

## GREEN MARK FOR EXISTING BUILDINGS APPLICATION FORM

This application form is to be submitted, together with the Project information sheets (7 pages altogether) duly completed and all required documents listed in the checklist to:

The Deputy Director  
Green Mark Department  
Building and Construction Authority  
5 Maxwell Road  
#17-00 Tower Block, MND Complex  
Singapore 069110

We, \_\_\_\_\_ (name of building owner)

would like to engage the Building and Construction Authority to assess the project

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\_\_\_\_\_  
Name & Designation of Applicant  
(Developer / Building Owner)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Company's Stamp

Company Address :
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<p><b><u>Invoicing Details</u></b>                  Company Name :                  Contact Person :                  Billing Address :</p>
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Note: BCA will inform the applicant on the assessment fees payable upon receiving the application form.

**For Official Use Only:**

Registration No.:
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# PROJECT INFORMATION (Sheet 1)

## PROJECT DETAILS

Description of Building:			
Building Name: (Short)		New / Existing Building (please delete one)	
Developer/Building Owner:			
Building Type:	GM Re-certification Project Yes / No (please delete one)	If previously Green Mark certified project, please state criteria it was assessed under.	
A Subsidiary of A Major Developer, if applicable			
Architect:			
M&E Engineer:			
Contractor:			
Landscape consultant / contractor:			
Managing agent / Maintenance Contractor:			
Facility Manager:			
Other specialist consultant/contractor			
Preferred date of Assessment:		Target Rating:	

	Names of Contact	Organisation	Designation	Contact no.	Email Address
Building Owner/ Client					
Facility Manager					
Consultant (if any)					

*#please furnish the contacts Building Owner/Client and at least two (2) contacts for assessment.  
Green Mark for Existing Building - Application Form\_rev 01 Sep 2010*

## CHECKLIST OF DOCUMENTS TO BE ENCLOSED WITH APPLICATION

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1. Completed Annex A Form.
2. Submit a recently completed building energy audit report. Already have energy audit report (last one year) from qualified M&E engineer / accredited ESCO.

If an energy audit has not been conducted in the last one year, you will be (choose one of the following):

- Engaging BCA's Term Contractor to determine the air-conditioned plant efficiency and enjoying a one-time 50% co-funding.

OR

- Engaging your preferred contractor (qualified M&E engineer/ accredited ESCO) to check the chiller system kW/ton and claiming the one-time 50% co-funding based on BCA's Term Contractor rate.

**Building Information**

1. Building ID \_\_\_\_\_ (for BCA Use)                      Date of Reporting \_\_\_\_\_
2. City \_\_\_\_\_ Country \_\_\_\_\_ Postcode \_\_\_\_\_
3. Building Name \_\_\_\_\_  
 Building Address \_\_\_\_\_  
 Building Owner Name \_\_\_\_\_
4. Property Management Company Name \_\_\_\_\_
5. Contact Person \_\_\_\_\_ Designation \_\_\_\_\_  
 Tel.: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_
6. Date of TOP (Temporary Occupancy Permit) \_\_\_\_/\_\_\_\_/\_\_\_\_ (Month/ Year) Building Age: \_\_\_\_
7. Date of Last Major Renovation on Envelope, Extension, Lighting, HVAC, and/or etc.:  
 \_\_\_\_/\_\_\_\_/\_\_\_\_ (Month/ Year), Specify\* \_\_\_\_\_  
 \_\_\_\_\_
8. Building Ownership:     Sole Owner Occupied,     Landlord + Multi-Tenants,  
 Multi-Tenants,     Others \_\_\_\_\_
9. Public/ Private Sector:     Public Sector,     Private Sector
10. Principal Building Use Type:     Office     Retail     Industrial     Hotel  
 Other Mixed Activities, Specify\* \_\_\_\_\_
11. Type of Main HVAC:     Central Air-Condition,     Stand-Alone System (Water/ Air Cool),  
 Split Unit,     FCU     VRV     Natural Ventilated     Mixed System, Specify\*
12. No. of Storey (Above Ground) \_\_\_\_\_ No. of Basement Floor \_\_\_\_\_
13. No. of blocks within development \_\_\_\_\_ Total No. of Units/rooms (residential, hospital, hotel) \_\_\_\_\_
14. Typical Floor-to-Floor/ Ceiling Height \_\_\_\_\_ m; Gross Building Volume \_\_\_\_\_ m<sup>3</sup>;  
 Gross Floor Area \_\_\_\_\_ m<sup>2</sup> or sq ft; Net Lettable Area \_\_\_\_\_ m<sup>2</sup> or sq ft  
 Air Conditioned Building Volume \_\_\_\_\_ m<sup>3</sup>; No. of Lifts \_\_\_\_\_
15. Environmental Setting Points (Air Conditioned Area): Temp \_\_\_\_\_ °C, Relative Humidity \_\_\_\_\_ %
16. Number of Closing Days in The Year (besides weekends and public holidays): \_\_\_\_\_ Days.
17. Number of light switches in an open plan area: \_\_\_\_\_ No. of switches/100m<sup>2</sup>



