



HEATING SYSTEM OPERATIONS & MAINTENANCE SURVEY

This survey is being used to learn more about O&M practices across school buildings. Please answer the following questions honestly, and as accurately as possible regarding your O&M practices at your facility. Your responses will be confidentially kept by the CUNY Building Performance Lab and they will be anonymous to DSF administrators. This survey is not being used for any individual performance evaluation. The survey takes about 10 minutes to complete. If you do not have time to complete the entire survey now, please complete it at your earliest convenience.

Thank you

Please remember to click submit at the bottom of the survey to submit your survey answer(s)

1.	BY CLICKING "YES", I CONSENT TO PARTICIPATE IN THIS SURVEY. DO YOU WANT TO PROCEED AND COMPLETE THE O&M SURVEY? (YES, CONTINUE), (NO, I DO NOT WANT TO PARTICIPATE)	<input type="radio"/> YES <input type="radio"/> NO
FIRST, PLEASE TELL US ABOUT YOUR FACILITY'S OPERATIONS:		
2.	DOES YOUR FACILITY HOST AFTER-SCHOOL PROGRAMMING THAT USES ONLY PART OF THE BUILDING?	<input type="radio"/> YES <input type="radio"/> NO
3.	COMPARED TO YOUR FIREMAN, HOW INVOLVED ARE YOU IN THE MANAGEMENT OF YOUR BOILER PLANT?	--Select Item--
4.	DOES YOUR FACILITY HAVE A WRITTEN O&M PLAN SPECIFIC TO YOUR BUILDING?	--Select Item--
5.	HOW OFTEN DO YOU AND/OR YOUR FIREMAN RECORD BOILER AND HEATING SYSTEM INFORMATION IN A LOG OF O&M ACTIVITIES?	--Select Item--
HOW FREQUENTLY ARE THE FOLLOWING O&M ACTIONS PERFORMED AT YOUR FACILITY?		
PLEASE CHOOSE ONE ANSWER PER ITEM. IF YOUR BUILDING DOES NOT HAVE THE EQUIPMENT OR SYSTEM THAT THE ITEM REFERS TO PLEASE CHOOSE "NOT APPLICABLE."		
ROOM AND ZONE TEMPERATURE CONTROL		
6.	CHECK SAMPLE BUILDING TEMPERATURES	--Select Item--
7.	RECORD SAMPLE BUILDING TEMPERATURES	--Select Item--
8.	CHECK FOR OPEN WINDOWS	--Select Item--
9.	RECORD NUMBER OF OPEN WINDOWS	--Select Item--
10.	ASSESS AND, AS NECESSARY, ADJUST (I.E. CLOSE) OPEN WINDOW	--Select Item--
11.	CHECK OPERATION OF CONTROL ELEMENTS (THERMOSTATS, VALVES, RTU, RE-HEAT)	--Select Item--
12.	ASSESS AND, AS NECESSARY, ADJUST CONTROL ELEMENTS (THERMOSTATS, VALVES, RTU, RE-HEAT)	--Select Item--
13.	OPERATE MANUAL ZONE VALVES TO CLOSE OFF UN-USED SPACES	--Select Item--
VENTILATION AND AIR DISTRIBUTION SYSTEMS		
14.	MAINTAIN EXHAUST FANS (INCLUDING KITCHEN HOODS)	--Select Item--
15.	CHECK BUILDING EXHAUST FAN START AND STOP TIMES	--Select Item--
16.	RECORD BUILDING EXHAUST FAN START AND STOP TIMES	--Select Item--
17.	ASSESS AND, AS NECESSARY, ADJUST EXHAUST FAN START AND STOP TIMES	--Select Item--
18.	TEST AND BALANCE BUILDING EXHAUST SYSTEM(S)	--Select Item--
19.	CHECK AND MAINTAIN CLASSROOM UNIT VENTILATORS	--Select Item--
20.	TEST OR RECORD AIR FLOWS AT UNIT VENTILATORS	--Select Item--
21.	CHECK START AND STOP TIMES OF ROOFTOP UNITS OR HOURS RUN	--Select Item--
22.	RECORD START AND STOP TIMES OF ROOFTOP UNITS OR HOURS RUN	--Select Item--
23.	ASSESS AND ADJUST OVERALL FUNCTION OF ROOFTOP UNITS AND VAV	--Select Item--
24.	CHECK OPERATION OF MAJOR AIR HANDLING UNITS (CAFETERIA, AUDITORIUM, GYMNASIUM)	--Select Item--
25.	RECORD OPERATION OF MAJOR AIR HANDLING UNITS (CAFETERIA, AUDITORIUM, GYMNASIUM)	--Select Item--
26.	ASSESS AND, AS NECESSARY, ADJUST OPERATION OF MAJOR AIR HANDLING UNITS (CAFETERIA, AUDITORIUM, GYMNASIUM)	--Select Item--
BOILER O&M		
27.	CHECK FUEL USAGE	--Select Item--
28.	RECORD AND ASSESS FUEL USAGE	--Select Item--
29.	BLOW-DOWN LOW-WATER CUT-OFF	--Select Item--
30.	BLOW-DOWN BOILER	--Select Item--
31.	TEST BOILER WATER CHEMISTRY	--Select Item--
32.	PROVIDE CHEMICAL TREATMENT	--Select Item--
33.	ASSESS MAKE-UP WATER ADDITIONS FOR SYSTEM LEAKAGE	--Select Item--
34.	VISUALLY INSPECT DISTRIBUTION SYSTEM FOR LEAKAGE	--Select Item--
35.	CHECK OUTDOOR TEMPERATURE	--Select Item--
36.	RECORD OUTDOOR TEMPERATURE	--Select Item--
37.	CHECK BOILER START AND SHUT-DOWN TIMES OR HOURS RUN	--Select Item--
38.	RECORD BOILER START AND SHUT-DOWN TIMES OR HOURS RUN	--Select Item--
39.	ASSESS AND, AS NECESSARY, ADJUST BOILER START AND SHUT-DOWN TIMES OR HOURS RUN	--Select Item--
40.	OBSERVE OR RECORD BURNER MODULATION	--Select Item--
41.	OBSERVE OR RECORD BOILERS ON-LINE AND CYCLING PATTERN	--Select Item--
42.	REDUCE NUMBER OF BOILERS ON-LINE	--Select Item--
43.	CHECK STACK TEMPERATURE, FIRING RATE (%), AND DRAFT READINGS	--Select Item--
44.	RECORD STACK TEMPERATURE, FIRING RATE (%), AND DRAFT READINGS	--Select Item--
45.	ADJUST STACK DAMPER OPERATION	--Select Item--
46.	ADJUST CLEAN BOILER FIRE-SIDE SURFACES (TUBES)	--Select Item--
FOR STEAM SYSTEMS		
47.	CHECK CONDENSATE TEMPERATURES FOR TRAP FUNCTION	--Select Item--
48.	RECORD CONDENSATE TEMPERATURE FOR TRAP FUNCTION	--Select Item--
49.	IDENTIFY FAILED-OPEN F&T STEAM TRAPS AND REPAIR AS NECESSARY	--Select Item--
FOR HOT WATER SYSTEMS		

