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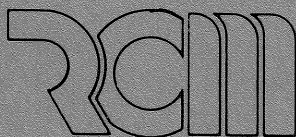
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MINI AUDIT

FOR THE

CITY OF BLOOMINGTON



**rieke
carroll
muller
associates inc**

architects
engineers
land surveyors
planners

MARCH, 1981

RCM JOB NO. 801704

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MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81		
	BUILDING ADDRESS 10313 10th Avenue Circle		ADDRESS 2215 West Old Shakopee Road				
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington		
	ZIP CODE 55431		CITY Bloomington		ZIP CODE 55431		
PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Vensen		TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>March 18, 1981</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

206

Signature

Rieke Carroll Muller Assoc., Inc.

Firm Name (if none, enter none)

P.O. Box 130 Hopkins, Minn. 55343

Address

612/935-6901

Phone

March 18, 1981

Date

March 18, 1981

Building Organizational Authority (Print or Type)

William W. Jensen

Signature

March 18, 1981

Date

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS
DATA

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 5052 kwh	= 0 kwh,	0 %	x \$ 182.45	= \$ 0
to		to	to		to
upper bound 5 %	x 5052 kwh	= 252.6 kwh,	5 %	x \$ 182.45	= \$ 9.12

Building does not use any fuel

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS
ESTIMATION

K

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad connections on a regular basis.			
3	1	2	Check alignment of motors to driven equipment and tighten as necessary.			
4	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
6	1	3	Instantaneous power factor reading was 95 note capacitors are installed.			
7	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
8	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
9	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
10	5	1	Review the records books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE March 19, 1981
	BUILDING ADDRESS 5113 West 80th. Street		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	

BUILDING ELIGIBILITY CODE	Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.				
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)		
	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.	
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Date: <u>March 18, 1981</u> Name: <u>Arthur Jensen</u> Signature: <u><i>Arthur Jensen</i></u>	
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)	
	Date: _____ Name: _____ Signature: _____	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K, did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

Signature

206

Rieke Carroll Muller Associates, Inc.

Firm Name (if none, enter none)

P.O. Box 130

Address

612-935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Jensen

Signature

March 18, 1981

Date

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
Fuel 1				
Fuel 2				
TOTAL				

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																								
	1	Check two boxes in each category — Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																								
	2	Calculate ranges of energy and cost savings — <div style="text-align: center; margin-top: 10px;"> Range of Electrical Savings </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Electrical Consumption</td> <td style="text-align: center;">Range of Energy Savings</td> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Electrical Dollars Spent</td> <td style="text-align: center;">Range of Electrical Dollars Savings</td> </tr> <tr> <td>lower bound _____ %</td> <td>x <u>12974</u> kwh</td> <td>= <u>0</u> kwh,</td> <td><u>0</u> %</td> <td>x \$ <u>441.95</u></td> <td>= \$ <u>0</u></td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td>upper bound _____ %</td> <td>x <u>12974</u> kwh</td> <td>= <u>648</u> kwh,</td> <td><u>5</u> %</td> <td>x \$ <u>441.95</u></td> <td>= \$ <u>22.10</u></td> </tr> </table>	% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings	lower bound _____ %	x <u>12974</u> kwh	= <u>0</u> kwh,	<u>0</u> %	x \$ <u>441.95</u>	= \$ <u>0</u>	to		to	to		to	upper bound _____ %	x <u>12974</u> kwh	= <u>648</u> kwh,	<u>5</u> %	x \$ <u>441.95</u>	= \$ <u>22.10</u>
	% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings																				
lower bound _____ %	x <u>12974</u> kwh	= <u>0</u> kwh,	<u>0</u> %	x \$ <u>441.95</u>	= \$ <u>0</u>																					
to		to	to		to																					
upper bound _____ %	x <u>12974</u> kwh	= <u>648</u> kwh,	<u>5</u> %	x \$ <u>441.95</u>	= \$ <u>22.10</u>																					
3	Building does not use any fuel <div style="text-align: center; margin-top: 10px;"> Range of Fuel Savings </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Fuel Consumption</td> <td style="text-align: center;">Range of Fuel Savings</td> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Fuel Dollars Spent</td> <td style="text-align: center;">Range of Fuel Dollars Savings</td> </tr> <tr> <td>lower bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td>upper bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> </table>	% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings	lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____	to		to	to		to	upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____	
% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings																					
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____																					
to		to	to		to																					
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____																					
		The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.																								

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.

[illegible]

64

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to drive equipment, align and tighten as needed.			
5	1	2	Replace worn or defective motors with motors that are sized as close.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor at 90%.			
7	1	3	An instantaneous power factor reading was. 92.			
8	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
9	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
10	5	1	Keep records of the operating schedule monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
11	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

A CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 3/18/81
	BUILDING ADDRESS 2509 West 98th Street		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

B BUILDING ELIGIBILITY CODE	Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)
	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

C MINI-AUDIT FUNDING REQUEST	Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>March 18, 1981</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u>Arthur Jensen</u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Signature

206

Rieke Carroll Muller Associates, Inc.
Firm Name (if none, enter none)

P.O. Box 130
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

Signature

March 18, 1981
Date

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	CET	Rieke Carroll Muller Assoc., Inc.
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete	
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	
Metal Hatch	

H SOLAR POTENTIAL INFORMATION	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
	Is there open land adjacent to the building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline? _____
	If pitched, what is the angle that the roof makes with horizontal? _____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall? <u>none</u>
	What percentage of the south facing wall is glass? <u>0</u> %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																																															
	1	Check two boxes in each category — Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																																															
	2	Calculate ranges of energy and cost savings — <div style="text-align: center;"> Range of Electrical Savings </div> <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Electrical Consumption</td> <td></td> <td style="text-align: center;">Range of Energy Savings</td> <td></td> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Electrical Dollars Spent</td> <td></td> <td style="text-align: center;">Range of Electrical Dollars Savings</td> </tr> <tr> <td>lower bound</td> <td>0 %</td> <td>x</td> <td>17202 kwh</td> <td>=</td> <td>0 kwh,</td> <td>0 %</td> <td>x</td> <td>\$ 608.35</td> <td>=</td> <td>\$ 0</td> </tr> <tr> <td></td> <td>to</td> <td></td> <td></td> <td></td> <td>to</td> <td>to</td> <td></td> <td></td> <td></td> <td>to</td> </tr> <tr> <td>upper bound</td> <td>5 %</td> <td>x</td> <td>17202 kwh</td> <td>=</td> <td>860 kwh,</td> <td>5 %</td> <td>x</td> <td>\$ 608.35</td> <td>=</td> <td>\$ 30.42</td> </tr> </table>				% Range		Annual Electrical Consumption		Range of Energy Savings		% Range		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings	lower bound	0 %	x	17202 kwh	=	0 kwh,	0 %	x	\$ 608.35	=	\$ 0		to				to	to				to	upper bound	5 %	x	17202 kwh	=	860 kwh,	5 %	x	\$ 608.35	=	\$ 30.42
	% Range		Annual Electrical Consumption		Range of Energy Savings		% Range		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings																																						
	lower bound	0 %	x	17202 kwh	=	0 kwh,	0 %	x	\$ 608.35	=	\$ 0																																						
		to				to	to				to																																						
	upper bound	5 %	x	17202 kwh	=	860 kwh,	5 %	x	\$ 608.35	=	\$ 30.42																																						
	3	Building does not use any fuel <div style="text-align: center;"> Range of Fuel Savings </div> <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Fuel Consumption</td> <td></td> <td style="text-align: center;">Range of Fuel Savings</td> <td></td> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Fuel Dollars Spent</td> <td></td> <td style="text-align: center;">Range of Fuel Dollars Savings</td> </tr> <tr> <td>lower bound</td> <td>_____ %</td> <td>x</td> <td>_____ Btu</td> <td>=</td> <td>_____ Btu,</td> <td>_____ %</td> <td>x</td> <td>\$ _____</td> <td>=</td> <td>\$ _____</td> </tr> <tr> <td></td> <td>to</td> <td></td> <td></td> <td></td> <td>to</td> <td>to</td> <td></td> <td></td> <td></td> <td>to</td> </tr> <tr> <td>upper bound</td> <td>_____ %</td> <td>x</td> <td>_____ Btu</td> <td>=</td> <td>_____ Btu,</td> <td>_____ %</td> <td>x</td> <td>\$ _____</td> <td>=</td> <td>\$ _____</td> </tr> </table>				% Range		Annual Fuel Consumption		Range of Fuel Savings		% Range		Annual Fuel Dollars Spent		Range of Fuel Dollars Savings	lower bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____	=	\$ _____		to				to	to				to	upper bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____	=	\$ _____
	% Range		Annual Fuel Consumption		Range of Fuel Savings		% Range		Annual Fuel Dollars Spent		Range of Fuel Dollars Savings																																						
	lower bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____	=	\$ _____																																						
	to				to	to				to																																							
upper bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____	=	\$ _____																																							
The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.																																																	

K

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	1	3	An instantaneous power factor reading was .8.			
8	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
9	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
10	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

OPTIONAL: OPTIONAL:

[illegible]

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81		
	BUILDING ADDRESS 1701 West 106th. Street		ADDRESS 2215 West Old Shakopee Road				
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington		
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen		
				ZIP CODE 55431		TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	
	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)	

MINI-AUDIT FUNDING REQUEST	C	
	Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.	
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date: <u>March 18, 1981</u> Name: <u>Arthur Jensen</u> Signature: <u><i>Arthur Jensen</i></u>	
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)	
	Date: _____ Name: _____ Signature: _____	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
(should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources)
(should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Associates, Inc.
Firm Name (if none, enter none)

P.O. Box 130, Hopkins, MN 55343
Address

612-935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

Arthur W. Jordan
Signature

March 18, 1981
Date

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	Certified Electrical Tech.	Rieke Carroll Muller Assoc., Inc.
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, lift station building
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)	Concrete
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	Tar and Gravel

H SOLAR POTENTIAL INFORMATION	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %	
	What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____	
	Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched	
	If pitched, what is the compass orientation of the ridgeline? _____	
	If pitched, what is the angle that the roof makes with horizontal? _____°	
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	What is the exterior facing material for the south facing wall? <u>Face Brick</u>	
	What percentage of the south facing wall is glass? <u>0</u> %	
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	If the space heating equipment is inside the building, where is it located? <input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____	
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>	
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____	
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination		

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																																						
	1	Check two boxes in each category — Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																																						
	2	Calculate ranges of energy and cost savings — <div style="text-align: center;"> Range of Electrical Savings </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Electrical Consumption</td> <td></td> <td style="text-align: center;">Range of Energy Savings</td> <td></td> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Electrical Dollars Spent</td> <td></td> <td style="text-align: center;">Range of Electrical Dollars Savings</td> </tr> <tr> <td style="text-align: center;">lower bound 0 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">75829 kwh</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0 kwh, 0 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ 2229.28</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ 0</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td style="text-align: center;">upper bound 5 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">75829 kwh</td> <td style="text-align: center;">=</td> <td style="text-align: center;">3791.5 kwh, 5 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ 2229.28</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ 111.46</td> </tr> </table>	% Range		Annual Electrical Consumption		Range of Energy Savings		% Range		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings	lower bound 0 %	x	75829 kwh	=	0 kwh, 0 %	x	\$ 2229.28	=	\$ 0	to				to				to	upper bound 5 %	x	75829 kwh	=	3791.5 kwh, 5 %	x	\$ 2229.28	=	\$ 111.46
	% Range		Annual Electrical Consumption		Range of Energy Savings		% Range		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings																													
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3	Building does not use any fuel. <div style="text-align: center;"> Range of Fuel Savings </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Fuel Consumption</td> <td></td> <td style="text-align: center;">Range of Fuel Savings</td> <td></td> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Fuel Dollars Spent</td> <td></td> <td style="text-align: center;">Range of Fuel Dollars Savings</td> </tr> <tr> <td style="text-align: center;">lower bound _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">_____ Btu</td> <td style="text-align: center;">=</td> <td style="text-align: center;">_____ Btu, _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td style="text-align: center;">upper bound _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">_____ Btu</td> <td style="text-align: center;">=</td> <td style="text-align: center;">_____ Btu, _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ _____</td> </tr> </table>	% Range		Annual Fuel Consumption		Range of Fuel Savings		% Range		Annual Fuel Dollars Spent		Range of Fuel Dollars Savings	lower bound _____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____	to				to				to	upper bound _____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____	
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	The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.																																							

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.

