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major
Reconstruction/Replacement 2017

d. Expected Remaining Useful Life
(Years): 15

e. Cost to Reconstruct/Replace: \$125,000

f. Comments: Parking lot was overlayed in 2017 as of 2020 there are several cracks in the asphalt pavement at the west parking lot and bus loop – remove and replace damaged areas of asphalt (4,000 sf) Remove asphalt pavement at north paved area used for mini bus turnaround and replace with vehicular traffic bearing asphalt pavement (9,000 sf)

56. Sidewalks

☒ Yes ☐ No

a. Type: (check all that apply)

☒ Asphalt

☒ Concrete

☐ Gravel

☐ Paver

☐ Other

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major Reconstruction/Replacement 2017

d. Expected Remaining Useful Life (Years): _____

e. Cost to Reconstruct/Replace: \$35,000

f. Comments: Remove narrow asphalt walks around 1964 classroom addition and replace with 4' wide concrete walks (2,500sf), replace asphalt walk outside room 1 & 2 with new concrete walk connecting to stair (500sf), repair broken concrete walks at the front of the building and a entry door by art room (850 sf)

57. Playgrounds and Playground Equipment

☒ Yes ☐ No

a. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

b. Year of Last Major Reconstruction/Replacement 2007

c. Expected Remaining Useful Life (Years): 5

d. Cost to Reconstruct/Replace: \$410,000

e. Comments: Remove existing playground structure and replace with new structure that is ADA compliant and suitable for age group using it. Provide rubber safety surface for fall protection and ADA access (1,600sf)

58. Athletic Fields and Play Fields

☒ Yes ☐ No

a. Condition ☐ Excellent ☐ Satisfactory ☒ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

b. Year of Last Major Reconstruction/Replacement 2014

c. Expected Remaining Useful Life (Years): 5

d. Cost to Reconstruct/Replace: \$75,000

e. Comments: Existing grass play area on south side of building is all dirt and rocks and not safe as a play area. Regrade play area and provide new topsoil and grass. Consider irrigation to keep grass growing (7,000 sf). Install drainage structure in flat graded areas.

f. Does the facility have synthetic turf fields?

☐ Yes ☒ No

1. If **yes**, how many synthetic turf fields? _____

2. Expected Remaining Useful Life of Synthetic Turf Field(s): _____

3. Type of synthetic turf infill: _____

59. Exterior Bleachers/Stadiums

☐ Yes ☒ No

- a. Condition ☐ 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: _____
- f. Seating Capacity _____

60. Related Structures (such as press boxes, dugouts, climbing walls, etc.)

☐ Yes ☒ No (If selecting No, skip to the next numbered question)

- a. Condition ☐ 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: _____

Building Structure

61. Foundation (S)

- a. Type (check all that apply):

☒ Reinforced Concrete

☐ Masonry on Concrete Footing

☐ Other (Specify): _____

- b. Evidence of structural concerns: (check all that apply)

☐ Structural Cracks

☐ Heaving/Jacking

☐ Decay/Corrosion

☐ Water Penetration

☐ Unsupported Ends

☐ Other

☐ None

- c. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

- d. Year of Last Major Reconstruction/Replacement 1964 e. Expected Remaining Useful Life (Years): 25
- f. Cost to Reconstruct/Replace: \$ _____
- g. Comments: _____

62. Piers (\$)

☐ Yes ☒ No

- a. Type (check all that apply):

☐ Concrete

☐ Masonry

☐ Steel

☐ Stone

☐ Wood

☐ Other (Specify): _____

☐ N/A (none)

- b. Evidence of structural concerns: (check all that apply)

☐ Structural Cracks

☐ Heaving/Jacking

☐ Decay/Corrosion

☐ Water Penetration

☐ Unsupported Ends

☐ Other

☐ None

- 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: _____

63. Columns (\$)

Type (check all that apply):

- ☐ Concrete
- ☐ Masonry
- ☒ Steel
- ☐ Stone
- ☐ Wood
- ☐ Other (Specify): _____
- ☐ N/A (none)

a. Evidence of structural concerns: (check all that apply)

- ☐ Structural Cracks
- ☐ Heaving/Jacking
- ☐ Decay/Corrosion
- ☐ Water Penetration
- ☐ Unsupported Ends
- ☐ Other
- ☒ None

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major Reconstruction/Replacement 1955

d. Expected Remaining Useful Life (Years): 25

e. Cost to Reconstruct/Replace: \$ _____

f. Comments: _____

64. Footings (\$)

Type (check all that apply):

- ☒ Concrete
- ☐ Other (Specify): _____

a. Evidence of structural concerns: (check all that apply)

- ☐ Structural Cracks
- ☐ Heaving/Jacking
- ☐ Decay/Corrosion

☐ Water Penetration

☐ Unsupported Ends

☐ Other

☒ None

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major
Reconstruction/Replacement 1955

d. Expected Remaining Useful Life
(Years): 25

e. Cost to Reconstruct/Replace: \$ _____

f. Comments: _____

65. Structural Floors (\$)

a. Type (check all that apply):

