**Property Profile Form**

# **{*Company Name*}**

**Property Information:**

Association Name: Date:

Building Contact: Property Manager:

Address Phone:

Of Building: Alternate:

Fax:

County:

Description:

Photos Taken?:

Onsite PM?:

Site Plans or Handouts Received at Tour?:

**Utilities & Fuel Information:**

**Electric:**

Utility Company: Rate Class:

Are Tenants Sub-Metered? If yes, who reads meters?

Utilities included in CAM or separately billed

Per Square Foot Costs: Year:

**Natural Gas:**

Utility Company: Rate Class:

Per Square Foot Costs: Year:

**Water & Sewer:**

Utility Company: Rate Class:

Sewer Credits Available:

Sub-Meters for Tower Make-up Water: Irrigation:

**Miscellaneous:**

Utility Company: Rate Class:

Does building sell/buy any utilities to/from others?:

**Building & Site Information:**

Bldg Sq. Ft.: Sq. Ft.:

Onsite Building Technician/Engineer: Day Porter Service:

Sq. Ft. of Garages or Other Attached Structures:

(Explain):

Special Operating Conditions:

### **Compliance Issues:**

Liquids: Fuel Age Location

Storage: Chemical Age Location

MSDS: Available Update Cycle

Osha 200: Posted Comments

HazMat: Storage Pad Location

Labeling Posted Procedures

**Other Compliance Issues:**

EPA:

Confined Space Entry:

Licenses Business: Local State

Trades: HVAC

Electrical

Mechanical

### **General Building Information – Exterior:**

**Roof:** Installation/Repair Date: Guarantee Expiration Date:

Surface & Type:

Copings, Parapets & Flashing:

Drains & Scuppers:

Ventilators, Skylights & Other Openings:

Steps, Ladders & Other Structures:

Other Structures or Equipment:

**Exterior:** Building Skin Construction:

**Walls:** Canopies, Soffits & Cornice:

Window Glass & Gaskets:

Signs:

Door & Window Frames:

Entrance Doors:

Exterior Lighting:

**Other:** Loading Dock:

**Exterior:** Trash Compactor: Size Owned/Leased

**Site:** Sidewalks:

**Improvement:** Driveways & Aprons:

Exterior Parking:

Landscaping:

Fountains/Lakes:

Fencing, Gates:

Sprinkler System:

**Parking:** Vehicle Spaces: Full Size Compact Handicap

Visitor Parking: Reserved Parking:

Construction:

Decks:

Ramps:

Walls:

Lighting:

Ingress/Egress Control:

### **General Building Information – Interior:**

**Lobby:**

Ceilings, Walls & Floors:

Lighting:

Directory Board:

Guard Stations:

Furniture & Furnishings:

Interior Fountain:

Mail Boxes & Telephones:

Cleanliness:

**Corridors:**

Ceilings, Walls & Floors:

Interior Plants/Foliage:

Lighting:

Exit Signs:

Directory Signs:

Door Size & Type:

Cleanliness:

**Lower Level:**

Description:

Elevator Openings:

Vaulted Sidewalks:

Structural Condition:

Water Seepage:

Cleanliness:

**Stairways:**

Quantity:

Ceilings, Walls & Floors:

Lighting:

Cleanliness:

**Cafeteria:**

Employee Lunchrooms:

Full-Service Cafeteria:

Kitchen Equipment:

**Restrooms:**

Ceilings, Walls & Floors:

Lighting:

Floor Drains:

Sink Valves:

Toilet Valves:

Soap Dispensers:

Waste Receptacles:

Women's Room Fixtures: WC Sinks Condition

Men's Room Fixtures: WC Sinks Condition

ADA Compliant:

Cleanliness:

**Mechanical/Electrical/Janitor Closets:**

Size: Location: Cleanliness:

### **Mechanical Systems:**

**HVAC Maintenance:**

Equipment Covered:

Level of Service:

Scope of Service:

**Building Control System (Energy Management System):**

Manufacturer:

Type:

Console Location:

**Cooling Equipment:**

Manufacturer:

Type:

Size:

**Heat Rejection Equipment:**

Manufacturer:

Type:

Size:

**Heating Equipment:**

Manufacturer:

Type:

Size:

**Air Moving Equipment:**

Manufacturer:

Type:

Size:

**Hot Water Equipment:**

Manufacturer:

Type:

Size:

**Pumps:**

Chilled Water:

Condensing Water:

Boiler Feed Water:

Vacuum Return:

Domestic Water:

Sump:

Fire:

**Plumbing:**

Service Entrance:

Meter:

Risers:

House Tank:

Water Softener:

Salt Tank:

Waste & Vent Lines:

Supply Lines:

**Fire Alarm Equipment:**

System Type:

Pull Stations:

Smoke Detectors:

Heat Detectors:

Flow Switch:

Tamper Switch:

On-Site Annunciator: Location Audio Video

Voice Communication:

Off-Site Annunciator:

System Testing:

**Extinguishing Equipment:**

Sprinkler System:

Hose Cabinets, Racks:

Portable Extinguishers:

Fire Dept. Connections:

**Egress:**

Fire Escapes:

Stairways:

Signage:

Fire Door Hardware:

Smoke Towers:

**Smoke Control:**

HVAC Fans:

Stairwell Pressurization:

Exhaust System:

### **Electrical System:**

Electrical Service

Size:

Main Switch gear:

Service Entrance:

Emergency Power:

Riser Size & Number:

Floor Distribution:

**Emergency Generator:**

Manufacturer:

Type:

Size:

Equipment Powered:

Test Cycle:

**UPS Battery Systems:**

Manufacturer:

Type:

Size:

Equipment Powered:

Test Cycle:

### **Vertical Transportation:**

Elevators: Passenger: Quantity: Capacity: lbs.

Type:

Freight: Quantity: Capacity: lbs.

Type:

Emergency Recall: Telephone:

Doors, Cabs:

Cleanliness:

Elevator Annual Inspection Certification Onsite:

Equipment Rm. Ventilation:

Contract Type: Full Service Oil & Grease

Escalators: Quantity Type:

Emergency Stop Switch:

### **Security System:**

**Security Alarm Equipment:**

System Type:

CCTV:

Intrusion Alarms:

Off-Site Alarm:

Security Contact:

Watch Stations:

**Access Control:**

Manufacturer:

Type:

Console Location:

**SERVICE CONTRACTS & VENDOR SUMMARY:**

| **SERVICE PERFORMED** | **VENDOR**  **NAME** | **TELE.**  **#** | **CONTRACT** **ON HAND** | **CONTRACT**  **AMOUNT** | **Exp.**  **Date** |
| --- | --- | --- | --- | --- | --- |
| **Cleaning** |  |  |  |  |  |
| **Landscaping** |  |  |  |  |  |
| **HVAC** |  |  |  |  |  |
| **Pest Control** |  |  |  |  |  |
| **Trash Removal** |  |  |  |  |  |
| **General Repairs** |  |  |  |  |  |
| **Plumbing** |  |  |  |  |  |
| **Electrical** |  |  |  |  |  |
| **Security** |  |  |  |  |  |
| **Elevators** |  |  |  |  |  |
| **Interior Plant Service** |  |  |  |  |  |
| **Carpet Cleaning** |  |  |  |  |  |
| **Lighting Inspect** |  |  |  |  |  |
| **Fire Equip Inspect** |  |  |  |  |  |
| **Signage** |  |  |  |  |  |
| **Locksmith** |  |  |  |  |  |
| **Dining Services** |  |  |  |  |  |
| **Recycling** |  |  |  |  |  |

**Miscellaneous**:

Emergency Preparedness Program:

Program In Place: Yes\_\_\_\_\_ No\_\_\_\_\_

Program Includes:

Form Completed By: Date:

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