SUBMISSION TEMPLATE : SHORT REPORT

*Completing this template replaces the Short Report

IEQ – 1 QUALITY OF INTERNAL AIR

Project Name: _____

Project Number: GS- _____

Points available: **4**   **Points claimed:** _____

Criteria	Points available	Points claimed
Entry of Outdoor Pollutants	0.5	_____
Provision of Outside Air	2	_____
Use of CO_2 Control	1	_____
Exhaust Pollutants	0.5	_____

<See next page for Table>

Area No.	Area Description	Area Size (m²)	Ventilation Mode
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Entry of Outdoor Pollutants

I confirm that a contract exists that requires regular replacement of air filters and maintenance of fresh air ducting.

Points available: 0.5

☐ I CONFIRM

<See next page for Provision of Outside Air>

Provision of Outside Air

Please select one of the following options below in order to satisfy this credit:-

1. Naturally ventilated
2. Mechanically ventilated
3. Mixed mode ventilation
4. Underfloor displacement

Note: if the provision of outside air is 'mixed mode', please complete natural and mechanical ventilation sections below

Points available: 2

Naturally Ventilated Spaces

If **naturally ventilated**, *complete the following information below:-*

I confirm that 95% of the nominated area is naturally ventilated in accordance with SANS 10400-O: 2011.

Short report documentation:

I confirm that the system provides an alarm if CO_2 levels rise above 600ppm.

AND

I confirm that there is provision of CO_2 monitors in the nominated space and that monitoring is provided for each room or 100m^2.

AND

I confirm that the system provides an alarm if CO_2 levels rise above 600ppm

I confirm that I have attached supporting documents that support these claims

☐ I CONFIRM

Supporting Attachments:
As Built drawings: Architectural floor plans and elevations showing the locations of ventilation openings.

Summary Table (see next page)
Complete the summary tables below which identifies:-

- each occupied space,
- floor area and
- the area of external openings in that occupied space expressed as a percentage of the occupied space floor area, demonstrating compliance with the 5% minimum requirement in SANS 10400-O:2011

Area No.	Area Description	Area Size (m²)	Percentage of external openings to occupied space floor area	If naturally ventilated, does it Comply with SANS 10400-O:2011 (Y/N)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
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36				
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38				
39				
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43				
44				
45				
46				

Mechanically Ventilated Spaces

If **mechanically ventilated**, *complete the following information below:-*

I confirm that 95% of the nominated area is outside air is provided at rates greater than the l/s per person requirements of SANS 10400-0:2011.

AND

The rates exceed the SANS 10400-O: 2011 benchmarks by _____%

I confirm that that the ventilation system(s) have been commissioned and operate as intended by the design.

AND

I confirm that that the system facilitates the continuous monitoring and adjustment of outside air rates

AND

I confirm that there is provision of CO_2 sensors to each zone or 100m^2, to no less than 95% of the nominated area.

I confirm that I have attached supporting documents that support these claims

☐ I CONFIRM

Supporting Attachments:
   a. **As Built Drawings:** Mechanical services drawings, indicating the space served and nominating the outside-air supply rates.
   b. Extract(s) from Commissioning Reports
   c. Test certificate **OR** Manufacture datasheets

Summary Table (see next page)
Complete the summary tables below which identifies:-

• Each occupied space
• List of the AHU(s) or fan(s) that serve each space
• Minimum outside air rate supplied

Mechanically Ventilated Spaces

For **mechanically ventilate spaces**, complete the following table below which identifies each occupied space, list of the AHU(s) or fan(s) that serve each space and the minimum outside air rate supplied:

Summary Table

Area No.	Room Description	Total area of occupied space (m²)	% of total occupied space	Design populations (persons)	Actual flowrate (l/s)	Actual flowrate per person (l/s/p)	SANS 10-400 requirement	% improvement	33% compliant	66% compliant
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										

Underfloor Displacement

*If **underfloor displacement** ventilation, complete the following information below:-*

I confirm that 95% of the nominated area is outside air is provided at rates greater than the l/s per person requirements of SANS 10400-0:2011.

AND

The rates exceed the SANS 10400-O: 2011 benchmarks by _____%

☐ I CONFIRM

<See next page for CO_2 and Exhaust of Pollutants>

CO$_2$ Control

I confirm that there is a process in place to monitor outside air rates

AND

I confirm that the outside air rates are controlled such that CO$_2$ levels are kept at _____ppm.

Points available: 1   ☐ I CONFIRM

Exhaust of Pollutants

Is there photocopy or print equipment used in the space? _____ [insert YES/NO]

I confirm that a dedicated room is provided to house photocopy and print equipment and that this room is provided with a dedicated exhaust riser.

OR

I confirm that all printing or photocopy equipment located throughout the project is certified in accordance with one of the following test methodologies:-

☐	**ECMA-328**
☐	**RAL – UZ 122**
☐	**GGPS.003**

I confirm that I have attached supporting documents that support these claims

Points available: 0.5   ☐ I CONFIRM

Supporting Attachments:
1. Attach a **document** showing the location of exhaust risers and the exhaust system provided to each printing/copy room

<See next page for discussion and Author sign off>

Discussion: Insert any issues you would like to highlight and clarify to the Assessment Panel.
_____

Author Details:

_____   _____
[Name]   [Position]

_____   _____
[Contact Details]   [Date]