

**DDESS Facility Assessment  
Tarawa Terrace I Elem.-Bldg. TT60  
Camp Lejeune, North Carolina**

**Pre-Survey Questionnaire**

Please circle Yes or No and describe problem and area of the building where present if applicable.

- What are the biggest problems at the building? Do you receive continual complaints about your building systems?

*AC/heat*

- Please list approximate age of building and building additions.

*re-Keyed 3/03*

*new roof att  
97*

- Are you aware of any structural problems in the building related to columns, beams, floor slabs, roof decking, load bearing walls or foundations?  Y or N

Description:

*see attach*

- Are you aware of any roof problems or roof leaks?  Y or N *Bldg C*
- Is/are your roof/roofs still under warranty?  Y or N, If yes, how much longer?

Description:

*yearly contract - inspection and  
repairs made by contractors*

- Are all your doors and windows operable?  Y or N  
If No, give examples and locations where they are not operable:

*Asbestos removed  
06/07  
Asbestos*

- Have vertical transportation systems been inspected (elevators, chairlifts)? Y or N. Can you make available Inspection Reports? Y or N.

Description:

Window AC & room heaters

- Have you had any problems with your fire alarm or security systems? Y or N  
How are they monitored?

NONE

Description:

no monthly inspection

- On the outside of your building, are you aware of any dangerous or maintenance problem areas around the building whether due to traffic, storm water, tripping hazards, etc? Y or N

Description:

parking

- Are you aware or do you suspect the presence of mold in your building? Y or N

Judy CLYMA  
PRE-K

- Has an indoor air quality study been done on this facility and do you have a test report? Y or N. If yes, please provide.

Description:

- Have you had continual problems with the following plumbing items:  
Please give examples and locations where "Y"

- |                      |          |          |                                   |
|----------------------|----------|----------|-----------------------------------|
| 1) Sewer Lines       | <u>Y</u> | N        | MAN-HOLE ROUGH BOTTOM NO CONCRETE |
| 2) Bathroom Fixtures | Y        | <u>N</u> |                                   |
| 3) Water Pipes       | Y        | <u>N</u> |                                   |
| 4) Kitchen Equipment | <u>Y</u> | N        | STACK OVENS, SERVING LINE         |
| 5) Grease Traps      | Y        | <u>N</u> |                                   |
| 6) Gas Piping        | Y        | N        | N/A                               |

Descriptions:

- Do you get many complaints of "too hot", "too cold" and "stuffy" and if so, what part of the building? Y or N

Description: *window AC & RM heaters*

- Have recurring mechanical equipment problems been experienced? Y or  N Has a piece of equipment recently failed or been replaced? Y or  N

Descriptions:

- Have you experienced continual or maintenance related problems with breakers, fuses, or overloaded circuits? Y or  N

Examples:

*electrical upgrade abt 93*

- Do you have any utility metering information that you can provide us? Y or  N
- Do you have adequate lighting and power for your classrooms, labs and library?  Y or N

Examples

*new lights installed 3/83*

RETURN TO:

Parkhill, Smith & Cooper, Inc.  
c/o Allan Wolf  
4222 85th St.  
Lubbock, TX 79423

Return by: (Jan. 6<sup>th</sup> to On Site Survey Team)