|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **HCR Property Information Intake Form 2018**  Note: Please type into the form directly and **do not** handwrite | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PROPERTY INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | |
| HCR Housing Number (HID or SHARS): | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Property/Project Name: | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Gross Property Size (in square feet):  The sum of all areas on all floors of a building | | Residential | | | | | | | | | | | | Commercial | | | | | | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | | | |
| Number of Buildings: | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Predominant Resident Type:  *Check one box only* | | Senior | | | | | | | | | Family | | | | | | | Supportive Housing | | | | | | | |
|  | | | | | | | | |  | | | | | | |  | | | | | | | |
| Commercial Spaces: (0= None;1=Yes) | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Do Com spaces have separate utility meters? (0=No; 1=Yes) | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Central Boiler Rooms: | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Vacant Units  (averaged over the calendar year):  *Check one box only* | | **0-15% Vacant** | | | | | | **16-24% Vacant** | | | | | | **25-50% Vacant** | | | | | | **50-100% Vacant** | | | | | |
|  | | | | | |  | | | | | |  | | | | | |  | | | | | |
| **HEATING** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Heating Fuel: | | Gas | #2 Oil | | | | #4 Oil | | | #6  Oil | | | Dual Fuel (Gas/Oil) | | | District Steam | | | Electricity | | | | | | Other |
| *Check all that apply* | |  |  | | | |  | | |  | | |  | | |  | | |  | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Heating System: | | Steam Boiler | | Hydronic (Hot Water) Boiler | | | | | Electric Baseboard | | | | | | In-unit Heat Pump | | | In-unit Furnace | | | | | Other | | |
| *Check one box only* | |  | |  | | | | |  | | | | | |  | | |  | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Heating Distribution System: | | 1 Pipe Steam | | | 2 Pipe Steam | | | | | Hot Water Baseboard | | | | Hot Water Fan Coil | | | | Electric Baseboard | | | | Other | | | |
| *Check one box only* | |  | | |  | | | | |  | | | |  | | | |  | | | |  | | | |
| **DOMESTIC HOT WATER (DHW)** | | | | | | | | | | | | | | | | | | | | | | | | | |
| DHW Fuel: | | Gas | #2 Fuel Oil | | | | #4 Fuel Oil | | | #6 Fuel Oil | | | Dual Fuel (Gas/Oil) | | | District Steam | | | Electricity | | | | | | Other |
| *Check all that apply* | |  |  | | | |  | | |  | | |  | | |  | | |  | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| DHW System: | | Steam Boiler Makes DHW | | | | | | Hydronic (Hot Water) Boiler Makes DHW | | | | | | Direct-Fired Gas Water Heater with Storage | | | | | | Other | | | | | |
| *Check one box only* | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cogeneration System (CHP): | | Yes | | | | | | | | | | | | No | | | | | | | | | | | |
| *Check one box only* | |  | | | | | | | | | | | |  | | | | | | | | | | | |
| **COOLING** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Apartment Cooling System: | | Window AC | | | | Sleeve AC | | | | | | Chilled Water | | | | None | | | | | Other | | | | |
| *Check one box only* | |  | | | |  | | | | | |  | | | |  | | | | |  | | | | |
| **METERING INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Meter Type** | | **Number of Meters** | | | | | | | | | | | | **Who Pays Meter Bills?** | | | | | | | | | | | |
|  | | Whole Building  *(meters serving entire building)* | | | | | | Apartments  *(resident spaces only)* | | | | | | Whole Building  *(check one box only)* | | | | | | Apartments  *(check one box only)* | | | | | |
|  | | | | | | | | | | | | | | Building | | | Tenant | | | Building | | | | Tenant | |
| Electric | |  | | | | | |  | | | | | |  | | |  | | |  | | | |  | |
| Natural Gas | |  | | | | | |  | | | | | |  | | |  | | |  | | | |  | |
| Fuel Oil | |  | | | | | |  | | | | | |  | | |  | | |  | | | |  | |
| Water | |  | | | | | |  | | | | | |  | | |  | | |  | | | |  | |
| Other Fuel | Type: |  | | | | | |  | | | | | |  | | |  | | |  | | | |  | |
| Have you ever matched the meter number listed on the utility bill with the physical meter on the property? | | | | | | | | | | | | | | | | | | | | | | | | Yes/No | |
|  | |