

# WATER EVALUATION DATA COLLECTION FORM

## Plumbing Fixtures - Restrooms, Locker Rooms and/or Kitchenettes

**Building number and name**

**Location of plumbing fixtures:**

**Restroom type:**

Male / Female /  
Unisex

	Toilets	Urinals	Faucets*	Showers	Comments
<b>Count of fixtures</b>					
<b>Primary fixture type (circle)</b>	Tank (Gravity) / Tank (Pressure Assisted) / Flush Valve		With Aerator / Without Aerator	Threaded Fixed / Hand Held Wall Mount/ Gang	
<b>Flush valve only - Primary flush valve type (circle)</b>	Diaphragm / Piston	Diaphragm / Piston / Non- water			
<b>Flush valve only - Fixture mount type (circle)</b>	Floor Mount / Wall Mount / Floor with Rear Discharge	Floor Mount / Wall Mount			
<b>Operation type (circle)</b>	Manual / Sensor/ Dual Flush	Manual / Sensor	Manual / Sensor / Metered		
<b>Urinal only - Discharge tube diameter (check)</b>		$\frac{3}{4}$ " _____; 1 $\frac{1}{4}$ " _____			
<b>Rated flush rate - gallons per flush (gpf)</b>					
<b>Rated flow rate - gallons per minute (gpm)</b>					
<b>Flush valve only - Average flush time (sec)</b>					
<b>Measured average flow rate (gpm)</b>					
<b>Percentage of occupants showering daily, weekdays</b>					
<b>Percentage of occupants showering daily, weekends</b>					

\*This includes faucets located in bathroom, locker room and/or kitchenettes.