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Does Your Assisted Living Property Have Savings Potential?

To find out, just provide us with the following data. We'll analyze it for you, and then advise on the savings potential for our property. This **Benchmark Analysis** provides an informal estimate of potential savings from billing errors and excess usage based on the assessment of your utility bills.

Contact Information:

PROPERTY

Management Company's Name: _____

Manager's Name and Title: _____

Phone number: _____

Email address: _____

Address: _____

Fax: _____

Property's total number of sites: _____

Property's total number of units: _____

Fiscal year end: _____

OWNER

Property Owner: _____

Contact Person: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

Please provide the following data: *(please email, fax or mail separately)*

Copies of the most recent 12 months of utility bills (Electric, Gas, Water & Sewer) for each site for each utility

OR

Signed utility release letters for each site, for each account of each utility at that site (see attached template release letter to complete)

By providing your email address above, you agree to be contacted about energy-saving opportunities via email, mail and or by phone.



Please complete information on this page for each site.

Name of site: _____

Site Address: _____

(Specify address on the utility bills for this site)

Number of units at site: _____ Year building was constructed: _____

Type of Residents: Family Site Senior Other

Type of Site: Mid/High-rise Townhouse/Walk-ups

Total Facility Square Footage for site: _____

If a mid-rise or high-rise, how many floors: _____

If townhouse/walk-ups, how many buildings: _____

Number of residents at this site: _____

Number of management-paid utility bills at this site: _____ water _____ electricity _____ natural gas

Bedroom breakdown at this site:

Efficiency: _____ 1 BD: _____ 2 BD: _____ 3 BD: _____

Any plans to demo/dispose of this site: Yes No

What fuel is used at this site for: (circle one for each use)

Cooking: Natural Gas Electricity Propane

Heating: Natural Gas Electricity Propane

DHW: Natural Gas Electricity Propane

What equipment is currently in place at this site: (optional, helpful)

Toilets _____ gallons per flush Year replaced: _____

Kitchen aerator _____ gallons per minute Year replaced: _____

Bathroom aerators _____ gallons per minute Year replaced: _____

Showerhead _____ gallons per minute Year replaced: _____

Irrigation (Sprinklers): Yes No

Describe lighting fixtures _____

Describe the heating equipment _____

Describe the domestic hot water equipment _____