## **Hypothesis Form**

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Building Name:	File Number:
Address:	
Completed by:	
Complaint Area (may be revised as the i	nvestigation progresses):
Complaints (e.g., summarize patterns of	timing, location, number of people affected):
HVAC: Does the ventilation system appe in the complaint area? If not, what proble	ear to provide adequate outdoor air, efficiently distributed to meet occupant needs ems do you see?
Is there any apparent pattern connecting operating schedule?	the location and timing of complaints with the HVAC system layout, condition or
Pathways: What pathways and driving for	orces connect the complaint area to locations of potential sources?
Are the flows opposite to those intended	in the design?
Sources: What potential sources have be area (connected by pathways)?	een identified in the complaint area or in locations associated with the complaint
	vith any of these sources?

## **Hypothesis Form**

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Hypothesis: Using the information you have gathered, what is your best explanation for the problem?
Hypothesis testing: How can this hypothesis be tested?
If measurements have been taken, are the measurement results consistent with this hypothesis?
Results of Hypothesis Testing:
Additional Information Needed: