





QUESTIONNAIRE

ENERGY CONSUMPTION PREVIEW FOR INDUSTRIAL PREMISES

(For The Purpose of Registration)

Instructions

(production type)

- i. Completing the attached questionnaire will help SEDA Malaysia (authorized government agency) to know about your premise. Therefore, we would appreciate it if you could complete the questionnaire and return it to us.
- ii. The information provided in this questionnaire will be kept confidential and there will be no release of a part or whole of the information unless there is written consent from your company.
- iii. If you don't have at this stage readily available data to complete certain fields in this questionnaire, please provide estimated figures first or leave it blanks and the correct figures can be prepared at a later stage (during the walkthrough audit).
- iv. For further inquiries please contact SEDA Malaysia (TECH). On Tel: +603 8870 5814 / +603 8870 5800 or Fax: 03-8870 5900, e-mail: zulkhairee@seda.gov.my/

1.	General Information	
•	Name of the company:	
•	Address:	
•	Telephone No.:	Fax No.:
•	Person in charge of energy issues:	
	Name:	Position:
	Telephone No.:	Fax No.:
•	Description of the business activity:	

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- No. of main buildings:
- Estimated total Net / Occupied Floor Areas (NFA): _____m²
- Estimated total Gross Floor Areas (GFA): _____m²
- For factory only

No. of productions per year (kg):

3. Operating Time

- General starting time:
- General finish time:
- No of working days per week and per year:
- Do you work on public holidays? Yes/No

4. Installation Description

Premise No.	Usage	No. of Floors	Premise materials & color's (Walls & Roof)	Are windows tinted?	Total occupied areas (m²)	Is the roof insulated ? (Yes/No)
1						
2						
3						
4						
5						

Add additional sheet for extra premise.

5. Electricity

- Tariff code:
- Electricity End-Users

List in the following the estimated percentages of end-user consumption of the total electricity bill:

End-User Load	Percentage of Total Bill (%)	Estimated energy savings (%) based on ESCO observations/simple measurements
Boilers	%	%
ACMV	%	%
Production Equipment	%	%
Pump	%	%
Air Compressor	%	%
Fan and Blower	%	%
Lighting	%	%
Others (please specify)	%	%
Total	100 %	

• List your electricity bill history for the last 12 months:

Month	Year	KWh (Peak)	KWh (off-peak)	MD (kW)	PF penalty (RM)	Total Bill (RM)

Tota	al			

- Do you pay a Power Factor penalty? Yes/No
- Please attach a copy of the latest annual TNB electricity bill of your company.

• Electricity Metering

Main utility meters (kWh & kVARh):

Meters	Function	Type (Electronic/Electro- mechanical with rotation disk)

Sub-meters (kWh & kVARh):

Meters	Function	Type (Electronic/Electro- mechanical with rotation disk)

6. Fuels

• Do you use any type of fuel? Yes/No

If **Yes**, please fill the following table:

Fuels	Usage	Unit	Estimated annual costs (RM)

7. Boilers (if any)

This is related to boilers used for generating steam used in the operations. If you have boilers, please complete the following information:

Boilers	1	2	3	4
Fuel type				
Boiler Type				
Water-tube/Fire-tube				
Steam Capacity				
(Ton/hr)				
Steam values				
(Ton/hr,°C, bar)				
Efficiency or Heat				
Rate (%)				
Frequency of blow				
down				
Does it have heat				
recovery? Yes/No				
Age and Year of				
Commissioning				
(Years/ 19)				
Manufacturer				
Use				

• Do you have any heat recovery/rejection? Yes/No

If the answer Yes, describe briefly how:

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•	Start-up	time:
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- Shut down time:
- Is there any control to the amount of fresh air used by the air-conditioning system?
 Yes/No

If the answer **Yes**, describe briefly how:

• Indicate the type of air-conditioning system used in your premise:

Location	Туре	Capacity	Control (Manual /Automatic)	Total Unit	Year Manufactured

• Is there any future upgrading for your air-conditioning system? Yes/No

If Yes, please indicate when and what type of the new system (capacity, type).

9. Production equipment (if related)

• List the types of production machines or equipment:

Type of Equipment	Brand	Model	Year of Manufactured	Capacity (kW)

10. Pump (if related)

• List of the type of pump:

Type of pump	Brand	Model	Year of Manufactured	Rated Power (kW)

•	Is there any retrofitting equipment attached? Yes/No
	If Yes , please justify.

11. Air Compressor (if related)

• List of the types of air compressor:

Compressor No.	Brand	Model	Capacity (m³/hour)	Rated Power (kW)

12. Fan and Blower (if related)

• List of type of fan and blower:

Туре	Brand	Model	Rated power (kW)	Year Manufactured

13. Lighting

• List the types of lighting technologies used in your premise:

Lighting Technologies	Place of Use	Total No.	Total kW	Remarks
Ordinary fluorescent tubes				
Compact fluorescent lamps				
Incandescent globes				
Luminaires without reflector				
Luminaires with mirror reflectors				
Tri-phosphor fluorescent tubes				
Lighting energy savings systems (provide the brand name)				
Lighting control system				
Others (please state)				

•	Is there any future upgrading for your lighting system?	Yes/No
If `	Yes, indicate when and what type of the new system.	

14. Water Consumption

• Do you recycle your water? Yes/No

If the answer is Yes, indicate what is the proportion of used water is recycled: _____%

• List your monthly water consumption for the last 12 months:

Month	Year	Consumption (m³)	Costs (RM)

15. Energy Loads

• If available, please attach a copy of the daily/weekly/monthly load cycle.

 16. Are there any future expansion plans for hot water and power demand? Yes/No If Yes, please describe the plans briefly.
 17. Do you have any plans for an Energy Efficiency project? Yes/No If Yes, please describe the projects:
 18. Have you recently implemented any Energy Efficiency Projects? Yes/No If Yes, please describe the projects:
19. Is there any energy saving equipment installed in your premise? Yes/No If Yes, please describe briefly about the equipment:
20. Do you have Supervisory Control and Data Acquisition (SCADA) or Building Automation System (BAS) for monitoring and controlling your operations? Yes/No
If Yes , does your SCADA/BAS record electricity demand of your manufacturing facilities?
21. Is there any future upgrading for any facilities for your premises? Yes/No If Yes, indicate when and provide the description of the upgrade.