

## Energy Audit Nomination Form

(Modified from Efficiency Vermont Building Energy Performance form)

Municipality: \_\_\_\_\_

Contact Person for this project:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

In order to be eligible a building must:

- ✓ Be owned by your municipality.
- ✓ Not be a school (schools are eligible for audits through the Vermont Superintendent's Association).

Preference may be given to buildings that:

- ✓ Have not had an audit completed in the past.
- ✓ Are highly visible and offer opportunities to educate the public.
- ✓ Have heating systems more than 15 years old.
- ✓ Have unusually high energy usage.
- ✓ Are used frequently and by a significant number of people.
- ✓ Have municipal commitment to implement efficiency improvements.

~Please provide as much information as possible~

Building Info

Use of building: \_\_\_\_\_

Type of structure (wood, brick, etc): \_\_\_\_\_

Physical address: \_\_\_\_\_

Have you had the building audited? If so, when and by whom? \_\_\_\_\_

\_\_\_\_\_

Has Efficiency Vermont done a lighting walkthrough of this building? \_\_\_\_\_

If so, were the recommendations implemented? \_\_\_\_\_

Lighting Info

- If you have tubular fluorescent fixtures, please provide the following information (this information can be provided as a attached list or spreadsheet):

How many fixtures are in the building:

\_\_\_\_\_

How many tubular bulbs are in each fixture:

\_\_\_\_\_

Are the bulbs 4 feet long or 8 feet long:

\_\_\_\_\_

When was the last time the ballasts were replaced:

\_\_\_\_\_

Please provide the text and numbers printed at one end of a spare tube: \_\_\_\_\_

Is there any noticeable flicker or hum associated with these lights: \_\_\_\_\_

What are the daily hours of operation for these lights:

\_\_\_\_\_

- For all other lighting:

How many fixtures are in the building:

\_\_\_\_\_

What types of bulbs are in these fixtures (CFL, incandescent, etc):

\_\_\_\_\_

What wattage are these bulbs: \_\_\_\_\_

What are the daily hours of operation for these lights:

\_\_\_\_\_

Computers

Do you have a server? \_\_\_\_\_

If so, how old is your server? \_\_\_\_\_

Is the server located in an air conditioned room? \_\_\_\_\_.

How many computers are in the building? \_\_\_\_\_

Do the computers have energy efficient monitors? \_\_\_\_\_

Refrigeration Info

Do you have any walk-in coolers or freezers? Please describe:

\_\_\_\_\_

How many stand-alone refrigeration units do you have:

\_\_\_\_\_

Heating, Ventilation, and Air Conditioning (HVAC) Info

Age of larger equipment, such as refrigeration/HVAC: \_\_\_\_\_

\_\_\_\_\_

Last time HVAC equipment was serviced: \_\_\_\_\_

Any equipment that runs 24hrs/day: \_\_\_\_\_

Hot water fuel source: \_\_\_\_\_

Thermal Envelope Info

What type of insulation is in your walls? How thick is the insulation? \_\_\_\_\_

What type of insulation is in your attic/roof? How thick is the insulation? \_\_\_\_\_

Is the basement insulated? \_\_\_\_\_

Are you aware of any current air sealing opportunities? \_\_\_\_\_

Implementation Info

Budget available to make changes (yes/no): \_\_\_\_\_

Any projects already on the horizon: \_\_\_\_\_

What are you hoping to accomplish with evaluation? \_\_\_\_\_

**Please provide a sketch of the building and/or attach photos.**

**Please submit this form by May 14<sup>th</sup> to:  
Jason Rasmussen, SWCRPC, P.O. Box 320, Ascutney, VT 05030**