☐ Concrete Deck on Wood Structure

☐ Concrete/Metal Deck/Metal Joists

☐ Cast-in-Place Concrete Structural System

☐ Precast Concrete Structural System

☐ Reinforced Concrete Slab on Grade

☐ Wood Deck on Wood Trusses

☐ Wood Deck on Wood Joists

☒ Other (Specify): Concrete over open wire lath form / steel frame

b. Evidence of Structural Concerns with Floor Support System (Beams/Joists/Trusses, etc.)
(check all that apply):

☐ Structural Cracks

☐ Unsupported Ends

☐ Rot/Decay/Corrosion

☐ Deflection

☐ Seriously Damaged/Missing Components

☐ Other Problems

☒ None

c. Evidence of Structural Concerns with Structural Floor Deck (check all that apply):

- ☐ Cracks
- ☐ Deflection
- ☐ Rot/Decay/Corrosion
- ☒ None

- d. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure
- e. Year of Last Major Reconstruction/Replacement 1955
- f. Expected Remaining Useful Life (Years): 25
- g. Cost to Reconstruct/Replace: \$ _____
- h. Comments: _____

Building Envelope

66. Exterior Walls/Columns (\$)

- a. Type (check all that apply):
- ☒ Aluminum/Glass Curtain Wall
- ☒ Brick
- ☐ Concrete
- ☐ Composite Insulated Panels
- ☐ Masonry
- ☐ Steel
- ☐ Wood
- ☐ Other (Specify): _____
- b. Evidence of structural concerns with Support System (columns, base plates, connections, etc.) (check all that apply):
- ☐ Structural Cracks
- ☐ Rot/Decay/Corrosion
- ☐ Other Problems
- ☒ None
- c. Evidence of Concerns with Exterior Cladding (check all that apply):
- ☒ Cracks/Gaps
- ☐ Inadequate flashing

☐ Efflorescence

☒ Moisture Penetration

☐ Rot/Decay/Corrosion

☐ Other Problems

☐ None

d. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

e. Year of Last Major Reconstruction/Replacement 1955 f. Expected Remaining Useful Life (Years): 25

g. Cost to Reconstruct/Replace: \$15,000

h. Comments: North east corner of building at grade level water is entering the building through the exterior wall into the art room storage area. Crack seal and or repoint cracks in masonry wall and grade area outside wall to pitch away from the building.

67. Chimneys (\$)

☒ Yes

☐ No

a. Type (check all that apply):

☒ Masonry

☐ Concrete

☐ Metal

☐ Wood

☐ Other (Specify): _____

b. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Year of Last Major Reconstruction/Replacement 1955 d. Expected Remaining Useful Life (Years): 10

e. Cost to Reconstruct/Replace: \$50,000

f. Comments: Repoint masonry mortar joints, replace concrete cap with stainless steel chimney cap

68. Parapets (\$)

☐ Yes

☒ No

a. Construction Type (check all that apply):

☐ Masonry

☐ Concrete

☐ Metal

☐ Wood

☐ Other (Specify): _____

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: _____

69. Exterior Doors

a. Condition ☐ Excellent ☒ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

b. Do any exterior doors have magnetic locking devices?

☐ Yes

☒ No

c. Safety/Security features are adequate?

☒ Yes

☐ No

d. Year of Last Major
Reconstruction/Replacement 1964

e. Expected Remaining Useful Life
(Years): 5

f. Cost to Reconstruct/Replace: \$251,000

g. Comments: Replace exterior aluminum frame and single pane glass doors and hardware at classrooms and entries to the building – 19 single leaf doors and 5 pairs of doors. Aluminum door frame to be replaced with window replacement item

70. Exterior Steps, Stairs, Ramps (\$)

☒ Yes

☐ No

a. Construction Type (check all that apply):

☒ Concrete

☐ Paver

☐ Steel

☐ Wood

☐ Other (Specify): _____

c. Condition ☐ Excellent ☐ Satisfactory ☒ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

d. Year of Last Major Reconstruction/Replacement 1955

e. Expected Remaining Useful Life (Years): 5

f. Cost to Reconstruct/Replace: \$300,000

g. Comments: Remove existing asphalt and concrete steps along south side of building by room 1 and 2 and replace with new concrete and new retaining wall. Provide ramp transition to grade at exit doors by room 1, 16, 17, 18, 19 and a 2 pair exit doors by room 19 and 15 in 1964 addition. Reconstruct stairs at front of building that lead down to lower ball field and playground

71. Fire Escapes (\$)

a. Does this facility one or more fire escapes?

☐ Yes ☒

b. Condition ☐ Excellent ☐ Satisfactory ☐ Unsatisfactory ☐ Non-Functioning ☐ Critical failure

c. Safety features adequate

☐ Yes ☐

d. Year of Last Major Reconstruction/Replacement _____

e. Expected Remaining Useful Life (Years): _____

f. Cost to Reconstruct/Replace: \$

g. Comments: _____

72. Windows

a. Window Material: (check all that apply):

☒ Aluminum

☐ Steel

☐ Vinyl

☐ Solid Wood

☐ Wood w/External Cladding System

☐ Other (Specify): _____

- b. Condition ☐ Excellent ☐ Satisfactory ☒ Unsatisfactory ☐ Non-Functioning ☐ Critical failure
- c. All rescue windows are operable:
☒ Yes ☐ No ☐ N/A
- d. Year of Last Major Reconstruction/Replacement 1955 e. Expected Remaining Useful Life (Years): 5
- f. Cost to Reconstruct/Replace: \$2,080,000
- g. Comments: Replace all aluminum frame and single pane glass window units with new aluminum frame and insulated glass window units – curtain wall and ribbon windows (8,000sf).

