

# *New York State Archives*

Strengthening Archives

## **Building Snapshot**

Introduction:

This worksheet is intended to provide an overview of your building's construction, its environmental controls, and

### **Storage Location:**

- Basement
- Attic
- Closet
- Warehouse
- Garage
- Vault
- Safe
- Other: \_\_\_\_\_

### **Floor Plan**

Do you have a separate storage area?

- Yes       No

Do you have a separate research area?

- Yes       No

Do you have a separate area for processing records?

- Yes       No

### **Security**

How many entrances/exits are in your repository?

Are your entrances/exits locked?

How many keys are available for locked doors and who has access to them?

### **Construction:**

What Year was your building constructed? \_\_\_\_\_

Construction materials (wood, brick, stone, concrete)? \_\_\_\_\_

Major Renovations?

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Problems with building?

- Structural
- Plumbing
- Electrical
- Flooding/leaks
- Mold/mildew
- Heating Cooling

### **Environmental Controls:**

Is the HVAC system for the storage area part of the system for the entire building?

- Yes      No

Is the HVAC system shut down during evenings and weekends?

- Yes      No

Are there separate temperature or humidity zones within the centralized system for the storage area?

- Yes      No

Can the temperature or humidity be adjusted by individual users?

- Yes      No

Do you use environmental equipment not controlled by the centralized system?

- Window air conditioner   Portable de-humidifier   Portable humidifier  
Portable heater   Fan   Other: \_\_\_\_\_

Do you open doors or windows to control temperature and humidity?

- Yes      No

### **Climate:**

	Average Temperature	Average Humidity
Spring		
Summer		
Fall		
Winter		

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How regularly do temperature and humidity fluctuate? \_\_\_\_\_

### **Light:**

Windows?

Yes      No

Are windows covered?

Yes      No

Artificial light source?

Fluorescent Incandescent

Is light source filtered?

Yes      No

### **Emergency Detection**

Do you have smoke/heat detectors?

Yes      No

Do you have fire extinguishers?

Yes      No

Do you have a fire suppression system?

Yes      No      Type of system? \_\_\_\_\_