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RISK EVALUATION AND PLANNING PROGRAM
Site Questionnaire

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A. Participant Information

A1.   Institution: _____

A2.   Project Contact:

Name: _____   Title: _____

Phone: _____   Fax: _____

E-mail: _____

A3.   Mailing address:_____

A4.   City: _____   A5. State: _____   A6. Zip: _____

A7.   Physical address (if different from mailing):_____

A8.   City:_____   A9. State: _____   A10. Zip: _____

A11.   Web address: _____

B. Staff Responsibilities

B1.   Who has responsibility for each of the following activities? *(e.g., title of staff member, outside service, etc. Answer "don't know" if unsure.)*

		No one
• Emergency planning and implementation	_____	☐
• Preparing collections for research and storage	_____	☐
• Cleaning and repairing collection material	_____	☐
• Inspecting storage and exhibition areas	_____	☐
• Building maintenance	_____	☐

B2.   Is a formal orientation or training provided for staff (paid and unpaid) in the following areas?

	Yes	No	Don't Know
• Emergency plan and procedures	☐	☐	☐
Title of person providing training:_____			
• Collection preservation activities	☐	☐	☐
Title of person providing training:_____			
• Building maintenance and repair	☐	☐	☐
Title of person providing training:_____			
• General housekeeping and cleaning	☐	☐	☐
Title of person providing training:_____			

B3.   If a board governs the organization, how many members are on the board?

_____   ☐ N/A

B3a.   What is the term of service? _____   ☐ N/A

C. Collections and Collections Policies

C1.   On a scale of 1-10 (1=low, 10=high), rate emergency planning as a priority of the institution: _____

Funding

C2.   How much funding is annually expended on the preservation of collections? (*Collections Staff salaries, costs for supplies, emergency preparedness, equipment, surveys, treatment, preservation reformatting, commercial binding, consultants/contractors, etc.*) $ _____

   C2a.   Are these funds a regular line-item of the institutional budget?
   ☐ Yes   ☐ No   ☐ Don't know

Documentation

C3.   Approximately what percentage of the institution's permanent collection is inventoried?
(Inventory: Itemized listing of objects and their locations for which the museum has responsibility.)
_____ %   ☐ Don't know

C4.   What was the date of the last inventory?   _____   ☐ Don't know

C5.   How often are inventories conducted?   _____   ☐ Don't know

C6.   What percentage of the institution's permanent collection is cataloged?
[Catalog: Collection divided into separate meaningful categories with entries that contain descriptive detail (including physical description, provenance, history, accession information, etc.) for each object.]
_____ %   ☐ Don't know

C7.   What percentage of the institution's permanent collection has been photographed?
_____ %   ☐ Don't know

Policies

C8.   Does the institution have a written collections management policy?
☐ Yes   ☐ In development   ☐ No   ☐ Don't know

   If yes:
   C8a.   When was the policy last reviewed and/or revised? _____

C8b. Who has responsibility for the following activities? *(title of staff member)*

- Development _____ ☐ No one
- Implementation _____ ☐ No one
- Modification _____ ☐ No one

C8c. Who does the collection policy specify is ultimately responsible for the well-being of the collection? *(give name and title)*

_____ ☐ No one

C9. Does the institution have a long-range conservation/preservation plan?

☐ Yes ☐ In development ☐ No ☐ Don't know

If yes:

C9a. When was the policy last reviewed and/or revised? _____

C9b. Who has responsibility for the following activities? *(title of staff member)*

- Development _____ ☐ No one
- Approval _____ ☐ No one
- Implementation _____ ☐ No one

C10. Does the institution have written or unwritten policies/guidelines on any of the following collections care issues?

