



The City of New York
 Mayor Michael R. Bloomberg

Local Law 84 of 2009, Benchmarking
 Non-residential Tenant Information Collection Form

To: _____ From: _____
 Tenant Address: _____ Date: _____
 Service Address (As listed on utility bill): _____

New York City law (LL84 of 2009) requires this building to annually benchmark its energy consumption. To comply, we need to collect the following information from you. Please fill out the form below and return it to the location provided at the end of the document (page 6) no later than February 15th, 2011.

Thank you for your assistance.

Tenant Energy Data Required (Owner to check of box if this building does not have access to aggregated or total energy information for the entire building.)

If the box to the left is checked off, please enter the monthly energy use for your space where you directly pay the energy bills. Enter the information for all energy types that apply in the chart below for January to December 2010. Please indicate if the energy units are different than those suggested.

If the box is not checked off, please skip to page 2.

Month	Electricity (kWh)	Gas (therms)	Oil (gallons)	Steam (MLbs)
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				

Tenant Space Use Attributes: Required for all non-residential tenants

Please fill out the information listed below for the space type or types that represent your leased area. If your space type is not listed, fill out the information under "Other."

Bank/Financial Institution:

- _____ Weekly operating hours
- _____ # of workers on main shift
- _____ # of personal computers
- _____ Percent of floor area that is air conditioned ($\geq 50\%$, $< 50\%$, or none)
- _____ Percent of floor area that is heated ($\geq 50\%$, $< 50\%$, or none)

Data Center:

- _____ Gross Square Feet
- _____ IT Energy Configuration – Select one from:
 1. Uninterruptible Power Supply (UPS) Meter supports only IT Equipment. (Preferred)
 2. UPS Meter includes non-IT load of 10% or less.
 3. UPS Meter includes non-IT load greater than 10%. Non-IT load is sub-metered.
 4. UPS Meter includes non-IT load greater than 10%. Non-IT load is not sub-metered.
 5. Facility has no UPS Meter.
 6. IT Energy is not current metered at this facility – Apply Estimates.
- _____ IT Energy Data – 12 months of measured energy consumption data is required from either the UPS or PDU Meter, depending on IT Energy Configuration

Meter Type (select 1): UPS Output or PDU Input			
Month	Start Date	End Date	Energy Consumption (kWh)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Data Center Continued:

Optional:

- _____ UPS System Redundancy (N, N+1, N+2, 2N, greater than 2N, none of the above)
- _____ Cooling System Redundancy (N, N+1, N+2, 2N, greater than 2N, none of the above)

Hospital (acute care and children's):

Required:

- _____ # of licensed beds
- _____ Maximum # of floors
- _____ Tertiary care facility – yes or no

Optional:

- _____ Laboratory on-site – yes or no
- _____ Laundry facilities on site – yes or no
- _____ # of buildings
- _____ Ownership status (drop down of options)

Hotel:

Required:

- _____ # of rooms
- _____ # of workers on main shift
- _____ # of commercial refrigeration/freezer units
- _____ On-site cooking – yes or no
- _____ Percent of floor area that is cooled in 10% increments (10%, 20%, 30%, etc.)
- _____ Percent of floor area that is heated in 10% increments (10%, 20%, 30%, etc.)

Optional:

- _____ Hours per day the guests are on-site
- _____ # of guest meals served
- _____ Square footage of full-service spas
- _____ Square footage of gym/fitness center
- _____ Laundry processed at site (drop down of options)
- _____ Annual quantity of laundry processed on-site
- _____ Average Occupancy (%)

House of Worship:

- _____ Maximum seating capacity
- _____ Weekdays of operation
- _____ Hours of operation per week
- _____ # of personal computers
- _____ Presence of cooking facilities - yes or no
- _____ # of commercial refrigeration/freezer units

K-12 School:

Required:

- _____ # of personal computers
- _____ # of walk-in refrigeration/freezer units
- _____ High school - yes or no
- _____ Open weekends – yes or no
- _____ On-site cooking – yes or no
- _____ Percent of floor area that is cooled in 10% increments (10%, 20%, 30%, etc.)
- _____ Percent of floor area that is heated in 10% increments (10%, 20%, 30%, etc.)

Optional:

- _____ Months of use
- _____ School District

Medical Office:

- _____ # of workers on main shift
- _____ Weekly operating hours
- _____ Percent of floor area that is **cooled** in 10% increments (10%, 20%, 30%, etc.)
- _____ Percent of floor area that is **heated** in 10% increments (10%, 20%, 30%, etc.)

Office:

- _____ Weekly operating hours
- _____ # of workers on main shift
- _____ # of personal computers
- _____ Percent of floor area that is air conditioned (>=50%, <50%, or none)
- _____ Percent of floor area that is heated (>=50%, <50%, or none)

Other:

- _____ # of personal computers
- _____ Weekly operating hours
- _____ # workers on main shift

Parking:

- _____ Gross floor area that is enclosed (SF)
- _____ Gross floor area that is not enclosed with a roof (SF)
- _____ Gross floor area that is open (SF)
- _____ Weekly hours of access

Retail Store:

- _____ Weekly operating hours
- _____ # of workers on main shift
- _____ # of personal computers
- _____ # of cash registers
- _____ # of walk-in refrigeration/freezer units
- _____ # of open & closed refrigeration/freezer cases
- _____ Percent of floor area that is cooled in 10% increments (10%, 20%, 30%, etc.)
- _____ Percent of floor area that is heated in 10% increments (10%, 20%, 30%, etc.)
- _____ Exterior entrance to the public – yes or no

Supermarket/Grocery Stores:

Required:

- _____ Weekly operating hours
- _____ Workers on main shift
- _____ On-site cooking – yes or no
- _____ # of walk-in refrigeration/freezer units
- _____ Percent of floor area that is cooled in 10% increments (10%, 20%, 30%, etc.)
- _____ Percent of floor area that is heated in 10% increments (10%, 20%, 30%, etc.)

Optional:

- _____ # of open or closed refrigeration/freezer cases
- _____ # of registers and/or personal computers

Residence Hall/Dormitory:

Required:

- _____ # of rooms
- _____ Percent of floor area that is cooled in 10% increments (10%, 20%, 30%, etc.)
- _____ Percent of floor area that is heated in 10% increments (10%, 20%, 30%, etc.)

Optional:

- _____ Computer lab on-site – yes or no
- _____ Dining Hall on-site– yes or no

Warehouse (Unrefrigerated):

Required:

- _____ Weekly operating hours
- _____ # of workers on main shift
- _____ # of walk-in refrigerators/freezer units
- _____ Percent of floor area that is cooled in 10% increments (10%, 20%, 30%, etc.)
- _____ Percent of floor area that is heated in 10% increments (10%, 20%, 30%, etc.)

Optional:

- _____ Distribution Center – yes or no

Warehouse (Refrigerated):

_____ Weekly operating hours
_____ # of workers on main shift

Swimming Pool:

Required:

_____ Swimming pool size, choose from:

- Olympic (50 meters x 25 meters)
- Recreational (20 yards x 15 yards)
- Short Course (25 yards x 20 yards)

_____ Indoor or outdoor

Optional:

_____ Months of use

Please return the completed form no later than February 15th to:

For information on the benchmarking law, please visit www.nyc.gov/ggbp.

For questions regarding this form, please contact