ENERGY SAVINGS

ENERGY COST SAVINGS

DATE OF IMPLEMENTATION

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	1	3	An instantaneous power factor reading was .87.			
8	2	2	Weatherstrip all exterior doors.			
9	2	2	Replace an existing door with one of a higher R-value.			
10	2	8	Caulk around pipes, louvers, and other openings in the walls. Insulate walls with rigid insulation on inside surfaces.			
10	3	1	65°F maximum occupied, 60°F maximum unoccupied during the heating season.			
12	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage & shaft erosion.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

OPTIONAL: OPTIONAL:

65

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81
	BUILDING ADDRESS 8350 West 106th Street		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.				
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization
	<p>If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>3-18-81</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur Jensen</i></u></p> <p>If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>

D
ENERGY REPORT
CHECK-OFF

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

E

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Assoc., Inc.
Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

Arthur W. Jensen
Signature

March 18, 1981
Date

MINI-AUDIT
STATEMENTS

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	Certified Electronic Technician	Rieke Carroll Muller Assoc., Inc.
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)	Concrete plank
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
SOLAR POTENTIAL INFORMATION	Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline? _____
	If pitched, what is the angle that the roof makes with horizontal? _____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall? _____ face brick
	What percentage of the south facing wall is glass? _____ 0 _____ %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the space heating equipment is inside the building, where is it located? <input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No None
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
	Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																																
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[illegible]

64

NEW OPPORTUNITIES

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OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	2	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Eliminate excessive vibration.			
4	1	2	Lubricate motors to reduce wear and excessive torque.			
5	1	2	Replace worn bearings.			
6	1	2	Keep motors clean to make cooling easier.			
7	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available. Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
8	1	3	Instantaneous power factor reading was .85.			
9	1	4	Shade outdoor transformer banks from solar radiation.			
10	2	2	Weatherstrip all exterior doors.			
11	2	2	Replace an existing door with one of a higher R-value.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
12	2	8	Caulk all cracks that allow air and moisture into the building.			
13	2	8	Insulate walls and ceiling with rigid insulation on inside surfaces.			
14	3	1	Check the calibration of all controllers and devices for proper settings and operations.			
15	3	1	65°F maximum occupied, 60°F maximum unoccupied during the heating season.			
16	3	3	Make sure that all fans, frequently inoperative in unit heaters, fan coil units, and unit ventilators are running normally to increase the heat transfer rate from heating coils.			
17	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
18	3	3	Inspect damper blades and linkages. Clean, oil and adjust.			
19	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
20	5	1	Review the record books on a regular basis.			
21	7	4	Inspect electrical eontacts and work-parts of relays and maintain in good working order.			
22	7	4	Check heater elements for cleanliness. Replace as necessary.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

[illegible]

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81	
	BUILDING ADDRESS 226 East 107th Street Circle		ADDRESS 2215 West Old Shakopee Road			
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen	
				TELEPHONE 881-5811		

BUILDING ELIGIBILITY CODE	<p>B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.</p>					
	<p>1. OWNERSHIP TYPE</p> <p><input checked="" type="checkbox"/> Public (PUB)</p> <p><input type="checkbox"/> Non-Profit Association (NAP)</p>		<p>3a. SCHOOLS</p> <p><input type="checkbox"/> Elementary (SCHL-ELM)</p> <p><input type="checkbox"/> Secondary (SCHL-SECD)</p> <p><input type="checkbox"/> Coll. or Univ. (SCHL-POST)</p> <p><input type="checkbox"/> Vocational (SCHL-VOCL)</p> <p><input type="checkbox"/> Education Agency (SCHL-ADMN)</p> <p><input type="checkbox"/> Administration (SCHL-ADMN)</p> <p><input type="checkbox"/> OTHER (SCHL-OTHR)</p>		<p>c. LOCAL GOVERNMENT</p> <p><input type="checkbox"/> Office (LOCG-OFFC)</p> <p><input type="checkbox"/> Storage (LOCG-STAG)</p> <p><input checked="" type="checkbox"/> Service (LOCG-SERV)</p> <p><input type="checkbox"/> Library (LOCG-LBRY)</p> <p><input type="checkbox"/> Police (LOCG-PLCE)</p> <p><input type="checkbox"/> Fire (LOCG-FIRE)</p> <p><input type="checkbox"/> OTHER (LOCG-OTHR)</p>	
	<p>2. ULTIMATE OWNER</p> <p><input type="checkbox"/> County (CNTY)</p> <p><input checked="" type="checkbox"/> City (CITY)</p> <p><input type="checkbox"/> Township (TOWN)</p> <p><input type="checkbox"/> State (STAT)</p> <p><input type="checkbox"/> Public School (PUSC)</p> <p><input type="checkbox"/> Private School (PRSC)</p> <p><input type="checkbox"/> Non-Profit Association (NPAP)</p> <p><input type="checkbox"/> Indian Tribe (INDN)</p>		<p>b. PUBLIC CARE</p> <p><input type="checkbox"/> Nursing Home (PBCR-NURS)</p> <p><input type="checkbox"/> Long Term Care (PBCR-TERM)</p> <p><input type="checkbox"/> Rehab. Facility (PBCR-RHAB)</p> <p><input type="checkbox"/> Public Health Ctr. (PBCR-HCTR)</p> <p><input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)</p>		<p>d. HOSPITALS</p> <p><input type="checkbox"/> General (HOSP-GENL)</p> <p><input type="checkbox"/> Tuberculosis (HOSP-TUBR)</p> <p><input type="checkbox"/> OTHER (HOSP-OTHR)</p>	

MINI-AUDIT FUNDING REQUEST	<p>C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization</p>	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
	<p>Date <u>March 18, 1981</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W Jensen</i></u></p>	
	<p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p>	
	<p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>	

D**ENERGY REPORT
CHECK-OFF**

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

F

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

206

Signature

Rieke Carroll Muller Assoc., Inc.

Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343

Address

612/935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

William W. Jensen

Signature

March 18, 1981

Date

**MINI-AUDIT
STATEMENTS**

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	Electrical Technician	Rieke Carroll Muller Associates, Inc.
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground lift station, submersible pumps
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
None	
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	
None	

H SOLAR POTENTIAL INFORMATION	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.?	
	Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	South facing Wall:	<input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the roof or wall are partly shaded, what percentage of the surface is unshaded?	
	% of roof unshaded	<u> </u> %
	% of south facing wall unshaded	<u> </u> %
	What is the overall shape of the building?	
	<input type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) <u>None</u>	
	Is the roof of the building flat or pitched?	
	<input type="checkbox"/> flat <input type="checkbox"/> pitched <u>None</u>	
	If pitched, what is the compass orientation of the ridgeline? <u> </u>	
	If pitched, what is the angle that the roof makes with horizontal? <u> </u> °	
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
What is the exterior facing material for the south facing wall? <u>None</u>		
What percentage of the south facing wall is glass? <u>0</u> %		
Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>		
If the space heating equipment is inside the building, where is it located?		
<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) <u> </u>		
Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>		
If the water heating equipment is inside the building, where is it located?		
<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) <u> </u>		
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units?		
<input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination		

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS
DATA

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 1070 kwh	= 0 kwh	0 %	x \$74.15	= \$ 0
to		to	to		to
upper bound 5 %	x 1070 kwh	= 53.5 kwh	5 %	x \$74.15	= \$ 3.71

Building does not use any fuel

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified

SAVINGS
ESTIMATION

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available. Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
4	1	3	Instantaneous power factor reading was .99. Note: Capacitors are installed.			
5	1	4	Shade outdoor control panel from solar radiation.			
6	5	1	Keep records of the operating schedule monthly energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			
7	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81
	BUILDING ADDRESS 9130 East Bush Lake Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)	

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization	
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Date <u>March 18, 1981</u> Name <u>Arthur Jensen</u> Signature <u><i>Arthur W Jensen</i></u>	
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)	
	Date _____ Name _____ Signature _____	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Assoc., Inc.
Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

[Signature]
Signature

March 18, 1981
Date

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Art Parvey		City of Bloomington
AUDIT TEAM	Scott Hutchins	Electrical Technician	Rieke Carroll Muller Assoc., Inc.

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)	
	Good, underground lift station	
	BUILDING INFORMATION	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
		None
		STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete with metal cover		
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)		
Metal cover		

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
	Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline? _____
	If pitched, what is the angle that the roof makes with horizontal? _____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall? <u>None</u>
	What percentage of the south facing wall is glass? <u>0</u> %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

J

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

1

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings -- ☐ 0% ☒ 5% ☒ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

2

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 537 kwh	= 0 kwh,	0 %	x \$ 89.28	= \$ 0
to		to	to		to
upper bound 5 %	x 537 kwh	= 26.9 kwh,	5 %	x \$ 89.28	= \$ 4.46

3

Building does not use any fuel.

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

SAVINGS ESTIMATION

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

63

K

Instructions Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
4	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
6	1	3	Instantaneous power factor reading was .80.			
7	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
8	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
9	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
10	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81
	BUILDING ADDRESS 8400 Chalet Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)
	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date: <u>March 18, 1981</u> Name: <u>Arthur Jensen</u> Signature: <u>Arthur W Jensen</u>
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)
	Date: _____ Name: _____ Signature: _____

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
(should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources)
(should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Associates, Inc.
Firm Name (if none, enter none)

P.O. Box 130, Hopkins, MN 55343
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Smith
Signature

March 18, 1981
Date

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc. Inc.
	Scott Hutchins	Certified Electrical Tech.	Rieke Carroll Muller Assoc, Inc.
	Art Parvey		City of Bloomington

AUDIT TEAM

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
BUILDING INFORMATION	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
	Wood Beams
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
	Shingles

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
SOLAR POTENTIAL INFORMATION	Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building? <input type="checkbox"/> square <input checked="" type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched? <input type="checkbox"/> flat <input checked="" type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridge line? <u>East-West</u>
	If pitched, what is the angle that the roof makes with horizontal? <u>70</u> °
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall? <u>Shingles</u>
	What percentage of the south facing wall is glass? <u>0</u> %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the space heating equipment is inside the building, where is it located? <input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																											
	1	Check two boxes in each category —																											
		Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																											
		Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																											
	2	Calculate ranges of energy and cost savings —																											
		<p style="text-align: center;">Range of Electrical Savings</p> <table border="0"> <tr> <td>% Range</td> <td>Annual Electrical Consumption</td> <td>Range of Energy Savings</td> <td>% Range</td> <td>Annual Electrical Dollars Spent</td> <td>Range of Electrical Dollars Savings</td> </tr> <tr> <td>lower bound 0 %</td> <td>x 60525 kwh</td> <td>= 0 kwh,</td> <td>0 %</td> <td>x \$ 1784.53</td> <td>= \$ 0</td> </tr> <tr> <td>to</td> <td></td> <td>to</td> <td>to</td> <td></td> <td>to</td> </tr> <tr> <td>upper bound 5 %</td> <td>x 60525 kwh</td> <td>= 3026 kwh,</td> <td>5 %</td> <td>x \$ 1784.53</td> <td>= \$ 89.23</td> </tr> </table>				% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings	lower bound 0 %	x 60525 kwh	= 0 kwh,	0 %	x \$ 1784.53	= \$ 0	to		to	to		to	upper bound 5 %	x 60525 kwh	= 3026 kwh,	5 %	x \$ 1784.53	= \$ 89.23
	% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings																							
	lower bound 0 %	x 60525 kwh	= 0 kwh,	0 %	x \$ 1784.53	= \$ 0																							
	to		to	to		to																							
	upper bound 5 %	x 60525 kwh	= 3026 kwh,	5 %	x \$ 1784.53	= \$ 89.23																							
3	<p>Building does not use any fuel.</p> <p style="text-align: center;">Range of Fuel Savings</p> <table border="0"> <tr> <td>% Range</td> <td>Annual Fuel Consumption</td> <td>Range of Fuel Savings</td> <td>% Range</td> <td>Annual Fuel Dollars Spent</td> <td>Range of Fuel Dollars Savings</td> </tr> <tr> <td>lower bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> <tr> <td>to</td> <td></td> <td>to</td> <td>to</td> <td></td> <td>to</td> </tr> <tr> <td>upper bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> </table>				% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings	lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____	to		to	to		to	upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____	
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K

