Off-grid Commercial Building Energy Audit

General Information

Building Name	
Location	
Contact Person	
Date	
Building Characteristics	
Building Size (sq ft)	
Floors	
Year of Construction	
Building Type	
_	
Occupancy & Usage	
Number of Occupants	
Operating Hours/Day	
Operating Days/Week	
Energy Sources	
Primary Power Source	
	,]

quipment/Load	Quantity	Power Rating (W)	Hours/Day