	Written Policy	Unwritten Policy	No Policy
Care and Handling of Objects	☐	☐	☐
Documentation/record keeping	☐	☐	☐
Environmental Standards	☐	☐	☐
Exhibition	☐	☐	☐
Food and Drink	☐	☐	☐
Housekeeping	☐	☐	☐
Loans (incoming and outgoing)	☐	☐	☐
Maintenance	☐	☐	☐
Pest Management	☐	☐	☐
Preservation/conservation	☐	☐	☐
Reproduction (images or licensing)	☐	☐	☐
Restriction of Fragile/Sensitive Items	☐	☐	☐
Security/Theft	☐	☐	☐

	Written Policy	Unwritten Policy	No Policy
Smoking	☐	☐	☐
Other (specify)			
_____	☐	☐	☐
_____	☐	☐	☐
_____	☐	☐	☐

C11. When changes are made to the existing (written or unwritten) policies or procedures, are they documented?

☐ Yes   ☐ No   ☐ Don't know

C12. Are policies and procedures distributed or communicated to all staff?

☐ Yes   ☐ No   ☐ Don't know

C13. Who provides the institution with regular housekeeping in exhibition, storage, and other collection areas? *(title of staff member)*

_____   ☐ Don't know   ☐ No one

C13a. How often? _____

☐ Don't know   ☐ N/A

C14. Does the institution routinely monitor for the following:

☐ Collections condition   ☐ Security   ☐ Don't know
☐ Other: _____

C15. **Institutions with Living Animal Collections**
C15a. Does the institution have an emergency policy for an injury by an animal?

☐ Yes   ☐ In development   ☐ No   ☐ Don't know

C15b. Does the institution have an emergency procedure for injury by a venomous animal?

☐ Yes   ☐ In development   ☐ No   ☐ Don't know

C15c. Does the institution have a written procedure in the event of animal escape?

☐ Yes   ☐ In development   ☐ No   ☐ Don't know

C15d. What types of and how many dangerous and venomous animals does the institution own?   ☐ N/A
       Animal/#: _____   Animal/#: _____
       Animal/#: _____   Animal/#: _____
       Animal/#: _____   Animal/#: _____

<u>Loans</u>
C16.   Does the institution borrow objects from other collections?

☐ Yes   ☐ No   ☐ Don't know

C16a. If yes, does the institution sign contracts that specify terms for borrowing from other institutions?

☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

C17.   Are condition reports performed when borrowed objects are received and prior to return to their owner(s)?

☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

<u>Exhibitions</u>
C18.   When designing or installing new exhibits:

- Are exit routes taken into consideration?

   ☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

- Is ease of object retrieval/removal in the event of an emergency taken into consideration? (includes object mount and case engineering)

   ☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

<u>Storage</u>
C19.   Does the institution have short-term temporary storage or preparation areas:

- on-site?   ☐ Yes   ☐ No   ☐ Don't know
- off-site?   ☐ Yes   ☐ No   ☐ Don't know

C20.   Collection storage is organized by:

☐ Culture   ☐ Size   ☐ Material
☐ Taxonomic order   ☐ Object type   ☐ Random
☐ Other: _____
☐ Don't know

C21.   Are all collections storage areas accessible for examination by the assessor?

☐ Yes   ☐ No   ☐ Don't know

C21a. If no, please explain. _____

_____

_____

C22. Who has access to storage areas? _____

_____

_____

☐ Don't know

C23. Are access registers maintained?
☐ Yes   ☐ No   ☐ Don't know

C24. Are individuals who are not staff members (e.g., visiting scholars, curators from other museums) permitted to work in storage areas unaccompanied?
☐ Yes   ☐ No   ☐ Don't know

C25. Who has responsibility for the following activities? *(title of staff member)*

No One

- Specifying furniture, enclosures, materials and techniques for storage
  _____   ☐

- Organizing collections storage   _____   ☐
- Moving objects in and out of storage   _____   ☐
- Checking for evidence of damage   _____   ☐
- Monitoring security/access   _____   ☐
- Conducting inventories   _____   ☐

C26. If collections storage areas are used for collections-related activities other than collections storage, please describe: _____

_____

_____

_____

☐ Don't know   ☐ N/A

C27. If collections storage areas are used for the storage of items other than collection objects, please describe: _____

_____

_____

_____

☐ Don't know   ☐ N/A

D. Emergency Planning

D1.   If an emergency plan has been created or significantly updated since the program application was submitted, please attach a copy of the most recent version.

