

BOE BUILDING SURVEY

We have prepared this form for you to print, fill out and return to us. You do not have to provide your name if you do not want to. Just mail the completed forms to MIC 63. **We need and appreciate your help on this!**

1. Prior to the replacement of the curtain wall/windows, did you ever SEE water leaking around the windows?
Yes _____ No _____
 - a. Where did you SEE water leaking around the windows? (Please identify the floor, pillar number or cubicle number closest to the observed)
 - b. What time of year did you SEE the leak?
 - c. When was the last time you saw the leak?

2. Prior to the replacement of the curtain wall/windows, did you ever SEE what you thought was mold around any of the exterior windows?
Yes _____ No _____
 - a. Where did you SEE what you thought was mold around any of the exterior windows? (Please identify the floor, pillar number or cubicle number closest to what you saw with enough detail for us to find the area)
 - b. What time of year did you SEE what you thought was mold around any of the exterior windows?
 - c. When was the last time you saw what you thought was mold around any of the exterior windows?

3. Prior to the replacement of the curtain wall/windows, did you ever SMELL what you thought was mold odors around any of the exterior windows?
Yes _____ No _____
- a. Where did you SMELL what you thought was mold odors around any of the exterior windows? (Please identify the floor, pillar number or cubicle number closest to what you saw with enough detail for us to find the area)
- b. What time of year did you SMELL what you thought was mold odors around any of the exterior windows?
- c. When was the last time you SMELLED what you thought was mold odors around any of the exterior windows?
4. Since the replacement of the curtain wall/windows, have you SEEN water leaking around the windows?
Yes _____ No _____
- a. Where did you SEE water leaking around the windows? (Please identify the floor, pillar number or cubicle number closest to the observed)
- b. What time of year did you SEE the leak?
- c. When was the last time you saw the leak?
5. Since the replacement of the curtain wall/windows, have you SEEN what you thought was mold around any of the exterior windows? Yes _____ No _____
- a. Where did you SEE what you thought was mold around any of the exterior windows? (Please identify the floor, pillar number or cubicle number closest to what you saw with enough detail for us to find the area)
- b. What time of year did you SEE what you thought was mold around any of the exterior windows?
- c. When was the last time you saw what you thought was mold around any of the exterior windows?

6. Since the replacement of the curtain wall/windows, have you SMELLED what you thought was mold odors around any of the exterior windows?
Yes _____ No _____
- a. Where did you SMELL what you thought was mold odors around any of the exterior windows? (Please identify the floor, pillar number or cubicle number closest to what you saw with enough detail for us to find the area)
- b. What time of year did you SMELL what you thought was mold odors around any of the exterior windows?
- c. When was the last time you SMELLED what you thought was mold odors around any of the exterior windows?
7. Have you ever SEEN any leaks through the ceiling in the BOE building?
Yes _____ No _____
- a. Where did you SEE these leaks? (Please identify the floor, pillar number or cubicle number closest to what you saw with enough detail for us to find the area)
- b. What time of year did you SEE these leaks?
- c. When was the last time you saw these leaks?
8. Have you ever SEEN any stains on the ceiling in the BOE building?
Yes _____ No _____
- a. Where did you SEE these stains? (Please identify the floor, pillar number or cubicle number closest to what you saw with enough detail for us to find the area)
- b. What time of year did you SEE these stains?
- c. When was the last time you saw these stains?
9. Have you ever SMELLED what you thought was mold odors in the BOE building?
Yes _____ No _____
- a. Where did you SMELL what you thought was mold in the BOE building? (Please identify the floor, pillar number or cubicle number closest to what you saw with enough detail for us to find the area)

- b. What time of year did you SMELL what you thought was mold odors in the BOE building?
- c. When was the last time you SMELLED what you thought was mold odors in the BOE building?
- d. When was the last time you SMELLED what you thought was mold odors in the BOE building?
- e. What time of day was it when you SMELLED what you thought was mold odors in the BOE building?

10. Please provide any further information you believe will be helpful in assisting in the building investigation:

THANK-YOU FOR YOUR HELP.

Name: _____
Optional

E-mail Address _____
Optional