

Name of Dorm: _____

Room type: _____

Date: _____

Please base all estimations on your average daily usage over the month of November. Thank you.

of lamps:

Hours used per day:

of space heaters:

Hours used per day:

of water heaters:

Hours used per day:

of fans:

Hours used per day:

of air filters:

Hours used per day:

Other applicable device: _____

Hours used per day:

Other applicable device: _____

Hours used per day:

(Please only include devices that compensate for atmosphere and lighting conditions. We are only interested in those devices that are meant to compensate for inadequacies in the utilities/facilities provided by the building.)