☐ The new version has been attached.   ☐ N/A

D2.   If the institution has experienced an emergency affecting collections or museum operations since the program application was submitted, please describe the incident(s). _____

_____

_____

_____

D3.   Indicate whether the institution has emergency preparedness drills for the following: *(check all that apply)*

☐ Collection response/salvage   ☐ Earthquake   ☐ Fire
☐ Hurricane   ☐ Tornado   ☐ Flood
☐ Utility failure   ☐ HVAC failure   ☐ Power outage
☐ Hazardous material spill
☐ Other: _____
☐ Don't know

D3a.   If drills are conducted, please provide the type and date of the most recent drill: _____

_____

D4.   Does the institution keep building and site drawings indicating the location of utility (water, electric, fuels, etc.) control valves?

☐ Yes   ☐ In development   ☐ No   ☐ Don't know

D5.   Does the institution have written or unwritten policies/guidelines on any of the following emergency situations?

	Written Policy	Unwritten Policy	No Policy
Open flame/heat generating	☐	☐	☐
Vandalism prevention	☐	☐	☐
Vandalism response	☐	☐	☐
Bomb threat	☐	☐	☐

Hostage response	☐	☐	☐
Shelter-in-place	☐	☐	☐
General security	☐	☐	☐
Power failure	☐	☐	☐
Emergency closing	☐	☐	☐
Other (specify)			
_____	☐	☐	☐
_____	☐	☐	☐
_____	☐	☐	☐

E. Site

E1.   Does the institution have any construction projects planned for the next 12 months?

☐ Yes   If yes, describe: _____

☐ No   _____

☐ Don't know   _____

E2.   **Institutions with Living Animal or Plant Collections**

E2a. Indicate the percentage of the land used for:
- Managed collections   _____ % ☐ Don't know
- Natural areas   _____ % ☐ Don't know
- Other collection-related areas not open to the public
                                       _____ % ☐ Don't know

Please explain: _____

- Visitor services (including buildings & parking lots) _____ % ☐ Don't know
- Other: _____   _____ % ☐ Don't know

E2b. What is the total percentage of the land that is not open to the public?
        _____ %   ☐ Don't know

E2c. Number of buildings on site: _____ ☐ Don't know ☐ N/A

E2d. Number of buildings on site for:
- Curatorial/collections storage   _____ ☐ Don't know ☐ N/A
- Animal housing   _____ ☐ Don't know ☐ N/A
- Herbarium specimen storage   _____ ☐ Don't know ☐ N/A
- Exhibition (including display conservatories) _____ ☐ Don't know ☐ N/A
- Laboratories   _____ ☐ Don't know ☐ N/A
- Propagation facilities   _____ ☐ Don't know ☐ N/A
- Maintenance   _____ ☐ Don't know ☐ N/A
- Visitor services   _____ ☐ Don't know ☐ N/A
- Library   _____ ☐ Don't know ☐ N/A
- Greenhouses   _____ ☐ Don't know ☐ N/A
- Lath or shade structures   _____ ☐ Don't know ☐ N/A
- Other: _____   _____ ☐ Don't know ☐ N/A

E3.   Indicate items that have required maintenance or repair by either in-house employees or contractors during the last five years:

Site	Maintenance	Repair	Don't Know	N/A
Lawns	☐	☐	☐	☐
Gardens	☐	☐	☐	☐

Snow Removal	☐	☐	☐	☐
Walks	☐	☐	☐	☐
Drives	☐	☐	☐	☐
Parking Lots	☐	☐	☐	☐
Outdoor Lighting	☐	☐	☐	☐
Steps	☐	☐	☐	☐
Yard Drains	☐	☐	☐	☐
Trash or Debris Removal	☐	☐	☐	☐
Other:				
_____	☐	☐	☐	☐
_____	☐	☐	☐	☐
_____	☐	☐	☐	☐

E4.   How much funding is annually expended on the maintenance of the site?
$ _____

   E4a.   Are these funds a regular line-item of the institutional budget?
   ☐ Yes   ☐ No   ☐ Don't know

F. Structures

(Complete Section F for each building in which collections are stored or exhibited.)