73. Roof & Skylights (S)

- ☒ Yes ☐ No
- a. Type of Roof Construction (check all that apply):
- ☐ Concrete on metal deck on metal trusses/joists
- ☐ Concrete (poured or plank) on concrete beams
- ☐ Gypsum (poured or plank) on metal trusses/joists
- ☒ Metal deck on metal trusses/joists
- ☐ Wood deck on wood trusses/joists
- ☐ Wood deck on metal trusses/joists
- ☐ Tectum on metal trusses/joists
- ☒ Other (Specify): Concrete plank on steel joists
- b. Type of Roofing Material (check all that apply):
- ☐ Single-ply membrane
- ☒ Built-Up
- ☐ Asphalt shingle
- ☐ Pre-formed metal
- ☐ IRMA
- ☐ Slate
- ☐ Fluid applied seamless surfacing
- ☐ Other (Specify): _____
- c. Evidence of Structural Concerns with Roof System (Beams/Joists/Trusses, etc.) (check all that apply):

- ☐ Structural Cracks
- ☐ Unsupported Ends
- ☐ Rot/Decay/Corrosion
- ☐ Deflection
- ☐ Seriously Damaged/Missing Components
- ☐ Other Problems
- ☒ None

d. Evidence of Structural Concerns with Structural Roof Deck (check all that apply):

- ☐ Cracks
- ☐ Deflection
- ☐ Rot/Decay/Corrosion
- ☒ None

e. Does this facility have skylights?

- ☒ Yes
- ☐ No

f. Skylight Material (check all that apply):

- ☒ Plastic
- ☐ Glass
- ☐ Other
- ☐ N/A

g. Overall condition of skylights?

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

h. Evidence of Structural Concerns with Roofing, Skylights, Flashings & Drains (check all that apply):

☒ Failures/Splits/Cracks

☒ Rot/Decay/Corrosion

☐ Inadequate flashings/curbs/pitch pockets

☒ Inadequate or poorly functioning floor drains

☒ Evidence of water penetrations/active leaks

☐ Other (Specify): _____

☐ None

i. Overall condition of Roof & Skylights?

☐ Excellent

☐ Satisfactory

☒ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

j. Year of Last Major
Reconstruction/Replacement 1996

k. Expected Remaining Useful Life
(Years): 2

l. Cost to Reconstruct/Replace: \$2,450,500

m. Comments: Replace all built-up flat roof areas with new 2 ply modified SBS roof system (40,500 sf), provide additional roof drains replace roof hatch

Building Interior

74. Interior Bearing Walls & Fire Walls (\$)

☒ Yes

☐ No

a. Overall condition of interior bearing walls & fire walls:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 1955

c. Expected Remaining Useful Life
(Years): 25

d. Cost to Reconstruct/Replace: \$35,000

- e. Comments: Remove painted infill panels at steel frame gymnasium partition. Replace with impact resistant fire rated gypsum board panels. Remove glass wall at first floor that overlooks the gym and replace with steel stud and gyp bd fire rated partition, remove plate glass at principal office wall and replace with fire rated glass panels; remove glazing at serving line wall and install fire rated glass panels for 1 hr fire rating
-

75. Other Interior Walls

☒ Yes ☐ No

- a. Overall condition of interior bearing walls & fire walls:

- ☐ Excellent
☒ Satisfactory
☐ Unsatisfactory
☐ Non-Functioning
☐ Critical Failure

- b. Year of Last Major Reconstruction/Replacement 1955

- c. Expected Remaining Useful Life (Years): 25

- d. Cost to Reconstruct/Replace: \$ _____

- e. Comments: _____

76. Carpet

☒ Yes ☐ No

- a. Where located (check all that apply):

- ☐ Classrooms
☐ Corridors
☒ Offices
☐ Assembly Spaces (auditorium, gym, playroom, etc.)
☐ Other Areas (Specify): _____

- b. Overall 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: \$9,600
- f. Comments: Remove carpet from OT / PT room – issues with water damage. Replace with new carpet or durable rubber resilient flooring for the needs of that space (800 sf)

77. Resilient tiles or sheet flooring

☒ Yes ☐ No (If selecting No, skip to the next numbered question)

- a. Where located (check all that apply):

☒ Classrooms

☒ Corridors

☒ Offices

☐ Assembly Spaces (auditorium, gym, playroom, etc.)

