# SAP Checklist- Existing dwellings (extensions)

### **PROJECT DETAILS:**

Site address:	
Postcode:	
Client name:	
Address:	
Postcode:	
Agent's name:	
Address (if applicable):	

## CONTACT DETAILS:

Who should we contact with any questions?

Company Name:	Contact Name:	
Telephone:	Email:	

#### TIMESCALE:

Has this project already been submitted to Building Control?							
	Yes	No					
Date:							
Estimated completion date of build:							

# **New Structure**

<ul> <li><b>1. Ground Floor:</b></li> <li>Floor covering (e.g. screed)</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Floor type (e.g. Block &amp; Beam)</li> </ul>	
<ul> <li><b>3. Exposed Upper Floor e.g.</b></li> <li><b>between house and garage</b></li> <li>Floor covering (e.g. screed)</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Floor type (e.g. Block &amp; Beam)</li> </ul>	
<ul> <li>4. Exposed wall 1:</li> <li>Outer Skin (e.g. brick)</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Inner skin (e.g. Celcon solar block)</li> <li>Plasterboard on dabs</li> </ul>	
<ul> <li>5. Exposed Wall 2 e.g. between house and garage</li> <li>Outer Skin (e.g. brick)</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Inner skin (e.g. Celcon solar block)</li> <li>Plasterboard on dabs</li> </ul>	

<ul> <li>6. Main Roof 1</li> <li>Warm Roof / Cold Roof</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> </ul>			
<ul> <li>7. Other Roof (if ap</li> <li>Warm Roof / Cold Roof</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> </ul>	oplicable)		
8. Glazing: please tick	all the boxes that apply:		
	6mm	Double	PVCu
Air gap:	12mm	Triple	Timber
	16mm	Argon fill	Metal
	16mm +	Low E 'soft coat'	Low E 'hard coat'
Fully draughtstripped as required			
Please specify roof	ights if applicable		

9. Exter	nal doors:							
Front:	solid			half glazed		full	y glazed	
Side:	solid			half glazed		full	y glazed	
Rear:	solid			half glazed		full	y glazed	
10. Vent	ilation:							
Number of lo	ow energy extraction fans	:						
Number of s	tandard extraction fans:							
M	lechanical ventilation syst	em:		Y	es	) No 🔿		
Heat recovery system:				Y	es	) No 🔿		
11. Main heating system:								
Fuel:		Model:	Model: M					
	Combi boiler:			Yes No				
	% efficiency:		Floor m	nounted: Wall mounted:			ounted:	
	Radiators:			rfloor ting:				
Ground	I / Air Source heat pump:			Ye	esO	No		
				see section 18.				
12. Heat	ing control detai	IS: please	tick all th	ne boxes that ar	e app	licable.		
Programmer:				Zone control: other:				
Room stat:					L	oad compensator:		
	Thermostatic:					Interlock:		
	Radiator valves:							

13. S	econdary heating:				
Type:		Fuel:			Hetas Approved:
14. E	lectric tariff:				
Standard: ec			econo	omy 7:	10 hour tariff:
	24 hour tariff:				
	Other:				
15. H	ot water:				
	Is it from the centr	al heatin	g boiler:		Yes No
16. C	ylinder:				
Capacit	<b>y</b> :	(1	itres)	Insulation thicknes	ss: (mm)
17. L	ighting:				
Total nu	mber of standard light fittings:				
Total nu	imber of low 'E' lights:				
Total nu	mber of external lights:				
18. R	enewable Technology	<b>y</b> :			
Solar Tl	nermal (Hot water)				
Photovo	oltaics:				
Solar Tl	nermal (Hot water)				
Solar TI	nermal (Hot water)				