Note: If the building consists of additions that function independently or in a significantly different manner from the primary structure, or if the construction, use, or climate control systems are different, complete this section for each addition.

Building name: _____

F1.   Construction type *(check all that apply)*

Exterior walls:	☐ Wood ☐ Brick ☐ Stone ☐ Metal ☐ Other: _____ ☐ Don't know ☐ N/A	Roof rafters:	☐ Wood ☐ Steel ☐ Flat roof ☐ Sloping roof ☐ Other: _____ ☐ Don't know ☐ N/A
Basement walls:	☐ Wood ☐ Brick ☐ Stone ☐ Plaster ☐ Other: _____ ☐ Don't know ☐ N/A	Window sash:	☐ Wood ☐ Metal ☐ Casement ☐ Double hung ☐ Other: _____ ☐ Don't know ☐ N/A
Finished walls:	☐ Wood ☐ Glass ☐ Plaster ☐ Dry wall ☐ Other: _____ ☐ Don't know ☐ N/A	Roof covering:	☐ Wood ☐ Slate ☐ Tile ☐ Metal ☐ Tar ☐ Other: _____ ☐ Don't know ☐ N/A
Basement floor:	☐ Earth ☐ Brick ☐ Wood ☐ Concrete ☐ Other: _____ ☐ Don't Know ☐ N/A	Attic floor:	☐ Steel ☐ Wood ☐ Concrete ☐ Other: _____ ☐ Don't Know ☐ N/A
Main floor:	☐ Steel ☐ Wood ☐ Concrete ☐ Other: _____ ☐ Don't know ☐ N/A	Other floor:	☐ Steel ☐ Wood ☐ Concrete ☐ Other: _____ ☐ Don't Know ☐ N/A

NOTES:

_____

_____

_____

_____

F2.   Indicate items that have required maintenance or repair by either in-house employees or contractors during the last five years:

Exterior Building	Maintenance	Repair	Don't know	N/A
Windows	☐	☐	☐	☐
Doors	☐	☐	☐	☐
Gutter, downspouts	☐	☐	☐	☐
Water hydrants	☐	☐	☐	☐
Exterior painting	☐	☐	☐	☐
Roofs	☐	☐	☐	☐
Chimneys	☐	☐	☐	☐
Skylights	☐	☐	☐	☐
Walls	☐	☐	☐	☐
Masonry cracks	☐	☐	☐	☐
Other (specify)				
_____	☐	☐	☐	☐
_____	☐	☐	☐	☐
_____	☐	☐	☐	☐

Interior Building	Maintenance	Repair	Don't know	N/A
Water damage	☐	☐	☐	☐
Termites	☐	☐	☐	☐
Floors	☐	☐	☐	☐
Windows	☐	☐	☐	☐
Stairs	☐	☐	☐	☐
Plaster cracks	☐	☐	☐	☐
Painting	☐	☐	☐	☐
Fireplaces & flues	☐	☐	☐	☐
Roof leaks	☐	☐	☐	☐
Electrical system	☐	☐	☐	☐
Lighting fixtures	☐	☐	☐	☐
Plumbing system	☐	☐	☐	☐
Heating system	☐	☐	☐	☐
Fire detection system	☐	☐	☐	☐
Fire suppression system	☐	☐	☐	☐
Security system	☐	☐	☐	☐
Air conditioning	☐	☐	☐	☐
Other (specify)				
_____	☐	☐	☐	☐
_____	☐	☐	☐	☐
_____	☐	☐	☐	☐

F3.   Was insulation installed during the past five years?
         ☐ Yes   ☐ No   ☐ Don't know

F4.   Are any of the following options recurring problems in the building? *(check all that apply)*

☐ Basement flooding   ☐ Wall condensation   ☐ Electrical
☐ Wet basement   ☐ Window/ plumbing leaks   ☐ Mildew
☐ Stained walls   ☐ Blown fuses   ☐ Pests
☐ Window condensation   ☐ Roof leaks   ☐ Structural-exterior
☐ Stained ceilings   ☐ Structural-interior
☐ Cold water pipe condensation
☐ Other: _____
☐ Don't know   ☐ N/A

F5.   Where are special events permitted in the building?

_____

_____

☐ Don't know   ☐ N/A

G5a. Are post-event inspections conducted by an institutional staff member?
☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

F6.   How many school group tours does the institution host a year? _____

_____

_____

F7.   Please indicate the structure's special facilities:

☐ Aquaria and ponds   ☐ Ceremonial room   ☐ Insect zoo
☐ Preparation laboratories ☐ Live animal facilities ☐ Kitchen
☐ Dermestid chamber   ☐ Fumigation chamber   ☐ Restaurant
☐ Photographic laboratories ☐ Conservation laboratories
☐ Receiving/packing area for collections   ☐ Wood shop
☐ Public food service   ☐ Vending machine(s)   ☐ Paint shop
☐ Other: _____
☐ Don't know   ☐ N/A

Climate Control and Environment

F8.   In what areas of the building are environmental conditions monitored?
☐ All areas with collections (exhibits, storage, etc.)
☐ Some areas with collections, but not all
☐ No areas
☐ Don't know

F9.   Who is responsible for monitoring environmental conditions? *(give title of staff member)*

_____   ☐ No one

F10. What types of environmental monitoring equipment are used? *(check all that apply)*

☐ Sling psychrometer   ☐ Thermometer   ☐ Hygrometer
☐ Recording hygrothermograph   ☐ Thermo-hygrometer   ☐ Datalogger
☐ Battery-operated psychrometer
☐ Other:_____
☐ None   ☐ Don't know

F11. Is monitoring equipment calibrated on a regular basis?

	Yes	No	Don't Know	N/A
Sling psychrometer	☐	☐	☐	☐
Recording hygrothermograph	☐	☐	☐	☐
Battery-operated psychrometer	☐	☐	☐	☐
Thermometer	☐	☐	☐	☐
Hygrometer	☐	☐	☐	☐
Thermo-hygrometer	☐	☐	☐	☐
Datalogger	☐	☐	☐	☐
Other	☐	☐	☐	☐

F12. Does the institution have a back-up power supply?

☐ Yes   ☐ No   ☐ Don't know
G12a. If yes, how long does it last? _____

_____

_____

F13. Does the structure have a central heating, ventilating, and air conditioning (HVAC) system?

☐ Yes   ☐ No   ☐ Don't know

F13a. **For structures with a central HVAC system**
(If no, please skip to "F13b: For structures without a central HVAC system.")

Specify all spaces included in the central HVAC system: _____

_____

☐ Don't know

Which areas are not included? _____

_____

☐ Don't know   ☐ N/A

Are there separate temperature zones within the centralized system?
          ☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

          If yes, can temperature in those zones be adjusted by individual users?
          ☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

Are there separate humidity zones within the centralized system?
          ☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

          If yes, can relative humidity in those zones be adjusted by individual users?
          ☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

Do you think the system is working properly?
          ☐ Yes   ☐ No   ☐ Don't know   ☐ N/A

How often is the system tested? _____   ☐ Don't know   ☐ N/A

Does the system have low and high temperature alarms?
          ☐ Yes   ☐ No   ☐ Don't know

          If yes, who is alerted to the alarms during open hours? *(give staff title)*
          _____   ☐ Don't know   ☐ No one

          If yes, who is alerted to the alarms after hours? *(give staff title)*
          _____   ☐ Don't know   ☐ No one

Does the system have low and high relative humidity alarms?

☐ Yes ☐ No ☐ Don't know

If yes, who is alerted to the alarms during open hours? *(give staff title)*

_____ ☐ Don't know ☐ No one

If yes, who is alerted to the alarms after hours? *(give staff title)*

_____ ☐ Don't know ☐ No one

Who is responsible for the system's upkeep? *(give staff title)*

_____ ☐ Don't know ☐ No one

Is the system covered by a maintenance service inspection contract?

☐ Yes ☐ No ☐ Don't know

Check all the supplemental environmental control equipment used in areas covered by the system: ☐ Fan ☐ Open doors ☐ Portable humidifier
☐ Heater ☐ Open windows ☐ Portable dehumidifier
☐ Window air conditioner
☐ Don't know ☐ N/A
☐ Other: _____

_____

Is the temperature maintained 24 hours a day, 7 days a week?

☐ Yes ☐ No ☐ Don't know ☐ N/A
If not, please explain:_____

_____

_____

Is the relative humidity maintained 24 hours a day, 7 days a week?

☐ Yes ☐ No ☐ Don't know ☐ N/A
If not, please explain: _____

_____

_____

Is the system turned off for extended periods of time (i.e., long weekends, holidays, winter)? ☐ Yes If yes, when? _____
☐ No _____
☐ Don't know _____
☐ N/A _____

F13b. For structures without a central HVAC system

Are any of the following centralized?

- Heat ☐ Yes ☐ No ☐ Don't know
- Cooling ☐ Yes ☐ No ☐ Don't know

Check all the local climate control equipment in use:

☐ Fan ☐ Portable heater: ☐ Electric
☐ Open doors ☐ Kerosene
☐ Open windows ☐ Quartz
☐ Window air conditioner ☐ Other:_____
☐ Portable humidifier ☐ Don't know
☐ Portable dehumidifier
☐ Other: _____
☐ Don't know ☐ N/A

F13c. Institutions with Living Collections Housed in a Greenhouse

Please answer these questions in addition to other questions in this section.

Environment:

☐ Single zone ☐ Multiple zones: Number _____ ☐ Don't know

Number of independently controlled zones: _____

What methods are used for ventilation:

☐ Vents ☐ Fans ☐ Screens ☐ Other: _____
☐ Don't know ☐ N/A

Does the greenhouse have low and high temperature alarms?

☐ Yes ☐ No ☐ Don't know

Who is alerted to the alarms after hours? *(give staff title)*

_____ ☐ Don't know ☐ No one

How often is the system tested?

_____ ☐ Don't know ☐ N/A

Who is responsible for the system's upkeep? *(give staff title)*

_____ ☐ Don't know ☐ No one

Does the greenhouse have a backup heating and generating capacity?

☐ Yes ☐ No ☐ Don't know

Pollutants and Particulates

F14. If the building has a central HVAC system, is the air filtered for:

☐ Dust   ☐ Gaseous pollutants

☐ Nothing   ☐ Don't know   ☐ N/A

     F14a. What type of filter is used in the system? _____

F15. If there is no central HVAC system or if the air is not filtered for dust and gaseous pollutants, what precautions are taken to protect collections against these problems?

_____

_____

_____

☐ Don't know   ☐ N/A

F16. Where is smoking allowed in the building?

_____

_____

☐ Don't know   ☐ N/A

F17. Are flammable fluids stored in the building (i.e., cleaning solvents, paints, glues)?

☐ Yes   ☐ No   ☐ Don't know

     F17a. If yes, are flammables kept in an approved, vented cabinet?

        ☐ Yes   ☐ No   ☐ Don't know

Pest Control

F18. Indicate which pests have been a problem at the institution:

Pest	Storage	Exhibition	Building Structure	Other	Don't Know	N/A
Insects	☐	☐	☐	☐	☐	☐
Fungi (mold)	☐	☐	☐	☐	☐	☐
Rodents	☐	☐	☐	☐	☐	☐
Birds	☐	☐	☐	☐	☐	☐
Other						
_____	☐	☐	☐	☐	☐	☐
_____	☐	☐	☐	☐	☐	☐
_____	☐	☐	☐	☐	☐	☐

Location

F19. Does the institution have a written pest management (prevention and control) program?