☐ Other Areas (Specify): _____

- b. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

- c. Year of Last Major Reconstruction/Replacement 1990 d. Expected Remaining Useful Life (Years): 25
- e. Cost to Reconstruct/Replace: \$
- f. Comments: _____

78. Hard flooring (concrete; ceramic tile; stone etc.)

☒ Yes ☐ No (If selecting No, skip to the next numbered question)

- a. Where located (check all that apply):

☐ Classrooms

☒ Corridors

- ☐ Offices
- ☐ Assembly Spaces (auditorium, gym, playroom, etc.)
- ☒ Kitchen
- ☒ Locker Rooms/Toilet Rooms
- ☒ Other Areas (Specify): Toilet rooms

b. Overall condition:

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

c. Year of Last Major Reconstruction/Replacement 1955

d. Expected Remaining Useful Life (Years): 10

e. Cost to Reconstruct/Replace: \$74,500

f. Comments: Remove original ceramic tile floors at boys and girls toilet rooms and staff toilets and replace with new ceramic floor tile. At utility storage room behind kitchen provide poured concrete slab over existing exposed stone (1,300 sf)

79. Wood Flooring

☐ Yes ☒ No (If selecting No, skip to the next numbered question)

a. Where located (check all that apply):

- ☐ Classrooms
- ☐ Corridors
- ☐ Offices
- ☐ Assembly Spaces (auditorium, gym, playroom, etc.)
- ☐ Other Areas (Specify): _____

b. Overall 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: _____

80. Ceilings (H)

☒ Yes

☐ No

a. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 1996

c. Expected Remaining Useful Life
(Years): 10

d. Cost to Reconstruct/Replace: \$ _____

e. Comments: _____

81. Lockers

☒ Yes

☐ No

a. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 1955

c. Expected Remaining Useful Life
(Years): 5

d. Cost to Reconstruct/Replace: \$50,000

- e. Comments: Remove lockers and showers from girls locker room and convert room to storage for gym equipment
-

82. Interior Doors

☒ Yes

☐ No

- a. Overall condition of door units:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

- b. Overall condition of interior door hardware:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

- c. Year of Last Major Reconstruction/Replacement 2010

- d. Expected Remaining Useful Life (Years): 10

- e. Cost to Reconstruct/Replace: \$85,000
-

- f. Comments: Remove and replace 6 pairs of doors – (1) pair at cross corridor by stair on ground floor; (1) pair at the stair by the main entry; (3) pair at gym and (1) pair at entry vestibule. Provide new doors with panic devices and latching door hardware and magnetic hold open devices. Remove and replace 10 single doors – (2) at cafeteria serving line, (1) at utility storage room, (6) at B & G toilet rooms. Provide new door and hardware
-

83. Interior Stairs (H)

☒ Yes

☐ No

- a. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

b. Stair Material:

☒ Concrete

☐ Steel

☐ Wood

☐ Other

c. Year of Last Major
Reconstruction/Replacement 1955

d. Expected Remaining Useful Life
(Years): 25

e. Cost to Reconstruct/Replace: \$

f. Comments:

84. Elevator, Lift & Escalators (H)

☒ Yes

☐ No

a. Overall condition of interior bearing walls & fire walls:

☐ Excellent

☐ Satisfactory

☒ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 1998

c. Expected Remaining Useful Life
(Years): 0

d. Cost to Reconstruct/Replace: \$300,000

e. Comments: Existing elevator is not functioning and needs to be replaced. The existing cab is non-ADA compliant. Remove existing elevator and replace with new ADA compliant elevator

85. Swimming Pool & Swimming Pool Systems (H)

☐ Yes

☒ No

a. Overall condition of interior bearing walls & fire walls:

☐ 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: \$ _____

Comments: _____

86. Interior Bleachers

☐ Yes

☒ No

a. Overall condition of interior bleachers:

☐ 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: _____

HVAC Systems

Heat Generating Systems (H)

☒ Yes

☐ No

a. Heat generation source (check all that apply):

☐ Biomass

☒ Boiler/Hot Water

☐ Boiler/Steam

☐ Cogeneration Plant

☐ Electric

☐ Furnace/Forced Air

☐ Geothermal

- ☐ Heat Pump
- ☐ Unit Ventilation
- ☐ Other

b. Overall condition of heat generating systems:

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

c. Year of Last Major Reconstruction/Replacement 1955

d. Expected Remaining Useful Life (Years): 5

e. Cost to Reconstruct/Replace: \$4,660,000

f. Comments: Replace 2 original Smith Mills boilers (\$800k). Provide unit vents for mechanical fresh air in all rooms (30) (\$2.7 mil). Repair OT/PT unit to ensure proper operation (\$20k). Repair leak in boiler (\$30k). Replace gym air handling unit for proper operation (\$175k). Repair damaged boiler insulation (\$30k). Replace the damaged cabinet heater front in the new wing boys room (\$5k). Add HW heat to the OT/PT room to replace electric heat (\$35k). Add a natural gas detection system in the boiler room (\$30k). Replace the noisy 2nd floor hall exhaust fan (\$25k). Replace the new wing AHU's and provide an AHU for the cafeteria (\$800k).

