



Facility Survey Sheet

Primary Contact Information

Contact Name: _____ Contact Email: _____

General Building Information

Facility Footprint Square Feet: _____

Number of Floor Levels: _____

Number of Exits from Facility: _____

Number of Rooms in Facility: _____

Lighting Information

| Luminaire Type | Fixture size | Mfg. | Qty. |
|----------------|--------------|------|------|
| Fluorescent | | | |
| LED | | | |
| Incandescent | | | |
| | | | |

Smart Building Systems

Check All That Exist in your Facility. If selected please provide the manufacturer of the system and model number:

Addressable Fire Alarm System **Mfg/Model no.** _____

If Selected Addressable Fire Alarm System Please Answer the Following:

1. Number of Devices on Fire Alarm System: _____

2. Number of Zones on Fire Alarm System: _____

Gunfire Detection System **Mfg/Model no.** _____

Video Surveillance System **Mfg/Model no.** _____

Electronic Door Locking System **Mfg/Model no.** _____

Building Management System **Mfg/Model no.** _____

Other

If selected other please Describe:

Building Network

Facility Wide Network connectivity? (Y/N): _____

Network Managed by Facility personnel? (Y/N): _____

Available Network Capacity? (Y/N): _____

Dedicated Server Room Onsite? (Y/N): _____

If selected No, please describe where server room is located: _____

Once Completed please email this form to info@vsenergy.us.