RESIDENCE HALL PHASE XVI

UNC CHARLOTTE

DESIGNER'S SUPPLEMENTAL INFORMATION TO BE IMMEDIATELY AFTER SUBMITTAL COVER SHEET

Instructions: Provide information listed below regarding commissioning projects by your firm and the role of personnel on those projects who will be assigned to this project. One person may be assigned to more than one responsibility. In addition to this form, design firms are encouraged to submit resumes for all personnel who will work on the project. This information is important to the University and should accompany submittals. This form should be attached to your cover letter or located in the front of your submittal. **<u>Do not alter the format of this form.</u>**

PRINCIPLE IN CHARGE (CxA)

Name _____   Office Location (City) _____   NC License # _____

List of <u>most recent projects </u>on which this person has participated:
Provide resume.

Commissioning Project Experience Listing

<u>KEY:</u>

Design Review:	Reviewed design and provided comment during design stage	Data/Trendlogs:	Used data-loggers or EMS trend logs for testing
Cx Plan:	Wrote the commissioning plan	Training:	Developed or approved staff training
Specifications:	Wrote commissioning specifications for construction team	Review O&Ms:	Reviewed completed O&M manuals
Funct. T. Plans:	Wrote functional test procedures	CA in Firm:	Commissioning agent was part of firm
Witnessed FT:	Witnessed and documented functional tests	Supervised CA:	Supervised commissioning agent subconsultant to firm
Hands-On Tests:	Performed functional tests (hands-on)	Worked w/ CA:	Worked with a commissioning agent hired by others

PROJECT DESCRIPTION	Commissioning Tasks Performed (Enter "X" if by own firm, "S" if by Subconsultant)										Management				Name & Role of Person(s) Assigned to Project by Firm (Identify any subconsultants)	Systems Commissioned (Identify if tested by subconsultants)
	Design Review	Cx Plan	Specifications	Funct. T. Plans	Witnessed FT	Hands-On Tests	Data/Trendlogs	Training	Review O&Ms	Other	CxA in Firm	Supervised CxA	Worked w/ CxA	Other		
Project Name: City & State: Date Completed: Building Size: Building Type: Green Building Certification: Owner Contact: Title & Phone:																
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