88. Ventilation System (exhaust fans, etc.) (H)

☒ Yes ☐ No

a. Heat generation source (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Natural Ventilation | <input type="checkbox"/> Heat Pump |
| <input checked="" type="checkbox"/> Central System | <input type="checkbox"/> Split System/Variable Refrigerant |
| <input type="checkbox"/> Energy Recovery Ventilator | <input checked="" type="checkbox"/> Powered Relief Air System |
| <input type="checkbox"/> Rooftop Units | <input type="checkbox"/> Gravity/Barometric Relief |
| <input type="checkbox"/> Unitary (UV's, FC/BC, PTAC) | <input type="checkbox"/> Other (specify) _____ |
| <input type="checkbox"/> Forced Air Furnace | |

b. Overall condition of ventilation system:

- ☐ Excellent
- ☒ Satisfactory

- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

- c. Year of Last Major Reconstruction/Replacement 1955
- d. Expected Remaining Useful Life (Years): 5
- e. Cost to Reconstruct/Replace: \$512,000
- f. Comments: Replace non-operational original rooftop exhaust fans (18) (\$450k). Ensure that exhaust fans run during all occupied times (\$50k). Brick up removed exhaust fan in art room (\$10k). Replace the missing exhaust fan grille in the nurses office and the new wing boys room (\$2k).

89. Mechanical Cooling/Air Conditioning Systems

☒ Yes ☐ No

- a. Types of Mechanical Cooling (check all that apply):

- ☐ Chiller/Chilled Water
- ☐ Geothermal
- ☐ Air Cooled
- ☐ Water Cooled
- ☒ DX/Split System
- ☐ Other

- b. Overall condition:

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

- c. Year of Last Major Reconstruction/Replacement 2005
- d. Expected Remaining Useful Life (Years): 5
- e. Cost to Reconstruct/Replace: \$400,000
- f. Comments: Provide A/C for the cafeteria.

90. Piped Heating & Cooling Distribution System: Piping, Pumps, Radiators, Convectors, Traps, Insulation, etc. (H)

☒ Yes ☐ No

a. Overall condition:

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 1955

c. Expected Remaining Useful Life
(Years): 10

d. Cost to Reconstruct/Replace: \$15,000

e. Comments: Insulate all bare pipe in boiler room for safety & efficiency.

91. Ducted Heating & Cooling Distribution Systems: Ductwork, Control Dampers, Fire/Smoke Dampers, VAVs, Insulation, etc. (H)

☒ Yes ☐ No

a. Overall condition:

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 1955

c. Expected Remaining Useful Life
(Years): 10

d. Cost to Reconstruct/Replace: \$

e. Comments:

92. HVAC Control Systems (H)

☒ Yes ☐ No

a. Types of Mechanical Cooling (check all that apply):

- ☒ Pneumatic
- ☐ Electric
- ☐ Digital Direct Control (DDC)

- ☐ Web Based DDC
- b. Overall condition:
- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure
- c. Year of Last Major Reconstruction/Replacement 1955 d. Expected Remaining Useful Life (Years): 5
- e. Cost to Reconstruct/Replace: \$450,000
- f. Comments: Upgrade all controls to DDC to ensure proper occupied operation, including exhaust fan day/night control, add hot water reset and night setback.

Plumbing

93. Water Supply System (H)

☒ Yes ☐ No

- a. Types of Pipes (check all that apply):

☐ Asbestos/transite

☒ Copper

☐ Galvanized

☐ Iron

☐ Lead

☐ PVC/CPVC/PEX/Plastic

☐ Other (Specify): _____

- b. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

- c. Year of Last Major Reconstruction/Replacement 1965 d. Expected Remaining Useful Life (Years): 10
- e. Cost to Reconstruct/Replace: \$20,000
- f. Comments: Insulate water service piping adjacent to the gas meter (\$10k). Provide a water hammer arrestor on the water line (\$10k).

94. Sanitary System (H)

☒ Yes ☐ No

- a. Types of Pipes (check all that apply):

☐ Asbestos/transite

☐ Copper

☐ Galvanized

☒ Iron

☐ Lead

☐ PVC/CPVC/PEX/Plastic

☐ Other (Specify): _____

- a. Types of Special Sanitary Systems (check all that apply):

☐ Acid Waste & Vent

☐ Grease Interceptor

☐ Oil Separator

☐ Pumping Station

☐ Sediment Trap

☐ Septic Tank

☐ Waste Water Treatment Plant

- c. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

- d. Year of Last Major Reconstruction/Replacement 1965 e. Expected Remaining Useful Life (Years): 10
- f. Cost to Reconstruct/Replace: \$45,000
- g. Comments: Provide a grease trap in the kitchen (\$40k). Provide air gap drains on the kitchen 3 compartment sink (\$5k).

95. Storm Water Drainage System (H)

☒ Yes ☐ No

- a. Types of Pipes (check all that apply):

☒ Iron

☐ Galvanized

☐ Copper

☐ Lead

☐ Plastic

☐ Other (Specify): _____

- b. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

- c. Year of Last Major Reconstruction/Replacement 1965 d. Expected Remaining Useful Life (Years): 10
- e. Cost to Reconstruct/Replace: \$
- f. Comments: _____

96. Hot Water Heaters (H)

☒ Yes ☐ No

- a. Types of Fuel (check all that apply):

☐ Oil

-
- ☒ Natural Gas
- ☐ Electricity
- ☐ Propane
- ☐ Other (Specify): _____

b. Overall condition:

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

c. Year of Last Major Reconstruction/Replacement 2010

d. Expected Remaining Useful Life (Years): 5

e. Cost to Reconstruct/Replace: \$ _____

f. Comments: _____

97. Plumbing Fixtures (H)

☒ Yes ☐ No

a. Overall condition:

- ☐ Excellent
- ☒ Satisfactory
- ☐ Unsatisfactory
- ☐ Non-Functioning
- ☐ Critical Failure

b. Year of Last Major Reconstruction/Replacement 1965

c. Expected Remaining Useful Life (Years): 10

d. Cost to Reconstruct/Replace: \$54,000

e. Comments: Replace 5 non-operational exterior hose faucets (\$25k). Provide a tempered emergency eyewash station in the nurse's office (\$4k). Replace all older type flushometers, assume 20 locations (\$20k). Remove the drinking fountain from the psychologists office sink and provide a separate basin (\$5k).

98. Water Outlets/Taps for Drinking/Cooking Purposes (H)

☒ Yes

☐ No

- a. Overall condition of water outlets/taps (drinking fountains, bubblers, bottle fillers, kitchen prep, ice machines, etc.):

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

- b. Year of Last Major Reconstruction/Replacement 1965

- c. Expected Remaining Useful Life (Years): 10

- d. Cost to Reconstruct/Replace: \$5,000

- e. Comments: Provide vacuum breakers on slop sinks (2) to avoid back siphonage.

Fire Suppression Systems

99. Fire Suppression Systems (H)

☒ Yes

☐ No

- a. Types of fire suppression system (check all that apply):

☐ Wet Sprinkler System

☐ Dry Sprinkler System

☐ Standpipes

☐ Hose Cabinets

☒ Kitchen Hood Fire Suppression

☐ Data Special Agent Suppression

☐ Limited Area Sprinkler System

☐ Dust Collector Spark Arrestor

☐ Paint Booth Fire Suppression

☐ Other (Specify): _____

- b. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

c. Year of Last Major Reconstruction/Replacement 1998

d. Expected Remaining Useful Life (Years): 8

e. Cost to Reconstruct/Replace: \$ _____

f. Comments: _____

100. Kitchen Hoods (H)

☒ Yes☐ No

a. Type of Hood:

☒ Yes – Type 1 Grease & Smoke

☐ Yes – Type 2 Heat & Condensation

b. Is kitchen exhaust system appropriate for all current appliances it serves?

☒ Yes☐ No

c. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

d. Year of Last Major Reconstruction/Replacement 1965

e. Expected Remaining Useful Life (Years): 10

f. Cost to Reconstruct/Replace: \$

g. Comments:

Electrical Systems

101. Electrical Power Distribution System (H)

☒ Yes☐ No

a. Electrical Supply meets current needs:

☒ Yes

☐ No

b. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

c. Year of Last Major
Reconstruction/Replacement 1965

d. Expected Remaining Useful Life
(Years): 5

e. Cost to Reconstruct/Replace: \$515,000

f. Comments: Replace 22 remaining original Empire electrical panels (\$220k). Provide a rooftop lighting protection system (\$150k). Add electric hand dryers to 6 student bathrooms (\$45k). Provide additional electrical circuits in the 2nd grade area (\$25k). Provide additional classroom electrical outlets & replace non-functional outlets (\$75k).

102. Lighting Fixtures (H)

☒ Yes

☐ No

a. Condition of Lighting Fixtures:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 1998

c. Expected Remaining Useful Life
(Years): 5

d. Cost to Reconstruct/Replace: \$525,000

e. Comments: Add additional exterior security lighting in the rear of the building (\$50k). Replace or retrofit all building lighting with LED and add lighting controls (possible EPC) (\$475k).

103. Emergency/Exit Lighting Systems (H)

☒ Yes

☐ No

a. Condition of Emergency/Exit Lighting Systems:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

b. Year of Last Major
Reconstruction/Replacement 2005

c. Expected Remaining Useful Life
(Years): 5

d. Cost to Reconstruct/Replace: \$ _____

e. Comments: _____

104. Emergency/Standby Power System (H)

☐ Yes

☒ No

a. Types of Back-Up Power System (check all that apply):

☐ Generator Fuel Gas/Propane

☐ Generator Diesel/Fuel Oil

☐ Receptacle for Mobile Generator Connection

☐ Central Battery Inverter

☐ Integral Fixture/Battery Equipment

☐ Other (Specify): _____

b. Overall 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: _____

105. Fire Alarm Systems (manual, automatic fire detection, and notification appliances) (H)

☒ Yes

☐ No

a. Overall condition of Fire Alarm 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: \$331,000

e. Comments: Replace the fire alarm system with ADA compliant system including fan shutdown. Add magnetic hold open devices to the cafeteria doors (\$331k).

106. Carbon Monoxide Alarm System (H)

☒ Yes

☐ No

a. Type of Alarm System:

☒ 10-year battery stand alone alarm

☐ Hardwired/interconnected detection & alarm

☐ Gas detection (et NG/CO)

☐ Other (Specify): _____

b. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

c. Year of Last Major Reconstruction/Replacement 2017

d. Expected Remaining Useful Life (Years): 7

e. Cost to Reconstruct/Replace: \$16,000

f. Comments: Replace battery type CO detection with hard wired detectors.