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	1	3	An instantaneous power factor reading was .80.			
8	2	2	Weatherstrip all exterior doors.			
9	3	1	Check the calibration of all controllers and devices for proper settings and operations.			
10	3	1	65°F maximum occupied, 60°F maximum unoccupied during the heating season.			
11	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
12	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

OPTIONAL: OPTIONAL:

[illegible]

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

A CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81		
	BUILDING ADDRESS 11200 France Avenue South		ADDRESS 2215 West Old Shakopee Road				
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington		
	ZIP CODE 55431		CITY Bloomington		ZIP CODE 55431		
PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen		TELEPHONE 881-5811	

B BUILDING ELIGIBILITY CODE	Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

C MINI-AUDIT FUNDING REQUEST	Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization	
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Date <u>March 18, 1981</u> Name <u>Arthur Jensen</u> Signature <u><i>Arthur W. Jensen</i></u>	
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)	
Date _____ Name _____ Signature _____		

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
 Mini-Auditor's Name (Print or Type)

Randy Smith 206
 Signature

Rieke Carroll Muller Assoc., Inc.
 Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343
 Address

612/935-6901
 Phone

March 18, 1981
 Date

Assistant Maintenance Supervisor
 Building Organizational Authority (Print or Type)

Arthur W. Jensen
 Signature

March 18, 1981
 Date

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Art Parvey		City of Bloomington
AUDIT TEAM	Scott Hutchins	Electrical Technician	Rieke Carroll Muller Assoc., Inc.

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good underground lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete with metal cover	
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
	Metal cover

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.?	Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the roof or wall are partly shaded, what percentage of the surface is unshaded?	% of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building?	<input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched?	<input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline?	_____
	If pitched, what is the angle that the roof makes with horizontal?	_____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall?	None
	What percentage of the south facing wall is glass?	0 %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the space heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the water heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units?	<input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																																													
	1	Check two boxes in each category — Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																																													
	2	Calculate ranges of energy and cost savings — <table style="width: 100%; margin-top: 10px;"> <tr> <th colspan="6" style="text-align: center;">Range of Electrical Savings</th> </tr> <tr> <th style="text-align: center;">% Range</th> <th></th> <th style="text-align: center;">Annual Electrical Consumption</th> <th></th> <th style="text-align: center;">Range of Energy Savings</th> <th></th> <th style="text-align: center;">Annual Electrical Dollars Spent</th> <th></th> <th style="text-align: center;">Range of Electrical Dollars Savings</th> </tr> <tr> <td style="text-align: center;">lower bound 0 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">3246 kwh</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0 kwh, 0 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ 114.83</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ 0</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td style="text-align: center;">upper bound 5 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">3246 kwh</td> <td style="text-align: center;">=</td> <td style="text-align: center;">162.3 kwh, 5 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ 114.83</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ 5.74</td> </tr> </table>				Range of Electrical Savings						% Range		Annual Electrical Consumption		Range of Energy Savings		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings	lower bound 0 %	x	3246 kwh	=	0 kwh, 0 %	x	\$ 114.83	=	\$ 0	to				to				to	upper bound 5 %	x	3246 kwh	=	162.3 kwh, 5 %	x	\$ 114.83	=	\$ 5.74
	Range of Electrical Savings																																														
	% Range		Annual Electrical Consumption		Range of Energy Savings		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings																																						
	lower bound 0 %	x	3246 kwh	=	0 kwh, 0 %	x	\$ 114.83	=	\$ 0																																						
	to				to				to																																						
	upper bound 5 %	x	3246 kwh	=	162.3 kwh, 5 %	x	\$ 114.83	=	\$ 5.74																																						
	3	Building does not use any fuel. <table style="width: 100%; margin-top: 10px;"> <tr> <th colspan="6" style="text-align: center;">Range of Fuel Savings</th> </tr> <tr> <th style="text-align: center;">% Range</th> <th></th> <th style="text-align: center;">Annual Fuel Consumption</th> <th></th> <th style="text-align: center;">Range of Fuel Savings</th> <th></th> <th style="text-align: center;">Annual Fuel Dollars Spent</th> <th></th> <th style="text-align: center;">Range of Fuel Dollars Savings</th> </tr> <tr> <td style="text-align: center;">lower bound _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">_____ Btu</td> <td style="text-align: center;">=</td> <td style="text-align: center;">_____ Btu, _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td style="text-align: center;">upper bound _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">_____ Btu</td> <td style="text-align: center;">=</td> <td style="text-align: center;">_____ Btu, _____ %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ _____</td> </tr> </table>				Range of Fuel Savings						% Range		Annual Fuel Consumption		Range of Fuel Savings		Annual Fuel Dollars Spent		Range of Fuel Dollars Savings	lower bound _____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____	to				to				to	upper bound _____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____
	Range of Fuel Savings																																														
% Range		Annual Fuel Consumption		Range of Fuel Savings		Annual Fuel Dollars Spent		Range of Fuel Dollars Savings																																							
lower bound _____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____																																							
to				to				to																																							
upper bound _____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____																																							
The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.																																															

Instructions Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
4	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motors terminals to correct the power factor to 90%.			
6	1	3	Instantaneous power factor reading was .70.			
7	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
8	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
9	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
10	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81	
	BUILDING ADDRESS 11011 Glen Wilding Lane		ADDRESS 2215 West Old Shakopee Road			
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington	
	ZIP CODE 55431		CONTACT PERSON Arthur Jensen		TELEPHONE 881-5811	
PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901				

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1 OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	
	2 ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)	

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>March 18, 1981</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
(should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste
(should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Assoc., Inc.
Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

Arthur W. Jensen
Signature

March 18, 1981
Date

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	Electrical Technician	Rieke Carroll Muller Assoc., Inc.
AUDIT TEAM	Art Parvey		City of Bloomington

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete with metal hatch	
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	
Metal hatch	

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
	Is there open land adjacent to the building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building? <input type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input checked="" type="checkbox"/> Other (specify) <u>Round</u>
	Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline? _____
	If pitched, what is the angle that the roof makes with horizontal? _____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall? <u>None</u>
	What percentage of the south facing wall is glass? <u>0</u> %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 2622 kwh	= 0 kwh,	0 %	x \$ 95.27	= \$ 0
to		to	to		to
upper bound 5 %	x 2622 kwh	= 13.11 kwh,	5 %	x \$ 95.27	= \$ 4.76

Building does not use any fuel

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available. Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor 90%.			
6	1	2	Note motors are overloaded thus causing poor instantaneous power factor readings of pump 1 .74 - pump 2 .64.			
7	3	3	Inspect air compressor intake filter pads and clean or replace as necessary.			
8	3	3	Check the compressor's oil level.			
9	5	1	Keep records of the operating schedule monthly energy consumption and purchase on any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
10	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81		
	BUILDING ADDRESS 11101 Hampshire Avenue South		ADDRESS 2215 West Old Shakopee Road				
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington		
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen		
				ZIP CODE 55431		TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding, then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>March 18, 1981</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W. Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>

DENERGY REPORT
CHECK-OFF

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

E

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

206

Signature

Rieke Carroll Muller Assoc., Inc.

Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343

Address

612/935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Jensen

Signature

March 18, 1981

Date

MINI-AUDIT
STATEMENTS

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Eliminate excessive vibration.			
4	1	2	Lubricate motors to reduce wear and excessive torque.			
5	1	2	Replace worn bearings.			
6	1	2	Keep motors clean to make cooling easier.			
7	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available. Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
8	1	3	Instantaneous power factor reading was .76.			
9	1	4	Shade outdoor transformer banks from solar radiation.			
10	2	2	Weatherstrip all exterior doors.			
11	2	2	Replace an existing door with one of a higher R-value.			

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Note 2: Reproduce this page as necessary.

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
12	2	8	Caulk all cracks that allow air and moisture into the building.			
13	2	8	Insulate walls and ceiling with rigid insulation on inside surfaces.			
14	3	1	Check the calibration of all controllers and devices for proper settings and operations.			
15	3	1	65°F maximum occupied, 60°F maximum unoccupied during the heating season.			
16	3	3	Make sure that all fans, frequently inoperative in unit heaters, fan coil units, and unit ventilators are running normally to increase the heat transfer rate from heating coils.			
17	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
18	3	3	Inspect damper blades and linkages. Clean, oil and adjust.			
19	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
20	5	1	Review the record books on a regular basis.			
21	7	4	Inspect electrical contacts and work-parts of relays and maintain in good working order.			
22	7	4	Check heater elements for cleanliness. Replace as necessary.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

[illegible]

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81
	BUILDING ADDRESS 212 Mission Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.				
	1 OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	2 ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>3-18-81</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W. Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>

D

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

E

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K, did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

Signature

206

Rieke Carroll Muller Assoc., Inc.

Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343

Address

612/935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Smith

Signature

March 18, 1981

Date

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	Certified Electrical Technician	Rieke Carroll Muller Assoc. Inc.

AUDIT TEAM	NAME	POSITION	ORGANIZATION
		Art Parvey	

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete with metal hatch	
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	
Metal hatch	

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
	<p>Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u></p> <p>If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %</p> <p>What is the overall shape of the building? <input type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input checked="" type="checkbox"/> other (specify) <u>Round</u></p> <p>Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched</p> <p>If pitched, what is the compass orientation of the ridgeline? _____</p> <p>If pitched, what is the angle that the roof makes with horizontal? _____°</p> <p>Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>What is the exterior facing material for the south facing wall? <u>None</u></p> <p>What percentage of the south facing wall is glass? <u>0</u> %</p> <p>Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u></p> <p>If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____</p> <p>Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u></p> <p>If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____</p> <p>Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination</p>

Instructions

Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			
20% SAVINGS YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS DATA

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings —

☒ 0%
☒ 5%
☐ 10%
☐ 15%
☐ 20%
☐ 25%
☐ other (specify) _____

Range of Fuel Savings --

☐ 0%
☐ 5%
☐ 10%
☐ 15%
☐ 20%
☐ 25%
☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 22334 kwh	= 0 kwh,	0 %	x \$ 798.87	= \$ 0
to		to	to		to
upper bound 5 %	x 22334 kwh	= 1116.7 kwh,	5 %	x \$ 798.87	= \$ 39.94

Building does not use any fuel.

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS ESTIMATION

K

Instructions. Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available. Where it is impractical to replace motors which have low loads and power factors use capacitors at motor terminals to correct the power factor to 90%.			
6	1	3	Instantaneous power factor reading was .86.			
7	3	3	Check for packing wear which can cause excessive water wastage and shaft erosion.			
8	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
9	5	1	Keep records of the operating schedule, monthly energy consumption and purchase on any new equipment that affects energy consumption of the building. These records will indicate the impact of energy conservation measures.			
10	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE March 19, 1981
	BUILDING ADDRESS 8915 Newton Avenue South		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)
	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>March 18, 1981</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct *OR* I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith 206

Signature

Rieke Carroll Muller Associates, Inc.

