

GBP Form 2: Reporting for COMMERCIAL & INSTITUTIONAL BUILDINGS

This Form supports the reporting requirements of the GBP-C&I⁸ and is part of your funding agreement with the Province of Manitoba. GBP-C&I criteria are described in GBP Manual Section 4: <http://www.gov.mb.ca/finance/greenbuilding/>

INSTRUCTIONS: GBP Form 2 must be returned within 60 days of building occupancy⁷.

SECTION A: Building Information (To be completed by Building Owner or Funding Recipient¹)

PROJECT NAME: _____

STREET: _____

CITY: _____

POSTAL CODE _____

Building Type and % of Floor Space (for mixed-use, select all that apply):

- School ___%
 Childcare ___%
 Hospital ___%
 Personal Care Home ___%
 Office ___%
 Arena ___%
 Recreation Centre ___%
 Other (Specify): _____ %

Project Type (select all that apply):

- New Construction
 Major Renovation
 Addition/Expansion

Total Floor Area³: _____ m²

Contribution from GRE⁴ Organization: \$ _____

Construction cost⁵: \$ _____

Total capital cost⁶: \$ _____

Property Legal Description: _____

Construction start date: _____ / _____ mm/yyyy

Date of occupancy: _____ / _____ mm/yyyy

Building Owner or Funding Recipient¹: _____

COMPLETENESS CHECKLIST:

- Table 1 Energy Efficient Design **AND** Power Smart Acceptance Letter
- Table 2 Environmental Impacts
- Table 3 Integrated Design Process **OR** LEED Letter Template in lieu
- Table 4 Renewable Energy Sources
- Table 5 Water Efficiency - Fixtures & Fittings **OR** LEED Letter Template in lieu
- Table 6 Water Efficiency - Water Conservation
- Table 7 Construction Waste Management
- Table 8 Energy & Water Tracking

¹BUILDING OWNER (or FUNDING RECIPIENT): The legal owner of the property and/or the organization that enters into a funding agreement with a GRE to construct, add to or renovate a building. To complete the forms the owner may assign a delegate.

²FUNDER: A GRE⁴ organization that provides funds for a building project.

³TOTAL FLOOR AREA: The total of each horizontal floor area(storey) above grade measured to the outside surface of the exterior walls. Where a floor is partially below grade (i.e.. "walk out basement") and area is to be occupied, its floor area is to be included in total. Where exterior envelope is complete but interior is left unfinished for future occupancy, area is to be included in total.

⁴GOVERNMENT REPORTING ENTITY (GRE): Core government and Crown organizations, government business enterprises and public sector organizations such as regional health authorities, school divisions, universities and colleges. Refer to Section 2.3 of the Green Building Program manual.

⁵CONSTRUCTION COST: The direct costs related to construction. Does not include design fees or land. Construction costs include materials, labour and installation.

⁶CAPITAL COST: Includes construction costs, design and other professional fees plus other costs related to the project.

⁷OCCUPANCY: Earliest permitted occupancy granted by the authority having jurisdiction, includes interim occupancy.

⁸GBP-C&I: Green Building Program, Commercial and Institutional.

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Section B: Project Report *(To be completed by Building Owner or Funding Recipient¹)*

INSTRUCTIONS: Complete the following tables and submit the form to your FUNDER. If the project is in VARIANCE, complete this form and provide the additional information outlined in the Variance Response Letter.

Table 1: Energy Efficient Design

Provide the building's modelled energy efficiency: _____ % better than Manitoba Energy Code for Buildings (2013)
 _____ Energy Use Intensity (EUI)

Power Smart Program will verify energy model
 Estimate verification date: (mm/yyyy) _____ / _____

Power Smart Program acceptance letter attached

Note: Power Smart Designation must be completed by the end of standard warranty period; typically 12 months after occupancy

Project is in Variance. A letter is attached addressing the requirements of the Variance.

Table 2: Environmental Impacts

Indicate environmental certification targets:	Identify LEED® certification level: _____ Estimate verification date: (mm/yyyy) _____ / _____
Access to green building certification account:	Provide the following to allow GBCT access to the LEED® account: account number: _____ Authorization granted by the Authority who registered the project: _____ NAME (print) _____ / _____ SIGNATURE _____ DATE (mm/yyyy) _____
	<u>OR</u> <input type="checkbox"/> I understand that checking this box in lieu of a written signature confirms that I am the Authority printed above.

Note: LEED® submission must be completed by the end of standard warranty period; typically 12 months after occupancy

Project is in Variance. Reporting requirements indicated in the Variance Response Letter are attached.

