

Tracking # _____

Date: _____

Window Survey Form - Instructions

REQUIRED DOCUMENTS	
<input type="checkbox"/>	Completed window survey form list to include <u>all</u> of the windows, often requiring multiple pages.
<input type="checkbox"/>	Photos or drawings of each side of the structure with all windows numbered to correspond with the "Window #" in the survey form list.
<input type="checkbox"/>	Close-up numbered photos showing all damage identified in the window survey form list.
<input type="checkbox"/>	Proposed replacement window product material and design.

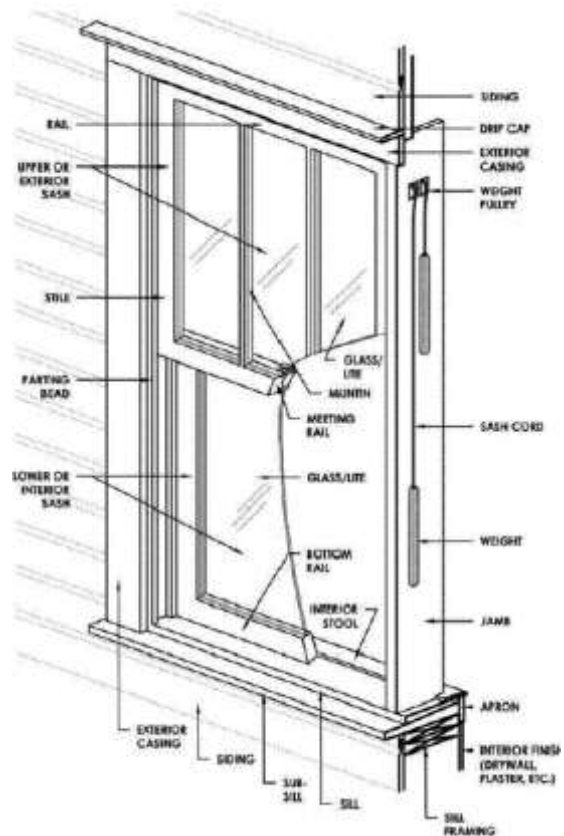
PROJECT INFORMATION	
Total Number of Window Openings	
Number of Historic Windows	
Number of Non-historic Windows	
Number of Windows Completely Missing	
Total Number of Windows to be Replaced	

Additional notes:

- Windows in pairs or groupings should be assigned separate numbers.
- Windows in dormers and small fixed windows should be included, but not door sidelights or transoms associated with a door.
- Peeling paint, minor wood repair, being sealed shut, broken glass, and other deferred maintenance is generally not viewed as grounds for replacement of Historic/Original windows.

EXAMPLE OF SURVEY FORM INPUT:

PROJECT INFORMATION	
Total Number of Window Openings	25
Number of Historic Windows	20
Number of Non-historic Windows	5
Number of Missing Windows	0
Total Number of Windows to be Replaced	7



Window design above is 3 over 1

Window #: 1		Material: <input checked="" type="checkbox"/> Wood <input type="checkbox"/> Vinyl <input type="checkbox"/> Metal <input type="checkbox"/> Other			
Design: 3 over 1	Size: 30 x 62	Status: <input checked="" type="checkbox"/> Historic/Original <input type="checkbox"/> Non-historic <input type="checkbox"/> Other			
Window:	<input type="checkbox"/> Keep <input checked="" type="checkbox"/> Replace	Window Condition:		<input type="checkbox"/> Good	<input type="checkbox"/> Fair <input checked="" type="checkbox"/> Bad
		Damage?		<input type="checkbox"/> None <input type="checkbox"/> Termites <input checked="" type="checkbox"/> Rot	<input type="checkbox"/> Missing
Trim:	<input checked="" type="checkbox"/> Keep <input type="checkbox"/> Replace	Trim Condition:		<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Fair <input type="checkbox"/> Bad
		Damage?		<input checked="" type="checkbox"/> None <input type="checkbox"/> Termites <input type="checkbox"/> Rot	<input type="checkbox"/> Missing

Tracking # _____

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Window Survey Form - List

List all the windows on the building:

Window #:		Material: <input type="checkbox"/> Wood <input type="checkbox"/> Vinyl <input type="checkbox"/> Metal <input type="checkbox"/> Other			
Design:		Size:	Status: <input type="checkbox"/> Historic/Original <input type="checkbox"/> Non-historic <input type="checkbox"/> Other		
Window:	<input type="checkbox"/> Keep <input type="checkbox"/> Replace	Window Condition: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Bad			
		Damage? <input type="checkbox"/> None <input type="checkbox"/> Termites <input type="checkbox"/> Rot <input type="checkbox"/> Missing			
Trim:	<input type="checkbox"/> Keep <input type="checkbox"/> Replace	Trim Condition: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Bad			
		Damage? <input type="checkbox"/> None <input type="checkbox"/> Termites <input type="checkbox"/> Rot <input type="checkbox"/> Missing			

Window #:		Material: <input type="checkbox"/> Wood <input type="checkbox"/> Vinyl <input type="checkbox"/> Metal <input type="checkbox"/> Other			
Design:		Size:	Status: <input type="checkbox"/> Historic/Original <input type="checkbox"/> Non-historic <input type="checkbox"/> Other		
Window:	<input type="checkbox"/> Keep <input type="checkbox"/> Replace	Window Condition: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Bad			
		Damage? <input type="checkbox"/> None <input type="checkbox"/> Termites <input type="checkbox"/> Rot <input type="checkbox"/> Missing			
Trim:	<input type="checkbox"/> Keep <input type="checkbox"/> Replace	Trim Condition: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Bad			
		Damage? <input type="checkbox"/> None <input type="checkbox"/> Termites <input type="checkbox"/> Rot <input type="checkbox"/> Missing			

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		Damage? <input type="checkbox"/> None <input type="checkbox"/> Termites <input type="checkbox"/> Rot <input type="checkbox"/> Missing			

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		Damage? <input type="checkbox"/> None <input type="checkbox"/> Termites <input type="checkbox"/> Rot <input type="checkbox"/> Missing			
Trim:	<input type="checkbox"/> Keep <input type="checkbox"/> Replace	Trim Condition: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Bad			
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