

"NC" Occupant Comfort Survey

Please fill out this survey based on your experiences in the building.

General Information

Date

/ / 

MM DD YYYY

Time

: :

HH MM SS AM/PM

Building Location

Thermal Environment

What is the approximate air temperature outside?

What are the current sky conditions?

- ☒ Sunny
- ☐ Mixed (Sun & Clouds)
- ☐ Overcast

What season is it?

- ☒ Winter
- ☐ Spring
- ☐ Summer
- ☐ Fall

Employee Clothing – Tops

- ☐ short sleeve shirt
- ☐ long sleeve shirt
- ☐ sweater vest
- ☐ suit vest
- ☐ long sleeve sweater
- ☐ suit jacket
- ☐ long sleeve sweatshirt

- ☐ t-shirt
- ☐ thermal underwear top

Employee Clothing – Bottoms

- ☐ trousers
- ☐ knee length skirt
- ☐ walking shorts
- ☐ overalls
- ☐ insulated coveralls
- ☐ athletic sweat pants
- ☐ ankle length skirt
- ☐ thermal underwear bottoms
- ☐ half slip
- ☐ full slip

If you are wearing articles of clothing not listed above, please list them in this space.

Employee Activity Level

- ☐ Seated quietly
- ☐ Standing relaxed
- ☐ Standing, light activity
- ☐ Standing, medium activity
- ☐ High activity

Check the equipment below that is in your personal office or cubical area.

- ☐ Computer
- ☐ Task Lighting

What type of control is there over the temperature in your space?

- ☒ One thermostat that controls the temperature for the whole space
- ☐ Multiple thermostats that control different sections of the space
- ☐ Thermostat control for each private office
- ☐ Thermostat controls for each conference room

What is your general level of thermal comfort?

☐

- ☐ Hot
 - ☐ Warm
 - ☐ Slightly Warm
 - ☐ Neutral/ Comfortable
 - ☐ Slightly Cool
 - ☐ Cool
 - ☐ Cold
-

Lighting & Acoustics

What types of lights do you use to illuminate your work area?

- ☐ Overhead lighting
- ☐ Desk lamp
- ☐ Other

Are you able to control the lighting in your work area?

- ☒ Yes
- ☐ No

Is the lighting in your personal office or cubical area sensor controlled?

- ☒ Yes
- ☐ No

Are there any problems with the lighting quality?

- ☐ Flickering lights
- ☐ Burned out bulbs
- ☐ Dim Lights
- ☐ None
- ☐ Other

How satisfied with the lighting in your work space are you?

- ☒ Very Satisfied
- ☐ Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Dissatisfied
- ☐ Very Dissatisfied

Rate the noise level present in your office.

- ☒ Quiet
- ☐ Some conversations can be heard
- ☐ Many conversations can be heard
- ☐ Loud

Do you find the level of noise in your office distracts you from your work?

- ☒ Yes
- ☐ No

Have there been any noise complaints filed from your office?

- ☒ Yes, I asked for one to be filed
- ☐ Yes, a co-worker filed one
- ☐ No

How satisfied with the level of noise in your work space are you?

- ☒ Very Satisfied
- ☐ Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Dissatisfied
- ☐ Very Dissatisfied

Air Quality & Cleanliness

Is smoking allowed in your building?

- ☒ Yes
- ☐ No

Please describe the general smell of your space.

- ☒ Very pleasant
- ☐ Somewhat pleasant
- ☐ Neutral
- ☐ Somewhat foul
- ☐ Very foul

How satisfied with the quality of the air in your work space are you?

- ☒ Very Satisfied
- ☐ Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Dissatisfied
- ☐ Very Dissatisfied

Do you have a trash can beside your desk?

- ☒ Yes
- ☐ No

If yes, how often is your trash can emptied?

- ☒ Daily/Nightly
- ☐ A few times a week
- ☐ Once a week
- ☐ A few times a month
- ☐ I empty it myself when it's full

Do you have a recycling container beside your desk?

- ☒ Yes
- ☐ No

Are there containers for recycling in the kitchen, copy room, and/or other common areas of your office?

- ☒ Yes
- ☐ No

How would you rate your building's appearance?

- ☒ Spotlessly clean
- ☐ Clean
- ☐ Somewhat clean
- ☐ Somewhat dirty
- ☐ Dirty

How would you rate the appearance of the bathrooms in your building?

- ☒ Spotlessly clean
- ☐ Clean
- ☐ Somewhat clean

- ☒ Somewhat dirty
- ☐ Dirty

How satisfied with the cleanliness in your work space are you?

- ☒ Very Satisfied
- ☐ Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Dissatisfied
- ☐ Very Dissatisfied

Humidity & Air Speed

How would you describe the level of humidity in your work space?

- ☒ Humidity too high (damp)
- ☐ Neutral/ Comfortable
- ☐ Humidity too low (dry)

How satisfied with the humidity level in your work space are you?

- ☒ Very Satisfied
- ☐ Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Dissatisfied
- ☐ Very Dissatisfied

Do you find that a draft in the air in your office distracts you from your work?

- ☒ Yes
- ☐ No
- ☐ Sometimes

If yes, check which type of drafts distract you.

- ☐ Drafts from windows
- ☐ Drafts from vents
- ☐ Other

How satisfied with the air speed (draftiness) of your work space

are you?

- ☒ Very Satisfied
- ☐ Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Dissatisfied
- ☐ Very Dissatisfied

Overall, how satisfied are you with the building's performance and your level of comfort?

- ☒ Very Satisfied
- ☐ Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Dissatisfied
- ☐ Very Dissatisfied

If you are dissatisfied with any of the above comfort items, please provide additional information to help identify the nature and cause of the problem.

If you would like to be contacted directly about any problems you noted in this form, please fill in your name, email address, and/or phone number.

- ☐ Yes
- ☒ No

Name

First

Last

Email

Phone

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