**External Wall System Questionnaire.**

(please complete one questionnaire for each separate building on each site)

**Building Details.**

|  |  |
| --- | --- |
| **Building Name.** |  |
| **Building Address.** |  |
| **Building Tenure.** | **Social residential.**  **Private residential.**  **Student accommodation.**  **Hotel.**  \*Please delete as appropriate. |
| **Building owner.** |  |
| **Building Developer.** |  |
| **Managing agent.** |  |

**Scope.**

As part of the information gathering exercise on high rise buildings we are collecting information on the external wall systems of residential buildings 18m or higher, in particular the combination of external wall materials & insulation and the external wall structures of these buildings. Measurements should be taken from the ground to the highest storey in accordance with Diagram D6 of Approved Document B 2019 edition.

|  |  |  |
| --- | --- | --- |
| **1.** | **Is the building 18m or higher?** | **Yes.**  **No.**  **Don’t know**  \*Please delete as appropriate. |
| **2.** | **If known what is the height of the building?** | **In metres \_\_\_\_\_ m.**  **In storeys \_\_\_\_\_ storeys.** |

**External walls.**

Each building may have one or more external facing materials. We are looking to collect information on all of the external facing materials (e.g. cladding, render, etc.) and insulation combinations used. Please ensure you include all external facing materials and insulation. For example if the building is partly brickwork and partly timber cladding you will need to include **both** of these.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **3.** | **How many different external facing materials are there on the external walls of the building?** | |  | | | |
| **4.** | **Please specify the external facing material. \***tick (√) as appropriate and indicate percentage of the external wall area of the building the material covers.  1-0-20%.  2-21-40%.  3-41-60%.  4-61-80%.  5-81-100%. | | **-------------------------------** | | **√** | **%** |
| **Glass.** | |  |  |
| **High pressure laminate.** | |  |  |
| **Aluminium composite material.** | |  |  |
| **Other metal composite material.** | |  |  |
| **Metal sheet panels.** | |  |  |
| **Render system.** | |  |  |
| **Brick slips.** | |  |  |
| **Brick.** | |  |  |
| **Stone panels or stone.** | |  |  |
| **Tiling systems.** | |  |  |
| **Timber or wood.** | |  |  |
| **Plastic.** | |  |  |
| **Don’t know.** | |  |  |
| **Other.** \*please specify and continue on separate sheet if necessary. | |  |  |
| **5.** | **Please provide any further details you may have about any of the external wall facing materials such as manufacturer, product name, fire rating certification, etc.** \*please continue on separate sheet if necessary. | |  | | | |
| **6.** | **What type of insulation is used in conjunction with the wall finishes?** \*please continue on separate sheet if necessary. | | **Mineral wool.** | | | |
| **Fibre glass.** | | | |
| **Phenolic foam.** | | | |
| **Expanded or extruded polystyrene.** | | | |
|  |  | | **Wood fibre.** | | | |
| **Polyurethane rigid foam (PUR) or polyisocyanurate foam (PIR).** | | | |
| **None.** | | | |
| **Don’t know.** | | | |
| **Other.** \*please specify and continue on separate sheet if necessary. | | | |
| **--------------------** | | **External wall finish.** | | **Type of insulation.** | | |
| **Wall type 1.** | |  | |  | | |
| **Wall type 2.** | |  | |  | | |
| **Wall type 3.** | |  | |  | | |
| **Wall type 4.** | |  | |  | | |
| **Wall type 5.** | |  | |  | | |
| **Wall type 6.** | |  | |  | | |
| **7.** | **Please provide any further details you may have about any of the insulation used such as manufacturer, product name, fire rating certification, etc.** \*please continue on separate sheet if necessary. | |  | | | |

**External wall attachments.**

Please provide details of any balconies or other external wall attachments and the material(s) they are made of.

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| --- | --- | --- | --- |
| **8.** | **Does the building have any balconies?** | **Yes/No** \*delete as appropriate. | |
| **9.** | **What material is the primary structure of the balcony made of?** \*please tick (√) as appropriate. | **Timber or wood.** |  |
| **Metal.** |  |
| **Concrete.** |  |
| **Don’t know/** |  |
| **Other.** \*please specify and continue on separate sheet if necessary. |  |
| **10.** | **What material is the balcony floor made from?** | **Timber or wood.** | |
| **Glass.** | |
| **Metal.** | |
| **Concrete.** | |
| **Don’t know.** | |
| **Other.** \*please specify and continue on separate sheet if necessary. | |
| **11.** | **Are there any other sizeable external wall structures.** \*please tick (√) as appropriate. | **No external wall structures.** |  |
| **Solar shading.** |  |
| **Green walls.** |  |
| **Other.** \*please specify and continue on separate sheet if necessary. |  |