1. Is the property built in accordance to accredited construction details?	No Yes
<ul> <li>2. Ground Floor:</li> <li>Floor covering (e.g. screed)</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Floor type (e.g. Block &amp; Beam)</li> </ul>	
Please provide details of any proposed improvements	
<ul> <li>3. Exposed Upper Floor e.g.</li> <li>between house and garage</li> <li>Floor covering (e.g. screed)</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Floor type (e.g. Block &amp; Beam)</li> </ul>	
<ul> <li>4. Exposed wall 1:</li> <li>Outer Skin (e.g. brick)</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Inner skin (e.g. Celcon solar block)</li> <li>Plasterboard on dabs</li> </ul>	
Please provide details of any proposed improvements	

<ul> <li>5. Exposed Wall 2 e.g. between house and garage</li> <li>Outer Skin (e.g. brick)</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> <li>Inner skin (e.g. Celcon solar block)</li> <li>Plasterboard on dabs</li> </ul>	
<ul> <li>6. Main Roof 1</li> <li>Warm Roof / Cold Roof</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> </ul>	
Please provide details of any proposed improvements	
<ul> <li>7. Other Roof (if applicable)</li> <li>Warm Roof / Cold Roof</li> <li>Cavity</li> <li>Insulation type</li> <li>Insulation thickness</li> </ul>	
Please provide details of any proposed improvements	

8. Glazing:	8. Glazing: please tick all the boxes that apply:							
		6mm		Double		PVCu		
Air gap:		12mm		Triple		Timber		
		16mm		Argon fill		Metal		
		16mm +		Low E 'soft coat'		Low E 'hard coat'		
Fully draughtstripped as required			NoC	Yes 🔿				
Please specify rooflights if applicable								
Please give details of any existing windows to be replaced (size, location, etc.).								
If not shown on plan, please specify area (in m2) of all windows and that will be covered by the extension:								
9. External	doors:							
Front:		solid		half glazed		fully glazed		
Side:		solid		half glazed		fully glazed		
Rear:		solid		half glazed		fully glazed		
Fully draug	htstrippe	d as required			No(	⊖ Yes ⊖		
Please give deta replaced (size, lo		xisting windows to be ).						
If not shown on plan, please specify area (in m2) of all windows and that will be covered by the extension:								

10. Ven	tilation:						
Number of	low energy extraction fans:						
Number of standard extraction fans:							
Mechanical ventilation system:				Yes	) No ()		
	Heat recovery syste	em:		Yes	) No ()		
11. Mai	n heating system:						
Fuel:		Model:	Model: Manufacturer:				
Combi boiler:			Yes	) No ()			
% efficiency: Floor			Floor m	wall mounted:			
	Radiators:			erfloor ting:			
Groun	d / Air Source heat pump:			Yes	) No ()		
				see section 18.			
12. Hea	ting control detail	s: please	tick all th	ne boxes that are ap	plicable.		
	Programmer:			Zone control: other:			
	Room stat:			Load compensator:			
Thermostatic:				Interlock:			
	Radiator valves:						
13. Sec	ondary heating:			•			
Type:		Fuel:			Hetas A	pproved:	

14. Electric tariff:						
Standard:		econo	omy 7:		10 hour tariff:	
24 hour tariff:						
Other:						
15. Hot water:			1			
Is it from the cen	itral heati	ng boiler:		Yes	No	
16. Cylinder:			I			
Capacity:		(litres)	Insulation thicknes	s:		(mm)
17. Lighting:				I		
Total number of standard light fittings:						
Total number of low 'E' lights:						
Total number of external lights:						
18. Renewable Technolog	gy:					
Solar Thermal (Hot water)						
Photovoltaics:						
Solar Thermal (Hot water)						
Solar Thermal (Hot water)						

Thank you for completing the above form, please ensure that you also provide:

- Building Regulation floor plans, sections and elevations with dimensions and construction notes (scale 1:100, 1:50)
- Window schedule (if available)
- Site layout and location plan showing orientation

Should you require any assistance with this checklist please contact buildingcontrol@midsussex.gov.uk or phone on 01444 477570

When completed, please email to buildingcontrol@midsussex.gov.uk, or post to:

Building Control, Mid Sussex District Council, Oaklands Road, Haywards Heath, West Sussex, RH16 1SS.