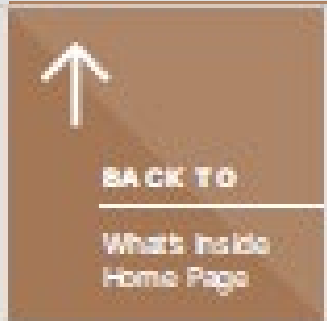




ESD Checklist

Please ensure you and your team complete this checklist and submit to the relevant Vicinity contact during the design development phase.

Checklist

Centre Name

Centre State

Tenancy No

Tenancy Name

Tenancy Usage

Tenancy Area (m2)

Intended hours
of operation
(total weekly)

Contact Name

Tel No.

Mobile

Email

Contact Address

Tenancy Designer

Contact

Phone

Email

Address

Contractor

Contact

Phone

Email

Address



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Lighting

Unit
Totals

Power
(Watts) total

Shop Area m2

NOTE: LED is the preferred lighting to comply with selection J of the current BCA of 14 Watts per m2

Lighting Front of House / Retail Space

Lighting Back of House / Storage Space

Totals Combined

Total lighting load (to correspond
with detailed drawing package)

Air-conditioning (Type)

No. of
Phases

Power
(Watts)

Energy Rating (4 star
minimum requirement)

Attach details of Additional Items – Application to be made for supplementary air.

1.

2.

3.

4.

5.

Total Power Load (Watts) combined

Exhaust and Make Up
System (Type)

No. of
Phases

Power
(Watts)

Ventilation
Rate (Litres
per second)

Size of
Hood/Unit

List details of exhaust hoods and fans.

Note: Tenancies such as Nail salons, Fresh Fish stores, etc. will require exhaust fans to remove heavy odours.

1.

2.

3.

4.

Total Power Load (Watts) combined

Electrical Equipment	No. of Phases	Power (Watts)	Energy Rating (4 star min. requirement)	WELS Rating (4 star min. requirement)
List all electrical equipment, computers, digital displays, dishwashers, hot water systems				
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				

Electrical Equipment	No. of Phases	Power (Watts)	Energy Rating (4 star min. requirement)	WELS Rating (4 star min. requirement)
List all electrical equipment, computers, digital displays, dishwashers, hot water systems				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				
26.				

Total Power load (watts) Combined



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Refrigeration Equipment (Type)	No. of Phases	Power (Watts)	Energy Rating (4 star minimum requirement)
--------------------------------	---------------	---------------	--

Attach details of Additional Items

1.			
2.			
3.			
4.			

Total Power Load (Watts) combined

Cooking Equipment Electrical (preferred)	No. of Phases	Power (Watts)	Energy Rating (4 star minimum requirement)	Change to WELS rating (4 star minimum requirement)
--	---------------	---------------	--	--

List Details

1.				
2.				
3.				
4.				
5.				
6.				

Total Power Load (Watts) combined

Cooking Equipment Gas	WELS Rating (4 star minimum requirement)	Gas (mj.hour)	Energy Rating (4 star minimum requirement)	WELS Rating (4 star minimum requirement)
-----------------------	--	---------------	--	--

List Details

1.				
2.				
3.				
4.				
5.				
6.				

Total Gas (M.J./hour)

► Plumbing Requirements:

Confirmation (tick)

Type: list equipment/or type

Hot water requirements

☐

Yes

☐

No

Domestic waste requirements

☐

Yes

☐

No

Natural gas requirements

☐

Yes

☐

No

Water supply requirements

☐

Yes

☐

No

Trade waste (grease) requirements

☐

Yes

☐

No