Firm Name (if none, enter none)

P.O. Box 130

Address

612-935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. [Signature]

Signature

March 18, 1981

Date

AUDIT TEAM	F	NAME	POSITION	ORGANIZATION
		Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc. Inc.
		Scott Hutchins	Certified Technical Engineer	Rieke Carroll Muller Assoc. Inc.
		Art Parvey		City of Bloomington

BUILDING INFORMATION	G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
		Good, underground lift station
		MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
		None
		STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
		Concrete
		ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
		Metal Hatch

SOLAR POTENTIAL INFORMATION	H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
		Is there open land adjacent to the building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
		If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
		What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
		Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
		If pitched, what is the compass orientation of the ridgeline? _____
		If pitched, what is the angle that the roof makes with horizontal? _____°
		Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		What is the exterior facing material for the south facing wall? _____ None
		What percentage of the south facing wall is glass? _____ 0 _____ %
		Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None
		If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
		Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None
		If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
	Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																												
	1	Check two boxes in each category — Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																												
	2	Calculate ranges of energy and cost savings — <div style="text-align: center;"> Range of Electrical Savings </div> <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Electrical Consumption</td> <td style="text-align: center;">Range of Energy Savings</td> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Electrical Dollars Spent</td> <td style="text-align: center;">Range of Electrical Dollars Savings</td> </tr> <tr> <td>lower bound _____ %</td> <td>x 2592 kwh</td> <td>= 0 kwh,</td> <td>0 %</td> <td>x \$ 94.13</td> <td>= \$ 0</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td>upper bound _____ %</td> <td>x 2592 kwh</td> <td>= 129 kwh,</td> <td>5 %</td> <td>x \$ 94.13</td> <td>= \$ 4.71</td> </tr> </table>					% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings	lower bound _____ %	x 2592 kwh	= 0 kwh,	0 %	x \$ 94.13	= \$ 0	to		to	to		to	upper bound _____ %	x 2592 kwh	= 129 kwh,	5 %	x \$ 94.13	= \$ 4.71
	% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings																								
	lower bound _____ %	x 2592 kwh	= 0 kwh,	0 %	x \$ 94.13	= \$ 0																								
	to		to	to		to																								
	upper bound _____ %	x 2592 kwh	= 129 kwh,	5 %	x \$ 94.13	= \$ 4.71																								
	3	Building does not use any fuel. Range of Fuel Savings <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Fuel Consumption</td> <td style="text-align: center;">Range of Fuel Savings</td> <td style="text-align: center;">% Range</td> <td style="text-align: center;">Annual Fuel Dollars Spent</td> <td style="text-align: center;">Range of Fuel Dollars Savings</td> </tr> <tr> <td>lower bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td>upper bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> </table>					% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings	lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____	to		to	to		to	upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
	% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings																								
	lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____																								
to		to	to		to																									
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____																									
The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.																														

K

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to drive equipment, align and tighten as nec.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor at 90%.			
7	1	3	An instantaneous power factor reading was .63			
8	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
9	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
10	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			
11	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE March 17, 1981
	BUILDING ADDRESS 4516 Overlook Drive		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.				
	1 OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	2 ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>March 18, 1981</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
(should, should not)
undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste
wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print, or Type)

Signature

Rieke Carroll Muller
Firm Name (if none, enter none)

P.O. Box 130
Address

612 935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building/Organizational Authority (Print or Type)

Signature

Date _____

MINI-AUDIT STATEMENTS

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	RCM
	Scott Hutchins	Elec. Technician	RCM
AUDIT TEAM	Art Parvey		City of Bloomington

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, lift station built into hill
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	none
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete plank	
BUILDING INFORMATION	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
	Earth

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
	Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline? _____
	If pitched, what is the angle that the roof makes with horizontal? _____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall? <u>Face brick</u>
	What percentage of the south facing wall is glass? <u>0</u> %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the space heating equipment is inside the building, where is it located? <input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>none</u>
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																																													
	1	Check two boxes in each category —																																													
		Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																																													
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Instructions. Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
4	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
6	2	2	Weatherstrip all exterior doors.			
7	2	2	Replace an existing door with one of higher R-value.			
8	2	8	Caulk all cracks that allow air and moisture into the building.			
9	3	1	65°F maximum occupied, 60°F maximum unoccupied during the heating season.			
10	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
11	5	1	Keep records of the operating schedule, monthly energy consumption and purchase			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

OPTIONAL: OPTIONAL:

[illegible]

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Note 2: Reproduce this page as necessary.

FORM NO. MIN-01

MINI-AUDIT
FUNDING REQUEST

C

Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.

If eligible for both Federal and State Funding:

Have you received a mini-audit grant before? ☐ Yes ☒ No

Have you previously applied for mini-audit funding? ☒ Yes ☐ No

Do you wish to apply for mini-audit funding? ☐ Yes ☒ No

Date: March 18, 1981

Name: Arthur Jensen

Signature: *Arthur W Jensen*

If eligible for Federal funding only:

Have you received a mini-audit grant before? ☐ Yes ☐ No

Have you previously applied for mini-audit funding? ☐ Yes ☐ No

Do you wish to apply for mini-audit funding? ☐ Yes ☐ No

The 50% match for Federal funds will come from: (Use additional sheets if necessary.)

Date: _____

Name: _____

Signature: _____

D**ENERGY REPORT
CHECK-OFF**

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

E

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct *OR* I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K, did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

206

Signature

Rieke Carroll Muller Associates, Inc.

Firm Name (if none, enter none)

P.O. Box 130

Address

612/935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Jensen

Signature

March 18, 1981

Date

**MINI-AUDIT
STATEMENTS**

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Associates, Inc.
	Scott Hutchins	Certified Technical Engr.	Rieke Carroll Muller Associates, Inc.
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete	
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	Metal Hatch

H SOLAR POTENTIAL INFORMATION	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.?	Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the roof or wall are partly shaded, what percentage of the surface is unshaded?	% of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building?	<input checked="" type="checkbox"/> square <input checked="" type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched?	<input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline?	_____
	If pitched, what is the angle that the roof makes with horizontal?	_____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall?	None
	What percentage of the south facing wall is glass?	_____ %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the space heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the water heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units?	<input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																								
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	to		to			to																			
	upper bound 5 %	x 22763 kwh	= 1138 kwh,	5 %	x \$ 812.36	= \$ 40.62																			
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OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible. Use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor at 90%.			
7	1	2	An instantaneous power factor reading was .84.			
8	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
9	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
10	5	1	Keep records of the operating schedule monthly energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			
11	5	1	Review the record books on a regular basis.			

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Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81	
	BUILDING ADDRESS 5050 West Old Shakopee Road		ADDRESS 2215 West Shakopee Road			
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington	
	ZIP CODE 55431		CITY Bloomington		ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen	
TELEPHONE 881-5811						

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>March 18, 1981</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Assoc., Inc.
Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Jensen
Signature

March 18, 1981
Date

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Art Parvey		City of Bloomington
	Scott Hutchins	Electrical Technician	Rieke Carroll Muller Assoc., Inc.

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good underground lift station
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
	Concrete with metal cover
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
	Metal cover

H SOLAR POTENTIAL INFORMATION	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.?	Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the roof or wall are partly shaded, what percentage of the surface is unshaded?	% of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building?	<input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched?	<input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline?	_____
	If pitched, what is the angle that the roof makes with horizontal?	_____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall?	None
	What percentage of the south facing wall is glass?	0 %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the space heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input type="checkbox"/> No None
	If the water heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units?	<input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

I Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS DATA

J Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

1 Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

2 Calculate ranges of energy and cost savings —

Range of Electrical Savings									
% Range		Annual Electrical Consumption		Range of Energy Savings	% Range	Annual Electrical Dollars Spent		Range of Electrical Dollars Savings	
lower bound	0 %	x	5360 kwh	=	0 kwh, 0 %	x	\$ 191.08	=	\$ 0
	to				to				to
upper bound	5 %	x	5360 kwh	=	268 kwh, 5 %	x	\$ 191.08	=	\$ 9.55

3 Building does not use any fuel

Range of Fuel Savings									
% Range		Annual Fuel Consumption		Range of Fuel Savings	% Range	Annual Fuel Dollars Spent		Range of Fuel Dollars Savings	
lower bound	_____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____
	to				to				to
upper bound	_____ %	x	_____ Btu	=	_____ Btu, _____ %	x	\$ _____	=	\$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS ESTIMATION

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
4	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
6	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
7	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
8	5	1	Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
9	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81		
	BUILDING ADDRESS 9510 Riverview Avenue South		ADDRESS 2215 West Old Shakopee Road				
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington		
	ZIP CODE 55431		CITY Bloomington		ZIP CODE 55431		
PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen		TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1 OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C	
	Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding, then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization	
If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date <u>March 18, 1981</u> Name <u>Arthur Jensen</u> Signature <u><i>Arthur W Jensen</i></u>		
If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)		
Date _____ Name _____ Signature _____		

Check the type of energy report which was completed and submitted prior to this mini-audit report

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
(should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste
wind, wood (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Assoc., Inc.
Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

Arthur W. Jensen
Signature

March 18, 1981
Date

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	Electrical Technician	Rieke Carroll Muller Associates, Inc.
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground lift station, submersible pumps
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
None	
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	
None	

H SOLAR POTENTIAL INFORMATION	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.?	
	Roof: <input type="checkbox"/> Yes <input type="checkbox"/> No	None
	South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No	None
	If the roof or wall are partly shaded, what percentage of the surface is unshaded?	
	% of roof unshaded _____ %	
	% of south facing wall unshaded _____ %	
	What is the overall shape of the building?	
	<input type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____	None
	Is the roof of the building flat or pitched?	
	<input type="checkbox"/> flat <input type="checkbox"/> pitched	None
	If pitched, what is the compass orientation of the ridgeline? _____	
	If pitched, what is the angle that the roof makes with horizontal? _____°	
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
What is the exterior facing material for the south facing wall? _____		
What percentage of the south facing wall is glass? _____ %		
Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No	None	
If the space heating equipment is inside the building, where is it located?		
<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____		
Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No	None	
If the water heating equipment is inside the building, where is it located?		
<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____		
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units?		
<input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination		

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

20% SAVINGS DATA

BASE PERIOD YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range		Annual Electrical Consumption		Range of Energy Savings	% Range		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings
lower bound 0 %	x	1109 kwh	=	0 kwh,	0 %	x	\$ 76.74	=	\$ 0
to				to	to				to
upper bound 5 %	x	1109 kwh	=	55.5 kwh,	5 %	x	\$ 76.74	=	\$ 3.84

Building does not use any fuel

Range of Fuel Savings

% Range		Annual Fuel Consumption		Range of Fuel Savings	% Range		Annual Fuel Dollars Spent		Range of Fuel Dollars Savings
lower bound _____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____	=	\$ _____
to				to	to				to
upper bound _____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____	=	\$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available. Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
4	1	3	Instantaneous power factor reading was .97. Note: Capacitors are installed.			
5	1	4	Shade outdoor control panel from solar radiation.			
6	5	1	Keep records of the operating schedule monthly energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			
7	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Sanitary Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81
	BUILDING ADDRESS 11661 Palmer Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)
	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C	Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Date <u>March 18, 1981</u> Name <u>Arthur Jensen</u> Signature <u><i>Arthur Jensen</i></u>	
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)	
	Date _____ Name _____ Signature _____	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Associates, Inc.
Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343
Address

612/935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

Arthur W. Jensen
Signature

March 18, 1981
Date

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Art Parvey		City of Bloomington
AUDIT TEAM	Scott Hutchins	Electrical Technician	Rieke Carroll Muller Assoc., Inc.

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground lift station
	BUILDING INFORMATION
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
	Concrete with metal cover
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
	Metal cover

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
	<p>Is there open land adjacent to the building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None</p> <p>If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %</p> <p>What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____</p> <p>Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched</p> <p>If pitched, what is the compass orientation of the ridgeline? _____</p> <p>If pitched, what is the angle that the roof makes with horizontal? _____°</p> <p>Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>What is the exterior facing material for the south facing wall? None</p> <p>What percentage of the south facing wall is glass? 0 %</p> <p>Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None</p> <p>If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____</p> <p>Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None</p> <p>If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____</p> <p>Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination</p>

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

20% SAVINGS DATA

BASE PERIOD YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

1

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings -- ☐ 0% ☐ 5% ☒ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

2

Calculate ranges of energy and cost savings —

Range of Electrical Savings					
% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 4110 kwh	= 0 kwh,	0 %	x \$ 155.02	= \$ 0
to		to	to		to
upper bound 5 %	x 4110 kwh	= 205.5 kwh,	5 %	x \$ 155.02	= \$ 7.75

3

Building does not use any fuel.

