

FACILITY REPORT FORM



If you are interested in booking this exhibit, please complete this form as thoroughly as possible and return to:

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tel. (705) 742-7777, ext. 2479
fax (705) 743-2614

exhibitbookings@peterboroughmuseumandarchives.ca

Part 1: Your Coordinates

1.1 Name of institution:

1.2 Mailing address:

1.3 Name of director or signing authority:

1.4 Name of person organizing loan:

tel:

fax:

e-mail:

1.5 If unavailable, contact:

tel:

fax:

e-mail:

1.6 Delivery address:

1.7 Delivery instructions:

Part 2: About the institution

- 2.1 What is the institution's governing authority?

- 2.2 What is the institution's mandate?

- 2.3 What travelling exhibits has the institution hosted in the past year?

Part 3: About the staff

- 3.1 How many staff does the site have
 - full-time?
 - part-time?
 - volunteer?

- 3.2 Who will be managing the installation & repacking of this exhibit?
 - name:
 - title:
 - training & experience:

- 3.3 Who will be assisting with the installation & repacking of this exhibit?
 - name:
 - title:
 - training & experience:

 - name:
 - title:
 - training & experience:

Part 4: About the space

- 4.1 Please attach a floor plan of your building and indicate the space this exhibit will occupy.
- 4.2 What else will this area be used for while the exhibit is installed? [e.g. meetings, receptions]
- 4.3 Is smoking permitted anywhere in the building?
If so, where?
- 4.4 Are food and drink permitted in the exhibit area?
- 4.5 Do you record the temperature and humidity in the exhibit area?
- 4.6 If yes, what are the following readings for the space during the season for which you are booking the exhibit?
temperature maximum:
temperature minimum:
average daily fluctuation:
relative humidity maximum:
relative humidity minimum:
average daily fluctuation:
- 4.7 Does the exhibit space ever sustain sudden changes in temperature and humidity [because of exterior doors near the space, for example]?
If so, please explain.
- 4.8 Do you ever open doors and windows in the building for ventilation?
- 4.9 Can you maintain ambient lighting in the exhibit area at:
50 lux
150 lux
other
- 4.10 During the past five years, has there been any water damage in the exhibit area?
If yes, please describe the cause and the steps taken to correct the problem.

Part 5: About security

- 5.1 How many individuals hold keys to your site?
- 5.2 Are any keys held by individuals who are NOT paid staff of the institution?
If yes, please explain.
- 5.3 Do you have an automatic security alarm system?
- 5.4 If you have a security system, where does the alarm sound? [at site only, at a security company]
- 5.5 Who responds to alarms?
How far are they from the site?
- 5.6 Is there emergency power back-up for the alarm system during a power interruption?
- 5.7 Do your telephones or other communication systems work during a power interruption?
- 5.8 Does the site have a front desk which is staffed at all times the institution is open to the public?
- 5.9 During operating hours, can visitors leave the exhibit area via an emergency exit without passing the front desk?
If yes, are these exits alarmed?
- 5.10 How is the exhibit area monitored?
- 5.11 If necessary, could you arrange for constant supervision of the exhibit area?
- 5.12 Do you have an emergency response plan?
- 5.13 Do you have a regular pest control program?
Describe briefly:

Part 6: About insurance

- 6.1 What type of coverage does your existing insurance provide for incoming loans?
all risk wall-to-wall
on premises only
- 6.2 What is the existing level of liability covered for incoming loans? \$ _____
- 6.3 Does the museum purchase additional insurance to cover incoming travelling exhibits?
If so, please specify type and amount of coverage.
- 6.4 Who is your insurance agent or broker?
- 6.5 How many claims have been made for damage to artifacts or exhibitions during the last five years?
If any, please describe the incident(s):

(For additional comments, please attach sheets as required)

To the best of my knowledge the above information is current and accurate.

Signature: _____

Name & Position: _____

Date: _____