107. Communication System (H)

☒ Yes ☐ No

a. Type of Communication System (check all that apply):

☒ Public Address

☒ Phones (VOIP)

☐ Phones (Cellular)

☐ Phones (Other

☐ Mass Notification

☐ Emergency Voice Communication Fire Alarm System

☐ Lockdown Notification System

☐ Other (eg. Radio) (describe): _____

b. Communication systems are adequate:

☒ Yes

☐ No

c. Overall condition:

☐ Excellent

☒ Satisfactory

☐ Unsatisfactory

☐ Non-Functioning

☐ Critical Failure

d. Year of Last Major
Reconstruction/Replacement 1980

d. Expected Remaining Useful Life
(Years): 5

e. Cost to Reconstruct/Replace: \$240,000

f. Comments: Repair/replace motion detection in zones 11, 14, 18 & 20 (\$10k). Provide 6 additional CCTV interior cameras (\$40k). Replace battery clocks with a central satellite clock system (\$75k). Replace the PA/intercom system and provide handsets in each classroom for emergency notification (\$300k). Add a permanent sound system in the gymnasium (\$125k).

109. Does this facility have a fuel dispensing system?

☐ Yes

☒ No

a. Overall condition:

☐ 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: _____

110. Does this facility have vehicle lifts?

☐ Yes

☒ No

a. Overall condition:

☐ 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: _____

111. Does this facility have a bus wash system?

☐ Yes

☒ No

a. Overall condition:

☐ 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: _____

Accessibility

112. Exterior Accessible Route to Building (H)

People with disabilities should be able to arrive on site, approach the building, and enter freely as everyone else. At least one route of travel should be safe and accessible for everyone, including people with disabilities. This route must include handicapped parking, curb cuts, ramps, and automatic door operators as necessary to enter the building.

- a. Is there an accessible exterior route as specified above?
- ☒ Yes
- ☐ No
- b. Features provided for exterior accessible route (check all that apply):
- ☒ Curb ramps
- ☐ Exterior ramps
- ☒ Handicap parking
- c. Cost of improvements needed to provide exterior accessible route to building:
- \$ _____
- d. Comments: Provide signage directing people to handicapped accessible entry and at designated parking spaces

113. Is there an accessible route to recreational facilities?

- ☒ Yes ☐ No

- a. Cost of improvements needed to provide exterior accessible route to building:
- \$ _____
- b. Comments: Provide poured rubber surface at playground structure – cost included in playground equipment replacement item 57

114. Exterior recreational facilities that are on an accessible route & meet accessibility standard (check all that apply):

☒ Playground and play equipment

☐ Playfield(s)

☐ Athletic Field(s)

☐ Exterior Bleachers

☐ Bathroom Facilities

☐ Concession Stand

a. Cost of improvements to needed to provide exterior accessible route to recreational facilities:

\$ _____

b. Comments: Provide poured rubber surface at playground structure – cost included in playground equipment replacement item 57

115. Interior Accessible Route, Access to Goods & Services, & 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 including drinking fountains, telephones, and other amenities.

Is there an accessible interior route as specified above?

☒ Yes

☐ No

a. Cost of improvements to needed to provide inter accessible route(s) as specified above:

\$ _____

b. Comments: All program areas are accessible – the existing elevator needs to be replaced with new unit that meets current ADA requirements – replacement cost covered in item 84

116. Does this facility have interior spaces that meet accessibility standards (check all that apply):

☒ Classrooms

☐ Labs (science, art, technology, etc.)

☐ Shops

☒ Main Office

- ☐ Health Office
- ☒ Gymnasium
- ☒ Cafeteria
- ☐ Auditorium
- ☐ Stage
- ☒ Restrooms on each floor

a. Cost of improvements to needed to provide interior spaces that meet accessibility standards:

\$750,000

b. Comments: Provide handicapped accessible toilet at the health office, renovate B & G toilets at 1964 addition for ADA compliance, provide handicapped accessible toilet at special ed classroom. Replace sink base cabinets at classrooms with ADA compliant sink base units and sinks (18 classrooms).

Environment/Comfort/Health

117. General Appearance

a. Overall Rating:

- ☒ Good
- ☐ Fair
- ☐ Poor

b. Comments: _____

118. Cleanliness (H)

a. Overall Rating:

- ☒ Good
- ☐ Fair
- ☐ Poor

b. Comments: _____

119. Are there walk off mats; grills in the entryway?

- ☒ Yes
- ☐ No

a. If Yes: At least 6 ft. long?

☒ Yes

☐ No

120. Is there noise in classrooms from HVAC units, traffic, etc. that may impact education? (H)

☐ Yes

☒ No

121. Lighting Quality (H)

a. Types of lighting in general purpose classrooms (Check all that apply)

☒ Daylight

☒ Not full spectrum

☐ Full Spectrum

☐ LED

☒ Fluorescent

☐ Other (describe): _____

122. Evidence of Vermin (H)

a. Is there evidence of active infestations of.....(check all that apply):

☐ Rodents

☐ Wood-boring or Wood-eating insects

☐ Cockroaches

☐ Other Vermin

☒ None

Indoor Air Quality

123. Mold (H)

a. Is there visible mold or moldy odors?