Range of Fuel Savings					
% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS ESTIMATION

K

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

ITEM NO.		CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
		MAJOR CLASS	SUB CLASS				
1	1	1		Keep all controls free of dust.			
2	1	2		Look for loose connections and bad contacts on a regular basis.			
3	1	2		Check alignment of motors to driven equipment, align and tighten as necessary.			
4	1	2		Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2		Where it is impractical to replace motors which have low loads and power factors, use capacitors at motors terminals to correct the power factor to 90%.			
6	1	3		Instantaneous power factor reading was .92.			
7	3	3		Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
8	3	3		Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
9	5	1		Keep records of the operating schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
10	5	1		Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station - Storm Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81
	BUILDING ADDRESS 11220 France Avenue South		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen

BUILDING ELIGIBILITY CODE	Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.				
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)

MINI-AUDIT FUNDING REQUEST	C	Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date <u>March 18, 1981</u></p> <p>Name <u>Arthur Jensen</u></p> <p>Signature <u><i>Arthur W. Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date _____</p> <p>Name _____</p> <p>Signature _____</p>	

D
ENERGY REPORT
CHECK-OFF

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

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E

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

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I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Assoc., Inc.

Firm Name (if none, enter none)

P.O. Box 130 Hopkins, MN 55343

Address

612/935-6901

Phone

March, 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Jensen
Signature

March 18, 1981

Date

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
Fuel 1				
Fuel 2				
TOTAL				

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																																												
	1	Check two boxes in each category — Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input checked="" type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																																												
	2	Calculate ranges of energy and cost savings — <div style="text-align: center; font-weight: bold;">Range of Electrical Savings</div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Electrical Consumption</td> <td></td> <td style="text-align: center;">Range of Energy Savings</td> <td></td> <td style="text-align: center;">% Range</td> <td></td> <td style="text-align: center;">Annual Electrical Dollars Spent</td> <td></td> <td style="text-align: center;">Range of Electrical Dollars Savings</td> </tr> <tr> <td style="text-align: center;">lower bound</td> <td style="text-align: center;">0 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">13836 kwh</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0 kwh,</td> <td style="text-align: center;">0 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ 561.73</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ 0</td> </tr> <tr> <td></td> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> <td style="text-align: center;">to</td> <td></td> <td></td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td style="text-align: center;">upper bound</td> <td style="text-align: center;">5 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">13836 kwh</td> <td style="text-align: center;">=</td> <td style="text-align: center;">691.8 kwh,</td> <td style="text-align: center;">5 %</td> <td style="text-align: center;">x</td> <td style="text-align: center;">\$ 561.36</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$ 28.09</td> </tr> </table>	% Range		Annual Electrical Consumption		Range of Energy Savings		% Range		Annual Electrical Dollars Spent		Range of Electrical Dollars Savings	lower bound	0 %	x	13836 kwh	=	0 kwh,	0 %	x	\$ 561.73	=	\$ 0		to				to	to				to	upper bound	5 %	x	13836 kwh	=	691.8 kwh,	5 %	x	\$ 561.36	=	\$ 28.09
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	The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.																																													

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
4	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
6	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
7	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
8	5	1	Keep records of the operating schedule monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
9	5	1	Review the record books on a regular basis.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Lift Station-Storm Sewage		NAME OF ORGANIZATION City of Bloomington		DATE 2/18/81
	BUILDING ADDRESS 5130 West Old Shakopee Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen
				TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)
	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u>March 18, 1981</u> Name <u>Arthur Jensen</u> Signature <u>Arthur W Jensen</u>
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)
	Date _____ Name _____ Signature _____

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☐ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources waste wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller
Firm Name (if none, enter none)

P.O. Box 130
Address

612 935-6901
Phone

March 18, 1981
Date

Assistant Maintenance Supervisor
Building Organizational Authority (Print or Type)

[Signature]
Signature

March 18, 1981
Date

I

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS DATA

J

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

1

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

2

Calculate ranges of energy and cost savings —

Range of Electrical Savings					
% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 33608 kwh	= 0 kwh,	0 %	x \$1076.95	= \$ 0
to		to	to		to
upper bound 5 %	x 33608 kwh	= 1680 kwh,	5 %	x \$1076.95	= \$ 53.85

3

Building does not use any fuel

Range of Fuel Savings					
% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS ESTIMATION

K

Instructions. Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular bases			
3	1	2	Check alignment of motors to driven equipment, align and tighten as necessary			
4	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
5	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%			
6	3	1	65°F maximum occupied, 60°F maximum.			
6	3	3	Check for packing wear which can cause excessive water wastage and shaft erosion.			
7	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
8	5	1	Keep records of the operations schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

[illegible]

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Metering Station - Water		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81	
	BUILDING ADDRESS 6000 Knox Avenue South		ADDRESS 2215 West Old Shakopee Road			
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen	
				TELEPHONE 881-5811		

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)	

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>March 18, 1981</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur W. Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>	

D**ENERGY REPORT
CHECK-OFF**

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

F

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources)
(should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

Signature

206

Rieke Carroll Muller Associates, Inc.
Firm Name (if none, enter none)

P.O. Box 130, Hopkins, MN 55434
Address

612/935-6901
Phone

Phone

March 18, 1981
Date

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Jensen

Signature

March 18, 1981
Date

Date

**MINI-AUDIT
STATEMENTS**

AUDIT TEAM	F	NAME	POSITION	ORGANIZATION
		Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Associates, Inc.
		Scott Hutchins	Certified Technical Engineer	Rieke Carroll Muller Associates, Inc.
		Art Parvey		City of Bloomington

BUILDING INFORMATION	G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
		Good, underground metering station
		MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
		None
		STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
		Concrete, Manhole Cover
		ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
		Asphalt Road

SOLAR POTENTIAL INFORMATION	H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
		Is there open land adjacent to the building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
		If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
		What is the overall shape of the building? <input type="checkbox"/> square <input checked="" type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
		Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
		If pitched, what is the compass orientation of the ridgeline? _____
		If pitched, what is the angle that the roof makes with horizontal? _____°
		Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		What is the exterior facing material for the south facing wall? _____ None
		What percentage of the south facing wall is glass? 0 %
		Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input checked="" type="checkbox"/> Other (specify) Underground
		Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None
		If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
	Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

J

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

1 Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

2 Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 5737 kwh	= 0 kwh,	0 %	x \$ 277.28	= \$ 0
to		to	to		to
upper bound 5 %	x 5737 kwh	= 286 kwh,	5 %	x \$ 277.28	= \$ 13.86

3 Building does not use any fuel.

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS ESTIMATION

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

[illegible]

64

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	5	1	Keep records of the operating schedule, energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			
8	5	1	Review the record books on a regular basis.			
9	7	4	Inspect electrical contacts and working parts of relays and maintain a good working order.			
10	7	4	Check heater elements for cleanliness. Replace as necessary.			
11	7	4	Check controls for proper operation. Adjust as necessary.			
12	7	4	Periodically tighten all electrical-mechanical connections to prevent arcing and burning due to metal flow			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

[illegible]

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Metering Station - Water		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81	
	BUILDING ADDRESS 6001 Oliver Avenue South		ADDRESS 2215 West Old Shakopee Road			
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington	
	ZIP CODE 55431		CONTACT PERSON Arthur Jensen		TELEPHONE 881-5811	
PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		TELEPHONE 881-5811		

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)	

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>March 18, 1981</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

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Signature

Rieke Carroll Muller Associates, Inc.

Firm Name (if none, enter none)

P.O. Box 130, Hopkins, MN 55343

Address

612/935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Smith

Signature

March 18, 1981

Date

AUDIT TEAM	F	NAME	POSITION	ORGANIZATION
		Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Associates, Inc.
		Scott Hutchins	Certified Engineering Tech.	Rieke Carroll Muller Associates, Inc.
		Art Parvey		City of Bloomington

BUILDING INFORMATION	G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
		Good, underground metering station
		MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
		None
		STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
		concrete, manhole cover
		ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
		Asphalt Road

SOLAR POTENTIAL INFORMATION	H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
		Is there open land adjacent to the building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No None
		If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
		What is the overall shape of the building? <input type="checkbox"/> square <input checked="" type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
		Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
		If pitched, what is the compass orientation of the ridgeline? _____
		If pitched, what is the angle that the roof makes with horizontal? _____°
		Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		What is the exterior facing material for the south facing wall? _____ None
		What percentage of the south facing wall is glass? _____ 0 _____ %
		Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input checked="" type="checkbox"/> Other (specify) _____ underground
		Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No None
		If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
	Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

20% SAVINGS DATA

BASE PERIOD YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR			Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 6302 kwh	= 0 kwh	0 %	x \$ 302.95	= \$ 0
to		to	to		to
upper bound 5 %	x 6302 kwh	= 315 kwh	5 %	x \$ 302.95	= \$ 15.15

Building does not use any fuel

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

[illegible]

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NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	5	1	Keep records of the operating schedule monthly energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			
8	5	1	Review the record books on a regular basis.			
9	7	4	Inspect electrical contacts and working parts of relays and maintain in good working order.			
10	7	4	Check heater elements for cleanliness. Replace as necessary.			
11	7	4	Check controls for proper operation. Adjust as necessary.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

[illegible]

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Pump House - Well #1		NAME OF ORGANIZATION City of Bloomington		DATE 3/18/81
	BUILDING ADDRESS 9302 Poplar Bridge Road		ADDRESS 2215 West Old Shakopp Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	
				TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>March 18, 1981</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>	

D

ENERGY REPORT
CHECK-OFF

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

M

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
 Mini-Auditor's Name (Print or Type)
Randy Smith 206
 Signature

Rieke Carroll Muller Associates, Inc.
 Firm Name (if none, enter none)

P.O. Box 130
 Address

612-935-6901
 Phone

March 18, 1981
 Date

Assistant Maintenance Supervisor
 Building Organizational Authority (Print or Type)
Arthur W. Smith
 Signature

March 18, 1981
 Date

MINI-AUDIT
STATEMENTS

AUDIT TEAM	F	NAME	POSITION	ORGANIZATION
		Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
		Scott Hutchins	CET	Rieke Carroll Muller Assoc., Inc.
		Art Parvey		City of Bloomington

BUILDING INFORMATION	G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
		Good, well house
		MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
		None
		STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
	Concrete	
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	
	Tar and gravel.	

SOLAR POTENTIAL INFORMATION	H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
		Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
		What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
		Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
		If pitched, what is the compass orientation of the ridgeline? _____
		If pitched, what is the angle that the roof makes with horizontal? _____°
		Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		What is the exterior facing material for the south facing wall? <u>Face brick</u>
		What percentage of the south facing wall is glass? <u>0</u> %
		Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		If the space heating equipment is inside the building, where is it located? <input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
		Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>None</u>
		If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
	Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

J 1 2 3 SAVINGS ESTIMATION	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.					
	Check two boxes in each category —					
	Range of Electrical Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____					
	Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____					
	Calculate ranges of energy and cost savings — Billing is included with water treatment plant.					
	Range of Electrical Savings					
	% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
	lower bound _____ %	x _____ kwh	= _____ kwh, _____ %	x	\$ _____	\$ _____
	to		to	to		to
	upper bound _____ %	x _____ kwh	= _____ kwh, _____ %	x	\$ _____	\$ _____
Building does not use fuel. Range of Fuel Savings						
% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings	
lower bound _____ %	x _____ Btu	= _____ Btu, _____ %	x	\$ _____	\$ _____	
to		to	to		to	
upper bound _____ %	x _____ Btu	= _____ Btu, _____ %	x	\$ _____	\$ _____	
The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.						

