

Building Info/Unit Sq. Ft. Tabulations					
Project Name:		Project Number (MH):			
Project Location:		Design Professional			
Date:	2024-03-26	Owner:			
For Each Building containing Living Units (Units), provide the following:					
Building Name/#		City		County	
Building Address 1		State		Town Name	
Building Address 2		Zip			
Building #:	0	Building Gross SF (Include basements)			
Number of Units		Building Net SF (exclude basements)			
Basement Area Sq Ft		Cooking			
Occupancy Type		Heating			
Construction Type		Hot Water			
Framing Materials		All Electric?			
Building Design		Ventilation			
Accessibility	HUD 504	<input type="checkbox"/>	Fed FH	<input type="checkbox"/>	
	MHRA PH	<input type="checkbox"/>	ADA	<input type="checkbox"/>	
	MHRA FH	<input type="checkbox"/>			
If HUD 504 applicable, indicate selected standard:					
	ADAAG	<input type="checkbox"/>	UFAS	<input type="checkbox"/>	
Amenities	Community Rm	<input type="checkbox"/>	Playground	<input type="checkbox"/>	
	Comm Laundry	<input type="checkbox"/>	Telemed Rm	<input type="checkbox"/>	
	In Unit Laundry	<input type="checkbox"/>			
Solar Array		Vehicle Charging		Building Certification	
Parking			Project Delivery Method		
Comments					

This is a PDF sample only.

Architect / Designer's office must contact the Construction Analyst assigned to your project to request a unique Excel file that has been "mapped" via ProLink to your project in our database.

This step is required for 50% Design Review submittal.

