How to use the Facility Assessment Form

1. Fill out all the information in Section one. This information will help when you go to fill out any information for applications or inspector assessments.

2. Be accurate. The more specific you are the easier it will be when you refer back to your notes.

3. Use the NOTES section to note anything unusual.

4. Use the example for Section two. Remember be descriptive. Use your solutions to research costs of items and work that will need to be done.

Brought to you by:

Department of Culture, Language, Elders and Youth
Pithohilikioni
Ministère de la Culture, de la Langue, des Aînés et de la Jeunesse
Facility Assessment Form
Section One – Facility Information

Facility Name: ________________________________________________________
____________________________________________________________________

Facility Type: ________________________________________________________
____________________________________________________________________

Year facility was built: ________________________________________________
____________________________________________________________________

Facility Description:

1. What is the facility mainly used for? ________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________

2. What time of year is the facility used? ________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________

3. What age groups use the facility? ________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
   __________________________________________________________________
Facility Operations:

1. How often does the facility maintainer check the facility?

__________________________________________________________

__________________________________________________________

__________________________________________________________

2. Has the facility needed any minor repairs in the last 5 years?

__________________________________________________________

__________________________________________________________

__________________________________________________________

3. Has the facility needed any major repairs in the last 5 years?

__________________________________________________________

__________________________________________________________

__________________________________________________________

Facility dimensions:

1. number of bathrooms: ________________________________

__________________________________________________________

__________________________________________________________

2. number of public rooms: _____________________________

__________________________________________________________

__________________________________________________________
3. number of offices: ________________________________
________________________________________________
________________________________________________

4. number of storage areas: __________________________
________________________________________________
________________________________________________

5. other rooms: please name and describe: ______________
________________________________________________
________________________________________________

6. Mechanical room: _________________________________
________________________________________________
________________________________________________

NOTES:
Facility Assessment Form

Section Two – Facility Conditions

Go through your facility room by room, with your facility maintainer. Note all problems you encounter or any health and safety items that are missing regardless of whether they are small or large problems. Below is a sample of a list for a boy’s bathroom. Make as many copies of the pages that follow as you need to. Here is an example:

Room name: ________________ Boys Bathroom

1. list items in that are in disrepair or are missing for example:

Solutions: ______ list work you will need done and items you need to replace

2. 1 cracked urinal

Solutions: ______ need a new urinal, plumbing and plumber

3. 1 lighting box needs replacing

Solutions: ______ need wiring, light box replacement, electrician

4. flooring is coming up

Solutions: ______ replace flooring, new flooring, glue, labor to pull up old floor and to lay new flooring, plywood

5. exit sign broken

Solutions: ______ replace exit sign, electrician, wiring
Section Two – Facility Conditions

Room name: ________________________________

1. ________________________________
   ________________________________
   ________________________________
   ________________________________
   Solutions: ________________________________
   ________________________________
   ________________________________

2. ________________________________
   ________________________________
   ________________________________
   ________________________________
   Solutions: ________________________________
   ________________________________
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3. ________________________________
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   Solutions: ________________________________
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4. ________________________________
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   Solutions: ________________________________
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   ________________________________

5. ________________________________
   ________________________________
   ________________________________
   ________________________________
   Solutions: ________________________________
   ________________________________
   ________________________________