Instructions. Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

[illegible]

64

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	2	1	Add insulation to ceiling and hatch.			
8	2	2	Weatherstrip all exterior doors.			
9	2	8	Insulate walls with rigid insulation on inside.			
10	3	1	Check the calibration on all controllers and devices for proper settings and operations.			
11	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

OPTIONAL: OPTIONAL:

[illegible]

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Pump House - Well #2		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81
	BUILDING ADDRESS 9320 Poplar Bridge Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	

BUILDING ELIGIBILITY CODE	<p>B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.</p>				
	<p>1. OWNERSHIP TYPE</p> <p><input checked="" type="checkbox"/> Public (PUB)</p> <p><input type="checkbox"/> Non-Profit Association (NAP)</p>	<p>3a. SCHOOLS</p> <p><input type="checkbox"/> Elementary (SCHL-ELM)</p> <p><input type="checkbox"/> Secondary (SCHL-SECD)</p> <p><input type="checkbox"/> Coll. or Univ. (SCHL-POST)</p> <p><input type="checkbox"/> Vocational (SCHL-VOCL)</p> <p><input type="checkbox"/> Education Agency (SCHL-ADMN)</p> <p><input type="checkbox"/> Administration (SCHL-ADMN)</p> <p><input type="checkbox"/> OTHER (SCHL-OTHR)</p>	<p>c. LOCAL GOVERNMENT</p> <p><input type="checkbox"/> Office (LOCG-OFFC)</p> <p><input type="checkbox"/> Storage (LOCG-STRG)</p> <p><input checked="" type="checkbox"/> Service (LOCG-SERV)</p> <p><input type="checkbox"/> Library (LOCG-LBRY)</p> <p><input type="checkbox"/> Police (LOCG-PLCE)</p> <p><input type="checkbox"/> Fire (LOCG-FIRE)</p> <p><input type="checkbox"/> OTHER (LOCG-OTHR)</p>	<p>2. ULTIMATE OWNER</p> <p><input type="checkbox"/> County (CNTY)</p> <p><input checked="" type="checkbox"/> City (CITY)</p> <p><input type="checkbox"/> Township (TOWN)</p> <p><input type="checkbox"/> State (STAT)</p> <p><input type="checkbox"/> Public School (PUSC)</p> <p><input type="checkbox"/> Private School (PRSC)</p> <p><input type="checkbox"/> Non-Profit Association (NPAP)</p> <p><input type="checkbox"/> Indian Tribe (INDN)</p>	<p>b. PUBLIC CARE</p> <p><input type="checkbox"/> Nursing Home (PBCR-NURS)</p> <p><input type="checkbox"/> Long Term Care (PBCR-TERM)</p> <p><input type="checkbox"/> Rehab. Facility (PBCR-RHAB)</p> <p><input type="checkbox"/> Public Health Ctr. (PBCR-HCTR)</p> <p><input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)</p>

MINI-AUDIT FUNDING REQUEST	<p>C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.</p>
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>3-18-81</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur W Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>

D

ENERGY REPORT
CHECK-OFF

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

M

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K, did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Signature

206

Rieke Carroll Muller
Firm Name (if none, enter none)

P.O. Box 130
Address

612 935-6901
Phone

3-18-81
Date

Asst. Maintenance Supervisor
Building Organizational Authority (Print or Type)

Signature

3-18-81
Date

MINI-AUDIT
STATEMENTS

AUDIT TEAM	F	NAME	POSITION	ORGANIZATION
		Randy Smith	Certified Mini-Auditor	RCM
		Scott Hutchins	CET	RCM
		Art Parvey	City of Bloomington	

BUILDING INFORMATION	G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
		Good, well house
		MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
		none
		STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
		concrete
		ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
		tar and gravel

SOLAR POTENTIAL INFORMATION	H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
		Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded <u>50</u> % <u>50</u> % % of south facing wall unshaded <u>50</u> %
		What is the overall shape of the building? <input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
		Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
		If pitched, what is the compass orientation of the ridgeline? _____
		If pitched, what is the angle that the roof makes with horizontal? _____°
		Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		What is the exterior facing material for the south facing wall? <u>face brick</u>
	What percentage of the south facing wall is glass? <u>0</u> %	
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	If the space heating equipment is inside the building, where is it located? <input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____	
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>none</u>	
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____	
	Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																																			
	1	Check two boxes in each category —																																			
		Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																																			
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	2	Calculate ranges of energy and cost savings —																																			
		<p style="text-align: center;">Range of Electrical Savings</p> <table border="0"> <tr> <td>% Range</td> <td>Annual Electrical Consumption</td> <td></td> <td>Range of Energy Savings</td> <td>% Range</td> <td>Annual Electrical Dollars Spent</td> <td></td> <td>Range of Electrical Dollars Savings</td> </tr> <tr> <td>lower bound 0 %</td> <td>x 1034711 kwh</td> <td>=</td> <td>0 kwh,</td> <td>0 %</td> <td>x \$25321.68</td> <td>=</td> <td>\$ 0</td> </tr> <tr> <td>to</td> <td></td> <td></td> <td>to</td> <td>to</td> <td></td> <td></td> <td>to</td> </tr> <tr> <td>upper bound 5 %</td> <td>x 1034711 kwh</td> <td>=</td> <td>51735 kwh,</td> <td>5 %</td> <td>x \$25321.68</td> <td>=</td> <td>\$ 1266.08</td> </tr> </table>				% Range	Annual Electrical Consumption		Range of Energy Savings	% Range	Annual Electrical Dollars Spent		Range of Electrical Dollars Savings	lower bound 0 %	x 1034711 kwh	=	0 kwh,	0 %	x \$25321.68	=	\$ 0	to			to	to			to	upper bound 5 %	x 1034711 kwh	=	51735 kwh,	5 %	x \$25321.68	=	\$ 1266.08
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K

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	3	Check alignment of motors to driven equipment, align tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	2	1	Add insulation to ceiling and hatch.			
8	2	2	Weatherstrip all exterior doors.			
9	2	8	Insulate walls with rigid insulation on inside.			
10	3	1	Check the calibration on all controllers and devices for proper settings and operations.			
11	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

[illegible]

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Pump House - Well #3		NAME OF ORGANIZATION City of Bloomington		DATE 3/18/81
	BUILDING ADDRESS 9141 Normandale Boulevard		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen
				TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOGG-OFFC) <input type="checkbox"/> Storage (LOGG-STRG) <input checked="" type="checkbox"/> Service (LOGG-SERV) <input type="checkbox"/> Library (LOGG-LBRY) <input type="checkbox"/> Police (LOGG-PLCE) <input type="checkbox"/> Fire (LOGG-FIRE) <input type="checkbox"/> OTHER (LOGG-OTHR)	
	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)	

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>March 18, 1981</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct *OR* I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
(should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources)
(should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller Assoc., Inc.

Firm Name (if none, enter none)

P.O. Box 130

Address

612-935-6901

Phone

3-19-81

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

[Signature]
Signature

March 18, 1981

Date

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Assoc., Inc.
	Scott Hutchins	CET	Rieke Carroll Muller Assoc., Inc
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, well house
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)	Concrete
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	Tar and gravel

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
SOLAR POTENTIAL INFORMATION	Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded <u>50</u> % % of south facing wall unshaded <u>50</u> %
	What is the overall shape of the building? <input checked="" type="checkbox"/> Square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> Flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline? _____
	If pitched, what is the angle that the roof makes with horizontal? _____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall? <u>Face brick</u>
	What percentage of the south facing wall is glass? <u>0</u> %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the space heating equipment is inside the building, where is it located? <input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

I

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS DATA

J

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

1

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

2

Calculate ranges of energy and cost savings —

Range of Electrical Savings								
% Range		Annual Electrical Consumption		Range of Energy Savings	% Range	Annual Electrical Dollars Spent		Range of Electrical Dollars Savings
lower bound	0 %	x	551105 kwh	=	0 kwh,	0 %	x	\$14136.57
	to				to			to
upper bound	5 %	x	551105 kwh	=	27555 kwh,	5 %	x	\$14136.57
								\$ 706.83

3

Building does not use fuel

Range of Fuel Savings								
% Range		Annual Fuel Consumption		Range of Fuel Savings	% Range	Annual Fuel Dollars Spent		Range of Fuel Dollars Savings
lower bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____
	to				to			to
upper bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____
								\$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS ESTIMATION

Instructions. Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

[illegible]

64

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Eliminate excessive vibration.			
4	1	2	Lubricate motors to reduce wear and excessive torque.			
5	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
6	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
7	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
8	1	3	An instantaneous power factor reading was .87.			
9	2	1	Add insulation to ceiling and hatch.			
10	2	2	Weatherstrip all exterior doors.			
11	2	8	Insulate walls with rigid insulation on inside surfaces.			
12	3	1	Check the calibration of all controllers and devices for proper settings and			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">NEW OPPORTUNITIES</div> <div> <p>Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.</p> </div> </div>						
ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
			operations.			
13	3	3	Check for packing wear which can cause excessive leakage. Repack to avoid excessive water wastage and shaft erosion.			
14	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
15	3	3	Inspect damper blades and linkages. Clean, oil and adjust.			
16	5	1	Keep records of the operating schedule monthly, energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
17	5	1	Review the record books on a regular basis.			
18	7	4	Inspect electrical contacts and working parts of relays and maintain in good working order.			
19	7	4	Check heater elements for cleanliness. Replace as necessary.			
20	7	4	Check controls for proper operation. Adjust as necessary.			
21	7	4	Periodically tighten all electrical-mechanical connections to prevent arcing and burning due to metal flow or loosening of terminal bolts or lugs.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Pump House - Well #4		NAME OF ORGANIZATION City of Bloomington		DATE 3/18/81
	BUILDING ADDRESS 9301 Collegeview Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)
	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>March 18, 1981</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>

D**ENERGY REPORT
CHECK-OFF**

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

M

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K, did not save at least 20% of the building's energy consumption as specified in section I.
 (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
 (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
 (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources)
 (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith 206
 Signature

Rieke Carroll Muller Associates, Inc.

Firm Name (if none, enter none)

P.O. Box 130

Address

612/935-6901

Phone

March 18, 1981

Date

Assistant Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Smith
 Signature

March 18, 1981

Date

**MINI-AUDIT
STATEMENTS**

F AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	Rieke Carroll Muller Associates, Inc.
	Scott Hutchins	CET	Rieke Carroll Muller Associates, Inc.
	Art Parvey		City of Bloomington

G BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, well house
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	None
	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
Concrete	
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	
Tar and gravel	

H SOLAR POTENTIAL INFORMATION	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.?	Roof: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If the roof or wall are partly shaded, what percentage of the surface is unshaded?	% of roof unshaded <u>10</u> % % of south facing wall unshaded <u>10</u> %
	What is the overall shape of the building?	<input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched?	<input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline?	_____
	If pitched, what is the angle that the roof makes with horizontal?	_____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall?	<u>Face brick</u>
	What percentage of the south facing wall is glass?	<u>0</u> %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If the space heating equipment is inside the building, where is it located?	<input checked="" type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <u>None</u>
	If the water heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units?	<input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

20% SAVINGS YEAR				Fiscal Year _____
ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE	
Electricity				
Fuel 1				
Fuel 2				
TOTAL				

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

1 Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

2 Calculate ranges of energy and cost savings —

Range of Electrical Savings								
% Range		Annual Electrical Consumption		Range of Energy Savings	% Range	Annual Electrical Dollars Spent		Range of Electrical Dollars Savings
lower bound	0 %	x	187262 kwh	=	0 kwh,	0 %	x	\$ 4765.81*
to					to			
upper bound	5 %	x	187262 kwh	=	9363 kwh,	5 %	x	\$ 4765.81* = \$ 238.29

3 Building does not use fuel.

Range of Fuel Savings								
% Range		Annual Fuel Consumption		Range of Fuel Savings	% Range	Annual Fuel Dollars Spent		Range of Fuel Dollars Savings
lower bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____ = \$ _____
to					to			
upper bound	_____ %	x	_____ Btu	=	_____ Btu,	_____ %	x	\$ _____ = \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

* Note: This figure is for 4 months.

