

Homeowner Name:

Res No.

Property Address:

Our Assessment Visit Format Has Changed!

Adjusting to the current COVID-19 conditions, we are hoping to keep the design efforts on your home moving forward with minimal delays. In order to do that, we will need to conduct the Assessment Visit via video. **This will require increased participation on your part.** This document outlines the information we will need in order to design the acoustical treatments for your home. Please complete this document and be prepared to address any questions or concerns with your Program Coordinator (PC) before your scheduled virtual Assessment in your home. We appreciate your cooperation and patience as we learn to adapt during these unique times.

You will need the following items to conduct the Virtual Assessment

Computer/laptop/iPad or Surface	Any device that allows you to enter in data into a Word document.
Smart phone device	A second device that allows you to participate in a video conference while walking around your home.
Tape measure (digital or regular)	We may ask for a measurement during the Virtual Assessment and it may be helpful to have a second person to help hold the tape measure.
Zoom App	With the device you are using to walk around your home, please install the Zoom app by going to Zoom.us/download . If you already have a Zoom account, provide your username to your Project Coordinator.

You will need to complete the following before your Virtual Visit

Further instructions to follow

1. Fill out a questionnaire about your home.
2. Draw a basic floor plan of your home.
3. Measure your windows and doors. A window and door schedule has been provided for your convenience.
4. Return completed questionnaire, floor plan and measurements to the PC.

At your Virtual Assessment Visit you will:

1. Walk through your home while on Zoom video with the design team and Airport Authority representatives. You may be asked to take additional measurements of windows and doors.
2. Provide further clarification on information on the questionnaire provided before the virtual assessment visit.

1. Please fill out this questionnaire so that we can gather basic information about your home.

GENERAL			
G1	Do you have floor plans for your home? • If so, please send a copy or photographs to your QHP Project Coordinator.	Yes	No
G2a	Have you built any room additions, or made any alterations to your property?	Yes	No
G2b	• If so did you obtain a building permit, what is the status of the permit?		
G2c	• What is the date of the permit and the date that the alterations were completed		
G3	If possible, would you like to keep your front door?	Yes	No
G4	Does your property have an attached garage?	Yes	No
G5	Do you currently have a security system installed on your doors or windows?	Yes	No
G6a	Does your home have an attic space?	Yes	No
G6b	• If so, how is the attic accessed? (Access panel, pull down stair, etc.)		
G6c	• What is the size of the access? (ie: 30" by 30")		
G6d	• What is the height of the attic space at its highest point?		
G6e	• Does the attic cover the entire footprint of your house?		
G7a	Does your home have a basement or crawlspace under the house?	Yes	No
G7b	• If so, how is the basement or crawlspace accessed? (Access panel, trap door, etc.)		
G7c	• What is the size of the access?		
G7d	• What is the height of the basement or crawlspace at its highest point?		
G7e	• Does the basement or crawlspace cover the entire footprint of the house?		

WINDOWS			
W1	How many total windows do you have in your home?		
W2	What types of windows are installed in your home? (Check all that apply)		
	Awning/Hopper Hung	Casement Jalousie	Fixed Skylight
			Garden Slider/Glider
W3a	Do you have any custom/specialty windows in your home, such as special shapes or leaded glass?	Yes	No
W3b	If so, please briefly describe:		
W4	What materials are the windows in your home made from? (Check all that apply)		
	Aluminum	Steel	Vinyl
			Wood
W5	Is there anything else you would like us to know about the windows in your home?		

DOORS			
D1	How many total exterior doors do you have in your home?		
D2	What types of doors are installed in your home? (Check all that apply)		
	Flush Door	Decorative Panel Door	French Door
			Sliding Glass Door
D3a	Do any of your doors have specialty treatments such as custom panels or a "peek hole"?	Yes	No
D3b	If so, please briefly describe:		
D4	What materials are the doors in your home made from? (Check all that apply)		
	Aluminum	Steel	Vinyl
			Wood
D5	Is there anything else you would like us to know about the doors in your home?		

MECHANICAL

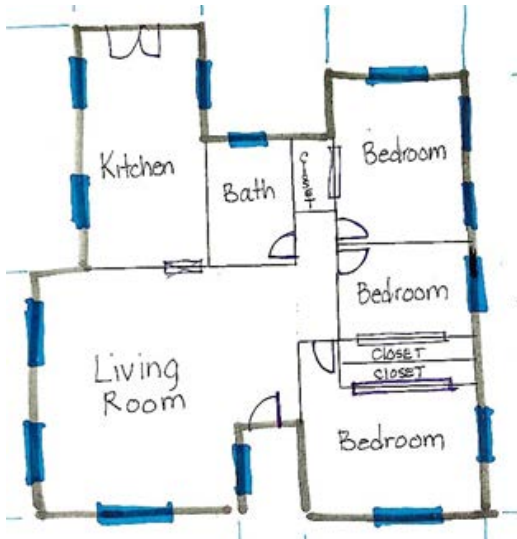
M1	Do you currently have a central air conditioning system installed in your home? (Note: Portable, window mounted, or through-wall AC units do not apply)	Yes	No
M2	Are you interested in receiving an air conditioning or ventilation system if possible?	Yes	No
M3a	What is the primary heating system currently installed in your home?		
M3b	• Where is your primary heating system currently located?		
M3c	• Is your primary heating system fully operational and in working condition?		
M3e	If you have any additional or secondary heating systems installed in your home, please list them below:		
M4a	What type of water heater do you have in your home?		
M4b	• Where is your water heater located? (ie: indoor closet, exterior closet, etc.)		
M5a	Do you have smoke detectors installed in each sleeping room on each living level?		
M5b	• If so, are they "hard-wired" or battery operated?		
M6a	Do you have a combination smoke/carbon monoxide detector installed in the common area outside of the sleeping areas? (ie: hallway outside of bedrooms)		
M6b	• If so, how many are installed in your home?		
M6c	• If so, are they "hard-wired" or battery operated?		
M7	Is there anything else you would like us to know about the mechanical systems in your home?		

ELECTRICAL

E1	Where in your residence is your electrical meter (aka: meter load center) located?		
E2	Generally speaking, what condition is your existing electrical meter in?		
E3	If you know the capacity of your existing meter, what is it? (ie: 100A, 200A, etc.)		
E4	How is your meter served by SDG&E? (Overhead, underground)		
E5	Do you have any electrical sub-panels in your home?	Yes	No
E5a	If so, where is your electrical sub-panel located?		
E7	Please indicate major electrical appliances in your home (Check all that apply) <div style="display: flex; justify-content: space-between;"> Electric Range/Oven Electric Clothes Dryer Jacuzzi/Hot Tub Solar Panels </div> <div style="display: flex; justify-content: space-between;"> Vehicle Charger Other: </div>		
E8a	Do you have any "Knob and Tube" wiring in your home?		
E8b	• If so, do you know if it is "Live" or abandoned?		
E9	Is there anything else you would like us to know about the electrical systems in your home?		

FLOOR PLAN

If you have floor plans, please ensure your QHP Project Coordinator has copies. If not, please create a rough sketch of the floor plan of your home. You can draw on paper and take a photo to send to your QHP Project Coordinator. This drawing does not need to be to scale but should help the design team identify the different areas within your home.



Floor Plan Notes & Tips:

- Start by drawing the exterior walls of your home.
- **Sketch interior walls by starting from one corner of the room and working clockwise.**
- **Label each room and provide interior dimensions.**
- **Mark all interior doors and windows.**
- **Show any stairs, openings, and major casework such as countertops or in-built cabinets.**



TIP: Start drawing your floor plan in pencil, and finalize in pen once all measurements are done



TIP: Using graph paper to draw your floor plan can be helpful in keeping things aligned, but is not required

Measuring Windows and Doors

Please measure your windows and doors prior to your virtual assessment. The design team can walk you through it during the virtual assessment visit if you have questions. Windows and Doors require three measurements each. We have provided blank window and door schedules for your convenience.



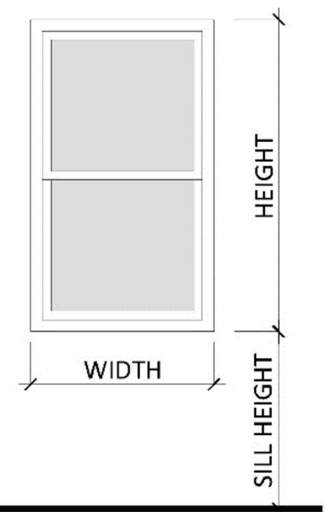
Door/Window Width



Door/Window Height

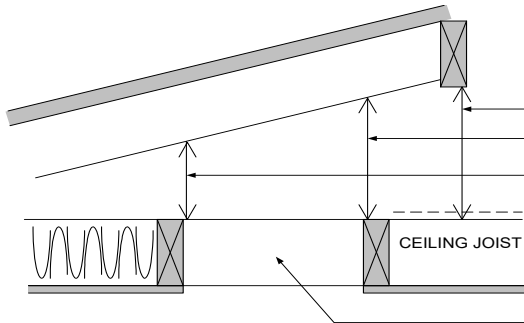


Thickness (Doors Only)



Required Window Dimensions

Attic Space Assessment:



If you have an attic space please measure from the top of the ceiling joists to the roof line in the following areas:

DISTANCE: _____

DISTANCE: _____

DISTANCE: _____

HATCH SIZE: _____

WINDOW SCHEDULE

EXISTING WINDOW			
#	WIDTH	HEIGHT	SILL HEIGHT
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

NOTE: If your home has more than 20 windows, please request another blank sheet from your QHP Project Coordinator.

DOOR SCHEDULE			
EXISTING DOOR			
#	WIDTH	HEIGHT	DOOR THICKNESS
A			
B			
C			
D			
E			
F			
G			
H			
I			
J			
K			
L			
M			
N			
O			