

# Manufacturing & Industrial Facility

## Field Data Collection Form

*Version 3.8 - January 2026*

This form is designed for field workers to collect facility-specific data on-site. Complete all relevant sections and use this form as reference when entering data into the SYNEREX UI.

## 1. PROJECT INFORMATION

<b>Client/Company Name</b>	
<b>Project Name/ID</b>	

*Project identifier or name*

<b>Project Description</b>	
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*Brief description of the project*

### Facility Location

<b>Facility Address (Street)</b>	
<b>City</b>	
<b>State/Province</b>	
<b>ZIP/Postal Code</b>	
<b>Country</b>	

*Country where facility is located*

### Project Location

<b>Project Address (Street)</b>	
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*Physical location where project work is performed (if different from facility)*

<b>Project City</b>	
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*City where project work is performed*

<b>Project State/Province</b>	
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*State/Province where project work is performed*

<b>Project ZIP/Postal Code</b>	
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*ZIP/Postal code for project location*

<b>Project Country</b>	
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*Country where project work is performed*

### Primary Contact Information

<b>Point of Contact Name</b>	
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*Primary contact person name*

<b>Contact Title/Role</b>	
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*Job title or role of contact person*

<b>Contact Phone</b>	
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**Contact Email**

<b>Contact Mobile/Cell</b>	
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Mobile phone number (optional)

#### Contact Location

<b>Contact Address (Street)</b>	
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Contact person's business address (if different from facility)

<b>Contact City</b>	
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City where contact person is located

<b>Contact State/Province</b>	
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State/Province where contact person is located

<b>Contact ZIP/Postal Code</b>	
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ZIP/Postal code for contact location

<b>Contact Country</b>	
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Country where contact person is located

#### Additional Project Information

<b>Project Manager Name</b>	
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Name of project manager

<b>Project Manager Email</b>	
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Email of project manager

<b>Project Manager Phone</b>	
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Phone of project manager

<b>Project Start Date</b>	
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Date when project work began

<b>Project End Date</b>	
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Expected or actual project completion date

<b>Project Date (Form Completion Date)</b>	
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Date this form is being completed

#### Secondary Contact (Optional)

<b>Secondary Contact Name</b>	
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Alternative contact person

<b>Secondary Contact Title/Role</b>	
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Job title or role

<b>Secondary Contact Phone</b>	
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Phone number

### Secondary Contact Email

Email address

## 2. TEST PARAMETERS

<b>Test Type</b>	<input type="checkbox"/> Power Quality <input type="checkbox"/> Energy Savings <input type="checkbox"/> Harmonic Analysis	
<b>Circuit Name</b>		
<b>Test Period</b>	Before:	After:
<small>Start and end dates</small>		
<b>Test Duration</b>		
<small>Auto-calculated from CSV data</small>		
<b>Meter Name</b>		
<b>Meter Specification</b>	<input type="checkbox"/> Class 0.2 <input type="checkbox"/> Class 0.5 <input type="checkbox"/> Class 1.0 <input type="checkbox"/> Class 2.0	
<b>Interval Data</b>	<input type="checkbox"/> 1-minute <input type="checkbox"/> 15-minute <input type="checkbox"/> Hourly	

## 3. WEATHER DATA

<b>Temperature</b>	Before: deg F	After: deg F
<small>Average temperature during test period</small>		
<b>Humidity</b>	Before: %	After: %
<small>Average relative humidity</small>		
<b>Weather Data Source</b>	<input type="checkbox"/> Automatic API <input type="checkbox"/> Manual Entry	

## 4. BILLING INFORMATION

<b>Utility Company</b>	
<b>Account Number</b>	
<b>Energy Rate</b>	\$/kWh
<small>Cost per kilowatt-hour</small>	
<b>Demand Rate</b>	\$/kW-month
<small>Cost per kilowatt per month</small>	

## 5. MANUFACTURING & INDUSTRIAL FACILITY DATA

<b>Facility Type</b>	[ ] Manufacturing Plant [ ] Assembly Plant [ ] Processing Facility [ ] Foundry [ ] Chemical Processing [ ] Food Processing [ ] Textile [ ] Automotive [ ] Electronics [ ] Pharmaceutical [ ] Paper/Pulp [ ] Other: _____	
<b>Facility Area</b>	_____ sqft	
<i>Total facility floor area</i>		
<b>Number of Production Lines</b>	_____	
<i>Total number of production lines</i>		
<b>Number of Machines/Equipment</b>	_____	
<i>Total number of machines</i>		
<b>Operating Hours per Day</b>	_____ hours	
<i>Average operating hours per day</i>		
<b>Number of Shifts per Day</b>	_____	
<i>Number of production shifts</i>		
<b>Units Produced</b>	Before: _____	After: _____
<i>Total units produced</i>		
<b>Machine Hours</b>	Before: _____ hours	After: _____ hours
<i>Total machine operating hours</i>		
<b>Production Rate</b>	_____ units/hour	
<i>Average production rate</i>		
<b>Product Type / Industry</b>	_____	
<b>Compressed Air System</b>		
<b>Compressed Air Power</b>	_____ kW	
<i>Total compressed air system power</i>		
<b>Compressed Air Flow</b>	_____ CFM	
<i>Compressed air flow rate</i>		
<b>Compressed Air Pressure</b>	_____ psi	
<i>Operating pressure</i>		
<b>Total Motor Horsepower</b>	_____ HP	
<i>Total installed motor horsepower</i>		

<b>Process Heating Power</b>	Before: _____ kW	After: _____ kW
<i>Process heating equipment power</i>		
<b>Pump Power</b>	_____ kW	
<i>Pump system power</i>		
<b>Welding Equipment Power</b>	_____ kW	
<i>Welding equipment power</i>		
<b>Conveyor Systems Power</b>	_____ kW	
<i>Conveyor system power</i>		
<b>Material Handling Power</b>	_____ kW	
<i>Material handling equipment power</i>		
<b>Process Cooling Power</b>	_____ kW	
<i>Process cooling equipment power</i>		
<b>Water Treatment Power</b>	_____ kW	
<i>Water treatment system power</i>		
<b>Ventilation Power</b>	_____ kW	
<i>Ventilation system power</i>		
<b>HVAC Power</b>	Before: _____ kW	After: _____ kW
<i>HVAC system power</i>		
<b>Lighting Power</b>	_____ kW	
<i>Lighting system power</i>		
<b>Other Process Loads</b>	_____ kW	
<i>Other process loads</i>		
<b>Power Factor</b>	Before: _____	After: _____
<i>Average power factor (0-1)</i>		
<b>Peak Demand</b>	Before: _____ kW	After: _____ kW
<i>Peak electrical demand</i>		
<b>Demand Charge Rate</b>	_____ \$/kW	
<i>Utility demand charge rate</i>		

## 6. NOTES

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