50. CHECK HOT WATER SUPPLY AND RETURN TEMPERATURES

--Select Item--

51. RECORD HOT WATER SUPPLY AND RETURN TEMPERATURES

--Select Item--

52. ASSESS AND ADJUST HOT WATER SYSTEM FOR "DELTA T" (SUPPLY TEMPERATURE – RETURN TEMPERATURE) AND FLOW RATE

--Select Item--

53. ASSESS AND ADJUST HOT WATER SYSTEM FOR OUTDOOR TEMPERATURE RESET

--Select Item--

54. ADJUST HOT WATER SYSTEM SUPPLY ("SEND-OUT") TEMPERATURE

--Select Item--

55. DO YOU ENGAGE IN ANY O&M BEHAVIORS WE HAVE NOT ASKED ABOUT? IF YES, WHAT? AND HOW FREQUENTLY?
PLEASE WRITE YOUR RESPONSE IN THE BOX.
PLEASE ANSWER THE FOLLOWING QUESTIONS:

56. DO YOU HAVE ACCESS TO DATA ABOUT YOUR FACILITY’S ENERGY USE?

☐ YES

☐ NO

57. ARE YOU RESPONSIBLE FOR ENERGY EFFICIENCY AT YOUR BUILDING?

☐ YES

☐ NO

58. DO YOU CONSIDER ENERGY EFFICIENCY IN YOUR DAILY BUILDING OPERATIONS?

☐ YES

☐ NO

59. DO YOU TAKE EQUIPMENT READINGS TO ASSESS ENERGY EFFICIENCY OPPORTUNITIES?

☐ YES

☐ NO

60. HAS THE ENERGY EFFICIENCY TRAINING YOU HAVE RECEIVED HELPED YOU FIND WAYS TO REDUCE YOUR FACILITY’S ENERGY USE?

☐ YES

☐ NO

61. WHAT IS YOUR NAME?

62. WHAT IS YOUR EMAIL ADDRESS?

63. WHAT IS YOUR AGE?

--Select Item--

64. HOW MANY YEARS OF TOTAL WORK EXPERIENCE DO YOU HAVE AS A BUILDING OPERATOR?

--Select Item--

65. WHAT IS YOUR CURRENT JOB TITLE?

--Select Item--

66. DID YOU COMPLETE THE BUILDING OPERATOR CERTIFICATION (BOC) LEVEL I TRAINING COURSE?

☐ YES

☐ NO

67. DO YOU REGULARLY USE ANY OF THE FOLLOWING TECHNOLOGIES? CELL PHONE

☐ YES

☐ NO

68. SMART PHONE

☐ YES

☐ NO

69. ATM

☐ YES

☐ NO

70. COMPUTER OR LAPTOP

☐ YES

☐ NO

71. IPAD OR TABLET

☐ YES

☐ NO

72. ELECTRONIC READER (KINDLE, NOOK, ETC.)

☐ YES

☐ NO

THANK YOU FOR COMPLETING THE SURVEY

PLEASE REMEMBER TO CLICK **SUBMIT** BELOW TO SEND YOUR SURVEY.

Submit