

# Thermal Comfort Survey

Please select one answer for each question.

WHITE SECTIONS TO BE FILLED IN BY OCCUPANTS			GREY AREAS TO BE FILLED IN BY SURVEYOR
<b>1a: Client name</b>		<b>1b: House location</b>	
<b>2. Date:</b>		<b>3. Time</b>	
<b>4. Equipment</b> (Equipment relating to the electrical load) – circle as required			
<b>Item</b> (computers, copies, lighting, fans etc.)	<b>Is the item within the thermal envelope?</b>	<b>Quantity</b>	<b>Input to PHPP?</b>
Dishwasher	Yes / No	Yes / No	
Washing machine	Yes / No	Yes / No	
Tumble dryer	Yes / No	Yes / No	
Freezer	Yes / No	Yes / No	
Fridge	Yes / No	Yes / No	
<b>5. Over the year how does the temperature of the house feel?</b> (Check the one that is most appropriate)			<b>Comments:</b>
1. <input type="checkbox"/> Too Hot 2. <input type="checkbox"/> Slightly Too Warm 3. <input type="checkbox"/> Adequately Warm 4. <input type="checkbox"/> Neutral 5. <input type="checkbox"/> Adequately Cool 6. <input type="checkbox"/> Slightly too Cold 7. <input type="checkbox"/> Too Cold			
<b>6a. If your house is too warm, does it feel.....</b> 1) slightly warm 2) uncomfortably warm 3) hot  <b>6b. If you house is too warm, what might be the cause?</b> 1) direct sunlight 2) you are seated next to a heat source 3) the air conditioning is not cool enough 4) the heating system is turned on too high  <b>6c. If you house is too cool, does it feel.....</b> 1) slightly cool 2) uncomfortably cool 3) cold  <b>6d. If you house is too cool, what might be the cause?</b> 1) air drafts at your feet 2) air drafts at your head 3) you are too far from a heat source 4) the MHVR is too cool			
<b>7a. Generally during the year on the top half of your body, how many layers of clothing do you normally wear in the house?</b> 1) 1 2) 2 3) 3 4) 4 or more  <b>7a. Generally during the year on the lower half of your body, how many layers of clothing do you normally wear in the house</b> 1) 1 2) 2 3) 3 4) 4 or more			
<b>7c. Generally during the year do you normally wear in the house</b> 1) nothing 2) socks 3) sandals 4) closed toed shoes 5) boots			

	<p><b>8. What room (s) do you spend most of the time in the house during daytime?</b></p> <p>Kitchen  Living  Dining  Bedroom  Study  Bathroom  Other _____</p>	
	<p><b>9. Are there any rooms that you specifically don't want to be in for reasons of thermal/ventilation comfort and what is the reason for this?</b></p> <hr/>	
	<p>10. Overall, over the year, how satisfied are you with the temperature of your house?</p> <p>1. <input type="checkbox"/> Very Satisfied</p> <p>2. <input type="checkbox"/> Satisfied</p> <p>3. <input type="checkbox"/> Slightly Satisfied</p> <p>4. <input type="checkbox"/> Neutral</p> <p>5. <input type="checkbox"/> Slightly dissatisfied</p> <p>6. <input type="checkbox"/> Dissatisfied</p> <p>7. <input type="checkbox"/> Very Dissatisfied</p>	
	<p><b>11. General Environment Concerns: (If 5, 6 or 7 are checked in Question 10, indicate the specific nature and cause of your dissatisfaction, etc. )</b></p>	
	<p><b>12. Any other comments?</b></p>	

Revision

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