☒ Yes

☐ No

b. If yes, where? (check all that apply)

☒ Classrooms

☐ Locker rooms

☒ Hallways

☐ Labs

☐ Ventilation System

☐ Workshops

☐ Toilet Rooms

☐ Offices

—	—
<input type="checkbox"/> Cafeteria	<input checked="" type="checkbox"/> Storage
<input type="checkbox"/> Kitchen	<input type="checkbox"/> Crawlspace
<input type="checkbox"/> Auditorium	<input type="checkbox"/> Attic
<input type="checkbox"/> Gymnasium	<input type="checkbox"/> Other places (describe): _____

b. Are any surfaces constructed of any of the following materials?

- ☐ Paper-faced or gypsum products
- ☒ Cellulose products (typically ceiling tiles)

c. Is there evidence of water intrusion?

- ☒ Yes
- ☐ No

124. Humidity/Moisture (H)

a. Overall rating of humidity/moisture condition in building:

- ☐ Good
- ☒ Fair
- ☐ Poor

b. Are any of the following found in/or around classroom areas? (check all that apply):

- ☐ Active leaks in roof
- ☐ Active leaks in plumbing
- ☐ Moisture condensation
- ☒ Visible stains or water damage
- ☐ None

c. Are any of the following found in/or around other areas? (check all that apply):

- ☐ Active leaks in roof
- ☐ Active leaks in plumbing
- ☐ Moisture condensation
- ☒ Visible stains or water damage
- ☐ None

125. Ventilation: fresh air intake locations, air filters, etc. (H)

- a. Are there fresh air intakes near the bus loading, truck delivery, or garbage storage/disposal areas?
- ☐ Yes
- ☒ No
- b. Is there accumulate dirt, dust or debris around fresh air intakes?
- ☐ Yes
- ☒ No
- c. Are fresh air intakes free of blockage?
- ☒ Yes
- ☐ No
- d. Is accumulated dirt, dust, or debris in ductwork?
- ☐ Yes
- ☒ No
- e. Are dampers functioning as designed?
- ☐ Yes
- ☒ No
- f. Condition of air filters:
- ☐ Good
- ☒ Fair
- ☐ Poor
- g. Outside air adequate for occupant load:
- ☐ Yes
- ☒ No
- h. Rating of ventilation/indoor air quality:
- ☐ Good
- ☒ Fair
- ☐ Poor
- i. Comments: _____

126. Indoor Air Quality (IAQ) Plan (H)

a. Does the School District use EPA's Tools for Schools Program?

☐ Yes

☒ No

b. If no, is some other IAQ management plan used?

☐ Yes

☒ No

c. Has the District assigned IAQ responsibilities to a designated individual?

☒ Yes

☐ No

127. Does the school practice Integrated Pest Management (IPM)? (H)

☒ Yes

☐ No

a. Is vegetation kept 1 ft. away from the building?

☒ Yes

☐ No

b. Are crevices and holes in walls, floors and pavement sealed or eliminated?

☒ Yes

☐ No

c. Is there a certified pesticide applicator on staff?

☐ Yes

☒ No

d. Are pesticides used in the buildings?

☐ Yes

☒ No

If **yes**, how are they typically applied?

☐ Spot Treatment

☐ Area wide treatments

e. Are pesticides used on the grounds?

☐ Yes

☒ No

If **yes**, was an emergency exemption granted by the Board of Education?

☐ Yes

☐ No

128. Does the school have a passive radon mitigation system installed (was built with radon resistant features?) (H)

☐ Yes

☒ No

a. Has the facility been tested for the presence of Radon?

☐ Yes

☒ No

b. Were any of the results of the test greater than or equal to 4 picocuries per liter (pCi/L)?

☐ Yes

☐ No

c. If yes, did the school take steps to mitigate these elevated radon levels?

☐ Yes, active mitigation system installed

☐ Yes, passive mitigation system active

☐ Yes, ventilation controls (HVAC) adjusted

☐ Yes, other: _____

☐ No action taken

Emergency Shelter

129. Does this building serve as an emergency shelter?

☐ Yes

☒ No

a. Is there a written agreement with 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

c. If yes, what systems are connected to the emergency generator? (check all that apply)

☐ Communication system

☐ Fire alarm system

☐ Security system

☐ Lighting

☐ HVAC

☐ Sump pump

☐ Other (specify) _____

d. Does this facility have a cooking/food preparation kitchen?

☒ Yes

☐ No

If yes, is the area outfitted for:

☐ Full preparation

☒ Warming capability only

- e. What items in the cooking/food preparation kitchen are powered by the emergency generator?
(check all that apply)

☐ Warming/cooking equipment

☐ Refrigeration equipment

☐ Other kitchen equipment

- f. Potable water:

☒ Provided by municipal system

☐ Provided by on-site wells – not connected to the emergency generator

☐ Provide by on-site wells – connected to the emergency generator

- g. Sanitary:

☒ Gravity discharge

☐ Force main pump station – not connected to the emergency generator

☐ Force main pumping station – connected to the emergency generator