☐ Yes   ☐ In development   ☐ No   ☐ Don't know

F20. Are collection areas routinely inspected for pest evidence or activity?

☐ Yes   By whom? *(give title)* _____

☐ No   ☐ Don't know

F21. Are the collection **areas** routinely treated with a pesticide?

☐ Yes   By whom? *(give title)* _____

☐ No   ☐ Don't know

F22. Are collections **materials** routinely treated with a pesticide?

☐ Yes   By whom? *(give title)* _____

☐ No   ☐ Don't know

F23. Are live flowers or plants permitted in the building?

☐ Yes   ☐ No   ☐ Don't know

F24. Where is food prepared or consumed in the building?

_____

_____

☐ Don't know   ☐ N/A

Fire Safety and Security

F25. Does the facility have an automatic fire **detection** system?

☐ Yes   ☐ No   ☐ Don't know

If yes:

F25a. Is it connected to:

☐ Local fire department
☐ Security service
☐ An outside bell
☐ Other: _____
☐ None

F25b. Is the detection system covered by a maintenance service inspection contract?

☐ Yes   ☐ No   ☐ Don't know

F26.   Who on the staff is alerted to an active alarm after hours?

_____

☐ Don't know   ☐ N/A

F27.   What type of fire **suppression** system does the institution have? *(check all that apply)*

☐ Wet pipe sprinkler system   ☐ Hand-held extinguisher:
☐ Halon   ☐ ABC   ☐ Water
☐ Fire hoses   ☐ CO_2 ☐ Other: _____
☐ Dry pipe sprinkler system   ☐ No system
☐ CO_2 suppression system   ☐ Don't know

F27a. Is the suppression system covered by a maintenance service inspection contract?

☐ Yes   ☐ No   ☐ Don't know

F28.   How often are the fire detection and suppression systems tested?

_____

☐ Don't know   ☐ N/A

F29.   Is there an emergency lighting system?
☐ Yes   ☐ No   ☐ Don't know

F30.   Are escape routes clearly marked?
☐ Yes   ☐ No   ☐ Don't know

F31.   Does the institution have a regular garbage/debris pick-up?
☐ Yes   ☐ No

F32.   Which **passive** security measures for the collections does the institution utilize? *(check all that apply)*

☐ Deadbolts on storage doors   ☐ Locked gates/cages
☐ Locked exhibition cases   ☐ Sign in/out logs
☐ Other: _____
☐ Don't know   ☐ N/A

F33. Which **active** security measures for the collections does the institution utilize?
(check all that apply)
☐ Closed-circuit TV ☐ Perimeter alarms ☐ Live guards
☐ Keycard entry systems ☐ Interior motion detectors
☐ Other: _____
☐ Don't know ☐ N/A

F34. Are the security systems covered by a maintenance service inspection contract?
☐ Yes ☐ No ☐ Don't know

G. Additional Information

G1. Please indicate which of the following types of reports or forms of documentation you can provide the assessors, either before or during the site visit. Assessors may contact you directly for these documents if they are available. Please send copies, not originals, if requested. If the documents are too large to be duplicated, please let the assessors know.
☐ Floorplan
☐ Emergency exit routes chart
☐ Historic structures report
☐ Historic landscape report
☐ Conservation assessment report
☐ Museum assessment report
☐ Other collection or structural report
☐ Maintenance records/logs
☐ General information brochure
☐ General collections description/overview
☐ Other: _____

H. Reporting

H1. How many staff members were involved in completing this questionnaire? _____
H2. How many hours total (time for all staff members) did it take to complete this questionnaire? _____
H3. Please note any comments you have on this process:

_____