Instructions. Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

[illegible]

NEW OPPORTUNITIES			<p>Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.</p> <p>OPTIONAL: OPTIONAL:</p>			
ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	2	Look for loose connections and bad contacts on a regular basis.			
3	1	2	Lubricate motors to reduce wear and excessive torque.			
4	1	2	Check alignment of motors to driven equipment, align and tighten as necessary.			
5	1	2	Replace worn or defective motors with motors that are sized as close to the load as possible and use the highest efficiency motors available.			
6	1	2	Where it is impractical to replace motors which have low loads and power factors, use capacitors at motor terminals to correct the power factor to 90%.			
7	1	2	Capacitors are overheated and should be checked.			
8	2	1	Add insulation to ceiling and hatch.			
9	2	2	Weatherstrip all exterior doors. Weatherstrip all exterior doors.			
10	2	8	Insulate walls with rigid insulation on inside.			
11	3	1	Check the calibration of all controllers and devices for proper settings and operations.			
12	3	3	Check for packing wear which can cause excessive leakage. Repack to			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
			avoid excessive water wastage and shaft erosion.			
13	3	3	Inspect bearings and drive belts for wear and binding. Adjust, repair or replace as necessary.			
14	3	3	Inspect damper blades and linkages. Clean, oil and adjust.			
15	5	1	Keep records of the operating schedule monthly energy consumption and purchase of any new equipment that affects energy consumption of efficiency of the building. These records will indicate the impact of energy conservation measures.			
16	5	1	Review the record books on a regular basis.			
17	7	4	Inspect electrical contacts and working parts of relays and maintain in good working order.			
18	7	4	Check heater elements for cleanliness. Replace as necessary.			
19	7	4	Check controls for proper operation. Adjust as necessary.			
20	7	4	Periodically tighten all electrical-mechanical connections to prevent arcing and burning due to metal flow or loosening of terminal bolts or lugs.			

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Water Tower - Vault		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81
	BUILDING ADDRESS 9000 4th Ave. S.		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.			
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)	3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)	c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input type="checkbox"/> Storage (LOCG-STRG) <input checked="" type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)
	b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)	d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)		

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date: <u>3-18-81</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur W. Jensen</i></u></p> <p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p> <p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not
(should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources)
(should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller
Firm Name (if none, enter none)

P.O. Box 130
Address

612 935-6901
Phone

3-18-81
Date

Asst. Maintenance Supervisor
Building Organizational Authority (Print or Type)

Arthur W. Jensen
Signature

3-18-81
Date

F	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini-Auditor	RCM
AUDIT TEAM	Scott Hutchins	CET	RCM
	Art Parvey		City of Bloomington

G	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, underground vault
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	none
BUILDING INFORMATION	STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)
	concrete
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
	earth

H	INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
	Is there open land adjacent to the building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.?	Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No <u>none</u>
	If the roof or wall are partly shaded, what percentage of the surface is unshaded?	% of roof unshaded _____ % % of south facing wall unshaded _____ %
	What is the overall shape of the building?	<input checked="" type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) _____
	Is the roof of the building flat or pitched?	<input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched
	If pitched, what is the compass orientation of the ridgeline?	_____
	If pitched, what is the angle that the roof makes with horizontal?	_____°
	Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	What is the exterior facing material for the south facing wall?	<u>none</u>
	What percentage of the south facing wall is glass?	_____ %
	Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>none</u>
	If the space heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
	Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>none</u>
	If the water heating equipment is inside the building, where is it located?	<input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units?	<input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

20% SAVINGS DATA	Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.			
	BASE PERIOD YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			
	20% SAVINGS YEAR			Fiscal Year _____
	ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
	Electricity			
	Fuel 1			
	Fuel 2			
	TOTAL			

SAVINGS ESTIMATION	J	Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.																											
	1	Check two boxes in each category — Range of Electrical Savings — <input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____ Range of Fuel Savings — <input type="checkbox"/> 0% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% <input type="checkbox"/> other (specify) _____																											
	2	Calculate ranges of energy and cost savings — <div style="text-align: center; font-weight: bold;">Range of Electrical Savings</div> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">% Range</th> <th style="text-align: center;">Annual Electrical Consumption</th> <th style="text-align: center;">Range of Energy Savings</th> <th style="text-align: center;">% Range</th> <th style="text-align: center;">Annual Electrical Dollars Spent</th> <th style="text-align: center;">Range of Electrical Dollars Savings</th> </tr> </thead> <tbody> <tr> <td>lower bound 0 %</td> <td>x 5184 kwh</td> <td>= 0 kwh,</td> <td>0 %</td> <td>x \$255.57</td> <td>= \$ 0</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td>upper bound 5 %</td> <td>x 5184 kwh</td> <td>= 259 kwh,</td> <td>5 %</td> <td>x \$255.57</td> <td>= \$ 12.78</td> </tr> </tbody> </table>				% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings	lower bound 0 %	x 5184 kwh	= 0 kwh,	0 %	x \$255.57	= \$ 0	to		to	to		to	upper bound 5 %	x 5184 kwh	= 259 kwh,	5 %	x \$255.57	= \$ 12.78
	% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings																							
	lower bound 0 %	x 5184 kwh	= 0 kwh,	0 %	x \$255.57	= \$ 0																							
	to		to	to		to																							
	upper bound 5 %	x 5184 kwh	= 259 kwh,	5 %	x \$255.57	= \$ 12.78																							
	3	Building does not use fuel <div style="text-align: center; font-weight: bold;">Range of Fuel Savings</div> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">% Range</th> <th style="text-align: center;">Annual Fuel Consumption</th> <th style="text-align: center;">Range of Fuel Savings</th> <th style="text-align: center;">% Range</th> <th style="text-align: center;">Annual Fuel Dollars Spent</th> <th style="text-align: center;">Range of Fuel Dollars Savings</th> </tr> </thead> <tbody> <tr> <td>lower bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> <tr> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> <td style="text-align: center;">to</td> <td></td> <td style="text-align: center;">to</td> </tr> <tr> <td>upper bound _____ %</td> <td>x _____ Btu</td> <td>= _____ Btu,</td> <td>_____ %</td> <td>x \$ _____</td> <td>= \$ _____</td> </tr> </tbody> </table>				% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings	lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____	to		to	to		to	upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
	% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings																							
	lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____																							
to		to	to		to																								
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____																								
The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.																													

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

Note Reproduce this page as necessary

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

[illegible]

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Water Reservior - Vault		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81		
	BUILDING ADDRESS 9951 - Rich Road		ADDRESS 2215 West Old Shakopee Road				
	CITY Bloomington		ZIP CODE 55431		CITY Bloomington		
	PERSON COMPLETING FORM Randy Smith		TELEPHONE 935-6901		CONTACT PERSON Arthur Jensen		
				ZIP CODE 55431		TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.					
	1. OWNERSHIP TYPE <input checked="" type="checkbox"/> Public (PUB) <input type="checkbox"/> Non-Profit Association (NAP)		3a. SCHOOLS <input type="checkbox"/> Elementary (SCHL-ELM) <input type="checkbox"/> Secondary (SCHL-SECD) <input type="checkbox"/> Coll. or Univ. (SCHL-POST) <input type="checkbox"/> Vocational (SCHL-VOCL) <input type="checkbox"/> Education Agency (SCHL-ADMN) <input type="checkbox"/> Administration (SCHL-ADMN) <input type="checkbox"/> OTHER (SCHL-OTHR)		c. LOCAL GOVERNMENT <input type="checkbox"/> Office (LOCG-OFFC) <input checked="" type="checkbox"/> Storage (LOCG-STRG) <input type="checkbox"/> Service (LOCG-SERV) <input type="checkbox"/> Library (LOCG-LBRY) <input type="checkbox"/> Police (LOCG-PLCE) <input type="checkbox"/> Fire (LOCG-FIRE) <input type="checkbox"/> OTHER (LOCG-OTHR)	
	2. ULTIMATE OWNER <input type="checkbox"/> County (CNTY) <input checked="" type="checkbox"/> City (CITY) <input type="checkbox"/> Township (TOWN) <input type="checkbox"/> State (STAT) <input type="checkbox"/> Public School (PUSC) <input type="checkbox"/> Private School (PRSC) <input type="checkbox"/> Non-Profit Association (NPAP) <input type="checkbox"/> Indian Tribe (INDN)		b. PUBLIC CARE <input type="checkbox"/> Nursing Home (PBCR-NURS) <input type="checkbox"/> Long Term Care (PBCR-TERM) <input type="checkbox"/> Rehab. Facility (PBCR-RHAB) <input type="checkbox"/> Public Health Ctr. (PBCR-HCTR) <input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)		d. HOSPITALS <input type="checkbox"/> General (HOSP-GENL) <input type="checkbox"/> Tuberculosis (HOSP-TUBR) <input type="checkbox"/> OTHER (HOSP-OTHR)	

MINI-AUDIT FUNDING REQUEST	C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.	
	If eligible for both Federal and State Funding: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Date: <u>3-18-81</u> Name: <u>Arthur Jensen</u> Signature: <u><i>Arthur W Jensen</i></u>	
	If eligible for Federal funding only: Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No The 50% match for Federal funds will come from: (Use additional sheets if necessary.)	
	Date: _____ Name: _____ Signature: _____	

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I.
(did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit.
(should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources)
(should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith
Mini-Auditor's Name (Print or Type)

Randy Smith 206
Signature

Rieke Carroll Muller
Firm Name (if none, enter none)

P.O. Box 130
Address

612 935-6901
Phone

3-18-81
Date

Asst. Maintenance Supervisor
Building Organizational Authority (Print or Type)

[Signature]
Signature

3-18-81
Date

NAME	POSITION	ORGANIZATION
Randy Smith	Certified Mini-Auditor	RCM
Scott Hutchins	CET	RCM
Art Parvey	City of Bloomington	

BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)	Good, underground vault
MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)	none
STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)	concrete
ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)	Concrete

INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.	
Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No South facing Wall: <input type="checkbox"/> Yes <input type="checkbox"/> No none	
If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded <u>0</u> % % of south facing wall unshaded <u> </u> % none	
What is the overall shape of the building? <input type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input type="checkbox"/> other (specify) <u> </u>	
Is the roof of the building flat or pitched? <input checked="" type="checkbox"/> flat <input type="checkbox"/> pitched	
If pitched, what is the compass orientation of the ridgeline? <u> </u>	
If pitched, what is the angle that the roof makes with horizontal? <u> </u> °	
Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
What is the exterior facing material for the south facing wall? <u>none</u>	
What percentage of the south facing wall is glass? <u> </u> %	
Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No none	
If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) <u> </u>	
Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No none	
If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) <u> </u>	
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination	

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS
DATA

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 5622 kwh	= 0 kwh	0 %	x \$257.23	= \$ 0
to		to	to		to
upper bound 5 %	x 5622 kwh	= 281 kwh	5 %	x \$257.23	= \$12.86

Building does not use fuel

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS
ESTIMATION

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

[illegible]

64

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. *This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.*

OPTIONAL: OPTIONAL:

[illegible]

Note 1: Date of Implementation should only be completed as the recommendation is implemented. The mini-audit report may be submitted to the Minnesota Energy Agency before the "Date of Implementation" has been completed.

Note 2: Reproduce this page as necessary.

