



SITE SURVEY FORM

TO BE COMPLETED BY ABS

PROJECT #: _____

DATE: _____

1. Room dimensions _____
2. Color and surface of walls _____
3. Type of ceiling and floor coverings _____
4. Windows (number of, size, direction, coverings) _____

(sun light position during day) _____
5. Interior noise (AC, appliances, intercom, fluorescent lights, office machines) _____

6. Exterior noise (traffic, airplanes, construction, power and ancillary machinery, farm equipment, fire/police nearby)
7. Power (adequate? And location of fuse box and amperage) _____
8. Access for equipment (what floor, interference with main activity, stairs vs. elevators and cart availability) _____
9. Contact person (both maintenance and/or security with phone) _____

10. Security of building _____
11. Equipment storage place when not in use _____
12. Restrooms _____
13. Eating facilities _____
14. Potential problems _____