

VENTILATION SYSTEM EVALUATION FORM**Part 1.0 General Information**

Date of Evaluation:		Building contact name and phone:	
Evaluation Team (list name and affiliation):			
		(Environmental Professional)	
		(HVAC/Electrical Professional)	
		(Sheet Metal Professional)	
Building Address:		Type of Facility (check all that apply):	
		☐ Residential	
		☐ Multi-use	
		☐ Other (describe)	
		Number of residential units:	Number of floors:
HVAC System Types (check all that apply)			
☐ Unit ventilator (single residence unit)		☐ Wall/window AC unit (single residence unit)	
☐ Fan coil unit (single residence unit)		☐ Central ventilation system	
☐ Heat pump unit (single residence unit)		☐ Passive shaft/duct	
☐ Other (describe)			
Location of outside air intake:			
Outside air intake accessible for inspection _____ Y _____ N (explain)			

Part 2.0 Checklists**2.1 Ventilators, wall air conditioning units and window air conditioning units in common spaces**

Ventilation System Identification:						
Location:						
Access adequate for inspection of components:						
System Components	System Component Substrate Material (sheet metal wrapped) (sheet metal lined) (fiberglass) (flexible connector) (double walled)	Dust/Dirt / Debris			Suspect WTC-Related Dust	
		None	Light ($< 1/16$ inch depth)	Heavy ($\geq 1/16$ inch depth)	Present? (Y/N)	Estimate % of total dust loading
Outside air intake louvers, grates and/or screens						
Outside air duct						
Outside air damper(s)						
Return air grille						
Return air plenum						
Filter rack						
Filter media						
Coils (evaporator)						
Blower assembly						
Condensate drain pan						
In-line electrical resistance strip heaters (in supply ducts connected to unit ventilators)						
Fire dampers						
Turning vanes						
Supply air plenum or supply duct						
Supply air plenum or supply duct liner						
Supply air diffuser						

2.1 Ventilators, wall air conditioning units and window air conditioning units in common spaces (cont.)