Table 3: Integrated Design Process (IDP)

Identify IDP Members that participated throughout the design process:

	NAME	ORGANIZATION
IDP Facilitator:	_____	_____
Architect:	_____	_____
Sustainability Consultant:	_____	_____
Commissioning Professional:	_____	_____
Mechanical Engineer:	_____	_____
Electrical Engineer:	_____	_____
General Contractor:	_____	_____
Energy Modeller:	_____	_____
Building Operator:	_____	_____
Landscape Architect:	_____	_____
Interior Designer:	_____	_____
Occupant Representative:	_____	_____
Project Manager:	_____	_____
Construction Manager:	_____	_____
Civil Engineer:	_____	_____
Structural Engineer:	_____	_____
Specialized Consultants:	_____	_____
Other:	_____	_____
Other:	_____	_____
Other:	_____	_____
Other:	_____	_____

See LEED Letter Template attached in lieu

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Table 4: Renewable Energy Sources

Identify the energy sources (other than natural gas, hydro electric, diesel and propane), that were installed, evaluated (discussed in IDP session) or accommodated for future installation.

	Installed:	Considered:	Future Ready:
Wind	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>
Solar (thermal)	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>
Solar (photovoltaic)	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>
Ground Source Heat Pump	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>
Biomass	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>

Table 5: Water Efficiency - Fixtures & Fittings

List flow rates for the following:

Lavatory & hand faucet (l/m)	Shower head (l/m)	Kitchen faucet (l/m)	Water Closets (toilets) (l/f)	Urinals (l/f)	Pre-rinse spray valve (l/m)	Other	Other	Other
_____	_____	_____	_____	_____	_____	_____	_____	_____

See LEED Letter Template attached in lieu

Table 6: Water Efficiency - Water Conservation (or Water-Use Reduction or Re-use)

Identify the water saving measures that were installed, evaluated (discussed in IDP session) or accommodated for future installation. For sources not considered, provide explanation:

	Installed:	Considered:	Future Ready:
Greywater re-use	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>
Rainwater Collection - interior	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>
Rainwater Collection - exterior	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>
Other: _____	<input type="checkbox"/>	OR <input type="checkbox"/>	OR <input type="checkbox"/>

Table 7: Construction Waste Management (refer to GBP Guideline 3.10)

List amount of construction waste that was directed to the following facilities:

- _____ (A) Total recycled waste metric tonnes
- _____ (B) Total salvaged waste metric tonnes
- _____ (C) Total waste disposed at landfill metric tonnes
- _____ Total waste generated metric tonnes (A+B+C)

Table 8: Energy & Water Tracking (refer to GBP Guideline 3.8)

Indicate commitment to track energy & water use:	<input type="checkbox"/> Portfolio Manager has been established
Identify person responsible for administration of Portfolio Manager account:	NAME: _____
	EMAIL: _____

Building Owner Acknowledgement (Check the boxes that apply and sign below):

- I have reviewed the information in Tables 1-8 and deem them accurate to the best of my knowledge.
- I have reviewed the Commissioning Report with the Commissioning Authority.
- Letters or documents identified in the completeness checklist are attached.
- I will provide Power Smart Designation letter upon receipt to GBCT - greenbuilding@gov.mb.ca.
- I will provide the LEED® Final Review, Letter Template and proof of certification upon receipt to GBCT.
- I am providing GBP Form 2 to the FUNDER within 60 days of occupancy.

Check only if applicable:

- Project is in Variance & the documentation (outlined in the Variance Response Letter) is attached.

NAME OF BUILDING OWNER or FUNDING RECIPIENT (PRINT) _____

POSITION _____

SIGNATURE OF BUILDING OWNER or FUNDING RECIPIENT _____

DATE (mm/yyyy) _____

I understand that checking this box in lieu of a written signature confirms that I am the owner or funding recipient printed above.

PHONE: _____

EMAIL: _____

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SECTION C1: To be completed by the FUNDER (Project/Funding Officer)

INSTRUCTIONS:

GBP FORM 2 is REQUIRED BY THE FUNDING AGREEMENT

GRE organizations must:

- Confirm that the GBP-C&I criteria are incorporated into funded building projects
- Receive GBP Form 2 within 60 days of occupancy (see Section A: Instructions to Owner)

NAME OF PROJECT/FUNDING OFFICER		FUNDER (Department or Branch)
PHONE: (PROJECT/FUNDING OFFICER)	EMAIL:	
\$	/	/
PROVINCIAL CONTRIBUTION	FILE NUMBER	DATE of FUNDING AGREEMENT (mm/yyyy)
SIGNATURE OF PROJECT/FUNDING OFFICER	DATE of FORM 2 RECEIVED (mm/yyyy)	
OR <input type="checkbox"/> I understand that checking this box in lieu of a written signature confirms that I am the project/funding officer printed above.		

SECTION C2: To be completed by the FUNDER's Green Building Program Liaison

NAME OF LIAISON	DEPARTMENT
SIGNATURE OF LIAISON	DATE SUBMITTED TO GBCT (mm/yyyy)
OR <input type="checkbox"/> I understand that checking this box in lieu of a written signature confirms that I am the liaison printed above.	

Section C3: To be completed by Green Building Coordination Team (GBCT)

NAME & SIGNATURE OF GBCT	DATE RECEIVED (mm/yyyy)
OR <input type="checkbox"/> I understand that checking this box in lieu of a written signature confirms that I am the GBCT representative printed above.	