MINI-AUDIT REPORT

FORM NO. MIN-01

CONTACT DATA	BUILDING NAME Walter Tower - Base		NAME OF ORGANIZATION City of Bloomington		DATE 3-18-81
	BUILDING ADDRESS 8400 Winslow Road		ADDRESS 2215 West Old Shakopee Road		
	CITY Bloomington	ZIP CODE 55431	CITY Bloomington	ZIP CODE 55431	
	PERSON COMPLETING FORM Randy Smith	TELEPHONE 935-6901	CONTACT PERSON Arthur Jensen	TELEPHONE 881-5811	

BUILDING ELIGIBILITY CODE	<p>B Instructions: For blocks 1 and 2 check the box which best fits the building ownership conditions. For block 3 determine which of the four categories describes the building type and then within the category check off the sub category befitting the building function.</p>					
	<p>1. OWNERSHIP TYPE</p> <p><input checked="" type="checkbox"/> Public (PUB)</p> <p><input type="checkbox"/> Non-Profit Association (NAP)</p>		<p>3a. SCHOOLS</p> <p><input type="checkbox"/> Elementary (SCHL-ELM)</p> <p><input type="checkbox"/> Secondary (SCHL-SECD)</p> <p><input type="checkbox"/> Coll. or Univ. (SCHL-POST)</p> <p><input type="checkbox"/> Vocational (SCHL-VOCL)</p> <p><input type="checkbox"/> Education Agency (SCHL-ADMN)</p> <p><input type="checkbox"/> Administration (SCHL-ADMN)</p> <p><input type="checkbox"/> OTHER (SCHL-OTHR)</p>		<p>c. LOCAL GOVERNMENT</p> <p><input type="checkbox"/> Office (LOCG-OFFC)</p> <p><input type="checkbox"/> Storage (LOCG-STRG)</p> <p><input checked="" type="checkbox"/> Service (LOCG-SERV)</p> <p><input type="checkbox"/> Library (LOCG-LBRY)</p> <p><input type="checkbox"/> Police (LOCG-PLCE)</p> <p><input type="checkbox"/> Fire (LOCG-FIRE)</p> <p><input type="checkbox"/> OTHER (LOCG-OTHR)</p>	
	<p>2. ULTIMATE OWNER</p> <p><input type="checkbox"/> County (CNTY)</p> <p><input checked="" type="checkbox"/> City (CITY)</p> <p><input type="checkbox"/> Township (TOWN)</p> <p><input type="checkbox"/> State (STAT)</p> <p><input type="checkbox"/> Public School (PUSC)</p> <p><input type="checkbox"/> Private School (PRSC)</p> <p><input type="checkbox"/> Non-Profit Association (NPAP)</p> <p><input type="checkbox"/> Indian Tribe (INDN)</p>		<p>b. PUBLIC CARE</p> <p><input type="checkbox"/> Nursing Home (PBCR-NURS)</p> <p><input type="checkbox"/> Long Term Care (PBCR-TERM)</p> <p><input type="checkbox"/> Rehab. Facility (PBCR-RHAB)</p> <p><input type="checkbox"/> Public Health Ctr. (PBCR-HCTR)</p> <p><input type="checkbox"/> Res. Child Care Ctr. (PBCR-RCCC)</p>		<p>d. HOSPITALS</p> <p><input type="checkbox"/> General (HOSP-GENL)</p> <p><input type="checkbox"/> Tuberculosis (HOSP-TUBR)</p> <p><input type="checkbox"/> OTHER (HOSP-OTHR)</p>	

MINI-AUDIT FUNDING REQUEST	<p>C Instructions: With reference to page 23 entitled Funding Information, determine if the facilities are eligible for both Federal and State funding or just Federal funding. then answer the questions correctly for the situation. This section must be signed and dated by the head of the organization.</p>	
	<p>If eligible for both Federal and State Funding:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
	<p>Date: <u>3-18-81</u></p> <p>Name: <u>Arthur Jensen</u></p> <p>Signature: <u><i>Arthur W Jensen</i></u></p>	
	<p>If eligible for Federal funding only:</p> <p>Have you received a mini-audit grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you previously applied for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you wish to apply for mini-audit funding? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>The 50% match for Federal funds will come from: (Use additional sheets if necessary.)</p>	
	<p>Date: _____</p> <p>Name: _____</p> <p>Signature: _____</p>	

D**ENERGY REPORT
CHECK-OFF**

Check the type of energy report which was completed and submitted prior to this mini-audit report.

- ☐ Elementary School Energy Report (Form No. ED-00444-02)
☐ Secondary School Energy Report (Form No. ED-00445-02)
☒ Existing Building Energy Report (Form No. EN-00041-01)

If an energy report has not been completed previous to this mini-audit report, one must be included with this report. Elementary, secondary, and vocational schools should use form ED-00444-02 or form ED-00445-02, depending on building complexity. All other buildings should use the existing building energy report, form EN-00041-01.

F

Instructions: This section is to be completed and signed by a registered professional engineer or by a certified mini-auditor who has successfully completed the State of Minnesota's Mini-Audit Procedures Course. This section should be completed after this mini-audit report and an energy report are completed. All blanks must be filled in.

I have reviewed the energy report and/or the energy report results for this building. I found all information contained therein to be correct OR I have corrected any misinformation on the energy report which will be resubmitted with this mini-audit report to the Minnesota Energy Agency.

I am not directly responsible for the day to day operations of this building being audited.

I have fully disclosed my financial interests relating to this mini-audit and any energy conservation measures considered by this audit.

I have walked through this building and have found the recommendations listed in section I of this mini-audit report to be the operations and maintenance changes, and low cost energy conservation measures, which would reduce energy consumption in this building.

I have made a rough estimate, in section G, of the range of savings which may result from the implementation of all of the mini-audit opportunities listed in section I. I am not responsible if the actual savings resulting from this mini-audit do not fall within the estimated range.

Based on actual records, the energy conservation operating and maintenance procedures listed in section K did not save at least 20% of the building's energy consumption as specified in section I. (did, did not)

Based upon my observation of the physical characteristics of this building and the building's major energy using systems, I recommend that this should not be the subject of a maxi-audit. (should, should not)

I realize that this is not a final judgement, that the State reserves the right to make the maxi-audit funding determination based on this mini-audit report and other criteria.

Based upon the information in section E and the information referred to in section F, I recommend that this building should not (should, should not)

undergo further solar conversion analysis, and/or should not undergo further analysis of the renewable resources — waste, wind, wood. (Circle proper resources) (should, should not)

In my judgement, as a mini-auditor, all of the above statements are true and correct.

Witnessed by:

Randy Smith

Mini-Auditor's Name (Print or Type)

Randy Smith

Signature

206

Rieke Carroll Muller

Firm Name (if none, enter none)

P.O. Box 130

Address

612 935-6901

Phone

3-18-81

Date

Asst. Maintenance Supervisor

Building Organizational Authority (Print or Type)

Arthur W. Jensen

Signature

3-18-81

Date

**MINI-AUDIT
STATEMENTS**

AUDIT TEAM	NAME	POSITION	ORGANIZATION
	Randy Smith	Certified Mini - Auditor	RCM
	Scott Hutchins	CET	RCM
	Art Parvey	City of Bloomington	

BUILDING INFORMATION	BRIEF DESCRIPTION OF GENERAL BUILDING CONDITION (i.e. type, and function)
	Good, water tower base
	MAJOR CHANGES PLANNED WITHIN NEXT 15 YEARS (i.e. demolition, rehabilitation, conversion from one building type to another)
	none
STRUCTURAL COMPONENTS OF ROOF (i.e. metal beams, wooden rafters, concrete)	metal
	ROOFING MATERIAL (i.e. tar and gravel, shingles, tile)
metal	

INSTRUCTIONS: Correctly answer the following questions for the building being mini-audited.
Is there open land adjacent to the building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Solar collectors need to be located in an unshaded area. Is the roof of the building and the south facing wall unshaded between the hours of 9 a.m. and 3 p.m.? Roof: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No South facing Wall: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the roof or wall are partly shaded, what percentage of the surface is unshaded? % of roof unshaded _____ % % of south facing wall unshaded _____ %
What is the overall shape of the building? <input type="checkbox"/> square <input type="checkbox"/> rectangle <input type="checkbox"/> H-shaped <input type="checkbox"/> E-shaped <input checked="" type="checkbox"/> other (specify) <u>round</u>
Is the roof of the building flat or pitched? <input type="checkbox"/> flat <input type="checkbox"/> pitched <input checked="" type="checkbox"/> curved
If pitched, what is the compass orientation of the ridgeline? _____
If pitched, what is the angle that the roof makes with horizontal? _____°
Are there large obstructions on the roof such as chimneys, rooms for mechanical equipment, ventilating units, water towers, etc? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
What is the exterior facing material for the south facing wall? <u>metal</u>
What percentage of the south facing wall is glass? <u>0</u> %
Is the building's space heating equipment located within or on the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>none</u>
If the space heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other (specify) _____
Is the building's water heating equipment located within the building? (A no answer indicates the equipment is in a separate building.) <input type="checkbox"/> Yes <input type="checkbox"/> No <u>none</u>
If the water heating equipment is inside the building, where is it located? <input type="checkbox"/> Ground Floor <input type="checkbox"/> Basement <input type="checkbox"/> Other (specify) _____
Is the water heating system a central system, does it consist of multiple units, or is it a combination of the central and multiple units? <input type="checkbox"/> Central <input type="checkbox"/> Multiple <input type="checkbox"/> Combination

Instructions: Enter the total energy used of each fuel type for the base period and the year when there was a 20% or greater energy savings. Indicate the unit of measure. Enter the appropriate conversion factor from Appendix B to convert energy usage into Btu's. Be sure to enter the fiscal years of which the data applies. Refer to pages 7 and 15 for a complete explanation of this section.

BASE PERIOD YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS YEAR

Fiscal Year _____

ENERGY TYPE	ENERGY USAGE	CONVERSION FACTOR	BTU USAGE
Electricity			
Fuel 1			
Fuel 2			
TOTAL			

20% SAVINGS
DATA

Instructions: This section is to be completed by the mini-auditor after the walk-thru portion of the mini-audit. First, check the appropriate boxes which state the roughly estimated range of the percent of total electrical and fuel consumption which would be saved resulting from the implementation of all of the new mini-audit opportunities listed in section L. Secondly, calculate the range of energy and cost savings by multiplying the estimated percentages by the annual electrical and fuel consumption data on the energy report.

Check two boxes in each category —

Range of Electrical Savings — ☒ 0% ☒ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Range of Fuel Savings — ☐ 0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐ other (specify) _____

Calculate ranges of energy and cost savings —

Range of Electrical Savings

% Range	Annual Electrical Consumption	Range of Energy Savings	% Range	Annual Electrical Dollars Spent	Range of Electrical Dollars Savings
lower bound 0 %	x 12793 kwh	= 0 kwh,	0 %	x \$ 571.98	= \$ 0
to		to	to		to
upper bound 5 %	x 12793 kwh	= 639 kwh,	5 %	x \$ 571.98	= \$ 28.60

Range of Fuel Savings

% Range	Annual Fuel Consumption	Range of Fuel Savings	% Range	Annual Fuel Dollars Spent	Range of Fuel Dollars Savings
lower bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____
to		to	to		to
upper bound _____ %	x _____ Btu	= _____ Btu,	_____ %	x \$ _____	= \$ _____

The mini-auditor is not responsible if actual savings resulting from the implementation of the energy conservation opportunities listed in section I do not fall between the roughly estimated ranges which are specified.

SAVINGS
ESTIMATION

Instructions: Read through the list of energy conservation opportunities provided. As you read through the items, list below those items which have already been undertaken in your facility. The description of the past energy conservation action should contain the specific building location where the recommendation applies, if applicable. Indicate the date of implementation of each item and its classification number. Energy conserving items which have been undertaken and are not on the list provided should also be included along with their appropriate classification numbers. The classification number should be taken from the classification scheme for energy conservation opportunities listed on pages 25 through 37. *This section of the mini-audit report should be completed by building personnel prior to the walk-through by the mini-auditor.*

OPTIONAL: OPTIONAL:

[illegible]

ote Reproduce this page as necessary

NEW OPPORTUNITIES

Instructions: Read through the energy conservation recommendation list provided. Then walk through the building with the list. Examine the suggested maintenance and operational changes, and any other low cost energy conservation measures, that pertain to the facility. As you go along, record the item number, the classification number of the recommendation, and the new mini-audit opportunity. The description of the mini-audit opportunity should contain the specific building location where the recommendation applies, if applicable. Any recommendation not found on the list may also be included. For those other recommendations, assign an appropriate classification number from the classification scheme for energy conservation opportunities listed on pages 25 through 37. The date of implementation should only be completed as the recommendation is implemented. This section of the mini-audit report should be completed by the mini-audit team during the building walk-through.

OPTIONAL: OPTIONAL:

ITEM NO.	CLASSIFICATION NO.		NEW MINI-AUDIT OPPORTUNITIES	ENERGY SAVINGS	ENERGY COST SAVINGS	DATE OF IMPLEMENTATION
	MAJOR CLASS	SUB CLASS				
1	1	1	Keep all controls free of dust.			
2	1	5	Tighten and clean all electrical connections from the circuit breaker back through the transformers, to the main switch gear. NOTE: Have this done at least once a year by a qualified electrician when the building power is shut off. This is not only a precaution but it can also reduce electrical losses.			
3	1	5	Keep all switch gear free of dust.			
4	3	1	Check the calibration of all controllers and devices for proper settings and operations.			
5	5	1	Keep records of the operation schedule, monthly energy consumption and purchase of any new equipment that affects energy consumption or efficiency of the building. These records will indicate the impact of energy conservation measures.			
6	5	1	Review the record books on a regular basis.			

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