



Pre-Assessment Survey

Syracuse University Industrial Assessment Center
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Please complete this survey and return it to the above email or fax (call for mailing address if needed) along with copies of your last twelve months' electric and fuel bills.

CONTACT INFORMATION

Company Name: _____

Mailing Address: _____

Street Address: _____

Contact Person: _____

Title: _____

Phone: _____ Ext. _____

Fax: _____

E-mail: _____

How did you hear about our service? _____

GENERAL INFORMATION

Principal product(s): _____

Total utility bill cost (including electric and gas): _____

SIC code(s): _____

NAICS code(s): _____

Number of employees: _____

Labor plus overhead rate for maintenance personnel: _____

Do you generate any of your own power? Y / N

Please list any processes that require heating (other than space heat):

Please list any processes that require refrigeration:

PHYSICAL PLANT INFORMATION

Number of buildings: _____

Total plant size (ft²): _____

Buildings:

Area	Size (ft ²)	Age	Use

Do you have a plant layout or floor plan? Y / N

If so, please make those available to us on the date of the assessment.

HVAC SYSTEMS

Steam/hot water or forced air: _____

Is there a boiler? Y / N Horsepower? _____

Does the boiler have a dual fuel boiler? Y / N

Fuel: _____

Pressure of boiler: _____

Annual steam usage: _____

Annual steam cost: _____

MAJOR CONCERNS

Please list those areas that you consider the best opportunities for savings or improvement, or items that you think are problematic. You should consider energy usage, manufacturing methods and productivity, and waste reduction. This will help us to best focus our efforts (attach an additional sheet if necessary).