



TOBY INSPECTION VERIFICATION

Building Name: _____
 Local/City: _____
 Category: _____

Areas Inspected (All items are required for eligibility to compete if applicable to the property type)

	Yes	N/A	Comments
Entrance /Main Lobby	<input type="checkbox"/>	<input type="checkbox"/>	
Security/Life Safety	<input type="checkbox"/>	<input type="checkbox"/>	
Management Office	<input type="checkbox"/>	<input type="checkbox"/>	
Elevators	<input type="checkbox"/>	<input type="checkbox"/>	
Multi-Tenant Corridors	<input type="checkbox"/>	<input type="checkbox"/>	
Restrooms	<input type="checkbox"/>	<input type="checkbox"/>	
Stairwells	<input type="checkbox"/>	<input type="checkbox"/>	
Typical Tenant Suite	<input type="checkbox"/>	<input type="checkbox"/>	
Central Plant/Engineering Office	<input type="checkbox"/>	<input type="checkbox"/>	
Equipment Rooms/Service Areas	<input type="checkbox"/>	<input type="checkbox"/>	
Evidence of Evacuation Drills conducted within past 12 months	<input type="checkbox"/>	<input type="checkbox"/>	
Roof	<input type="checkbox"/>	<input type="checkbox"/>	
Parking facilities (grade only if Owner/Agent Operated)	<input type="checkbox"/>	<input type="checkbox"/>	
Landscaping/Grounds	<input type="checkbox"/>	<input type="checkbox"/>	
Refuse Removal and Loading Dock Areas	<input type="checkbox"/>	<input type="checkbox"/>	
Tenant Amenities	<input type="checkbox"/>	<input type="checkbox"/>	
Preventive Maintenance Manual	<input type="checkbox"/>	<input type="checkbox"/>	
SOP Manual/Documentation of Standard Operating Procedures (online or printed)	<input type="checkbox"/>	<input type="checkbox"/>	
Regular Financial Reports/Accounting Software	<input type="checkbox"/>	<input type="checkbox"/>	
Purchase Policies	<input type="checkbox"/>	<input type="checkbox"/>	

Judge's Affidavit

As one of the judges for the local BOMA TOBY Awards Program, I have inspected the above indicated areas at the building site using BOMA International's "The Outstanding Building of the Year" program

Judge's Name (please print): _____

Judge's Signature: _____

Date: _____

TOBY AWARD SPONSOR

