

School: \_\_\_\_\_

Building: \_\_\_\_\_

Addition: \_\_\_\_\_

**Building Condition - Full**

			<b>N/A</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Replace</b>	<b>Est. Life</b>
<input type="checkbox"/> 1	<b>Structural</b>	<b>Foundations</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	100
	Notes:							
<input type="checkbox"/> 2	<b>Exterior</b>	<b>Walls</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	50
	Notes:							
<input type="checkbox"/> 3	<b>Exterior</b>	<b>Windows</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
<input type="checkbox"/> 4	<b>Exterior</b>	<b>Doors</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
<input type="checkbox"/> 5	<b>Roofing</b>	<b>Roof System</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
<input type="checkbox"/> 6	<b>Roofing</b>	<b>Openings</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
<input type="checkbox"/> 7	<b>Interior</b>	<b>Doors</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
<input type="checkbox"/> 8	<b>Interior</b>	<b>Wall Finishes</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	8
	Notes:							
<input type="checkbox"/> 9	<b>Interior</b>	<b>Floor Finishes</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
<input type="checkbox"/> 10	<b>Interior</b>	<b>Ceiling Finishes</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							
<input type="checkbox"/> 11	<b>Interior</b>	<b>Partitions</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							
<input type="checkbox"/> 12	<b>Interior</b>	<b>Stairways</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	25
	Notes:							
<input type="checkbox"/> 13	<b>HVAC</b>	<b>Primary Heating Source</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
<input type="checkbox"/> 14	<b>HVAC</b>	<b>Primary Cooling Source</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
<input type="checkbox"/> 15	<b>HVAC</b>	<b>Primary Air Systems - Equipment</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
<input type="checkbox"/> 16	<b>HVAC</b>	<b>Terminal and Package Units</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
<input type="checkbox"/> 17	<b>HVAC</b>	<b>Building Controls</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
<input type="checkbox"/> 18	<b>Electrical</b>	<b>Electrical Service and Distribution</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	30
	Notes:							
<input type="checkbox"/> 19	<b>Electrical</b>	<b>Lighting (includes Exit Signs)</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
<input type="checkbox"/> 20	<b>Electrical</b>	<b>Emergency Generator</b>	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							

## Building Condition - Full

			N/A	Good	Fair	Poor	Replace	Est. Life
21	Plumbing	Fixtures	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							
22	Plumbing	Domestic Water Piping Inside Building	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
23	Plumbing	Sanitary / Vent Piping	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	40
	Notes:							
24	Fire & Safety	Sprinkler System	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
25	Fire & Safety	Standpipes	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
26	Fire & Safety	Security System	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							
27	Fire & Safety	Fire Alarm System	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							
28	Technology	Computer Technology Infrastructure	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							
29	Technology	Telephones	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							
30	Technology	Public Address & Intercom	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
31	Specialties	Elevators and Lifts	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
32	Specialties	Fixed Cabinetry	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	15
	Notes:							
33	Specialties	Fixed Lab Equipment	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	25
	Notes:							
34	Specialties	Fixed Kitchen Equipment	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	18
	Notes:							
35	Specialties	Lockers	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
36	Specialties	Writing Surfaces	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	20
	Notes:							
37	Specialties	Stage Equipment	N/A <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Replace <input type="checkbox"/>	10
	Notes:							