**(b) Other Fuel Types:**

Fuel Type	Bill Start Date	Bill End Date	Energy Consumption	Unit	Remark
Diesel					
Gas					
Purchased Cooling					
Renewable Energy					

## 19. Detailed Operating Schedule of Major Energy Consuming Systems

**Table-3 Systems' Operating Schedules\***

	Chiller 1 (Operating Hours & Capacity)	Chiller 2 (Operating Hours & Capacity)	Lighting	Mechanical Ventilation	Lift/ Escalator
Weekday					
Saturday					
Sunday/ Public Holiday					
Hours/Week					

*For higher number of equipment (chillers), please attach a separate sheet showing the Detailed Operating Schedule of Major Energy Consuming Systems.*

20. Age of the Main Energy Consuming Systems and Equipment: Chiller plant \_\_\_\_\_ Lighting \_\_\_\_\_  
lift \_\_\_\_\_ Mechanical Ventilation \_\_\_\_\_ Computer \_\_\_\_\_

21. **Total number of chillers in operation (i.e. refers to the maximum number of chillers that needs to operate at any instant) and total number of chillers that operate in an entire day (if any chillier operate at least 15 min will also be considered).**

**Total number of chillers in operation** \_\_\_\_\_

**Total number of chillers that operation in an entire day** \_\_\_\_\_

22. Previous Energy Audit Completed:  Yes  No

Specify, \_\_\_\_\_

23. Building Energy Retrofitting Under Consideration:  Yes  No

Specify, \_\_\_\_\_

## 24. Other Special Systems in Building:

On-site Generation,  Cogeneration,  Thermal Storage,  Others: \_\_\_\_\_

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## 25. Energy Saving Design Features in the Building

e.g. Passive energy design features: effective use of site natural environment (natural ventilation, landscape and water body), building envelope design, shading and daylight usage. Active energy design features: air conditioning design, energy recovery system, energy saving lighting fixtures and control, and building automatic management system. Management: energy management schemes and education of users, energy management committees, etc.

Passive: \_\_\_\_\_

Active: \_\_\_\_\_

Management: \_\_\_\_\_

Airconditioned space (m<sup>2</sup>) : \_\_\_\_\_ Naturally-ventilated space (m<sup>2</sup>) : \_\_\_\_\_

## 26. Type of Building Control System

Programming Lighting Control (PLC)     Supervisory Control System (SCS)  
 Building Automation System (BAS)     Setback Control System  
 Temperature Control     Energy Management     Others \_\_\_\_\_

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*I certify that the information given above is true and accurate and that BCA may seek to verify them independently, if required.*

**Name:** \_\_\_\_\_

**Designation:** \_\_\_\_\_

**Tel:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Company Stamp:**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_