



National Archives
Traveling Exhibits Service

Limited Facility Report

Limited security exhibitions need a minimal amount of environmental control, supervision, and art-handling experience. Requires a climate-controlled, limited-access display space with minimal temperature, humidity, and lighting controls.

Name of Institution: _____

Mailing Address: _____ Shipping Address: _____

Contact Person: _____ Title: _____

Phone #: _____ ext. _____ Email: _____

Institutional Information

Does your organization hold 501(c)3 status? Yes No

Gallery/Museum Open Hours: Mon _____ Tues _____ Wed _____ Thurs _____
(e.g. closed, 10am-5pm, 10am-7pm) Fri _____ Sat _____ Sun _____

Do you open/close seasonally? Yes No If yes, please explain: _____

Does your facility meet accessibility criteria of the Americans with Disabilities Act? Yes No

What is your annual attendance? _____

Type of Institution:

- | | | |
|--|---|--|
| <input type="checkbox"/> Museum: | <input type="checkbox"/> Cultural Institution: | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Art | <input type="checkbox"/> Archives | <input type="checkbox"/> Fair Building |
| <input type="checkbox"/> Natural History/Science | <input type="checkbox"/> Library | <input type="checkbox"/> Commercial/Retail |
| <input type="checkbox"/> History | <input type="checkbox"/> Community/Civic Center | (Specify): _____ |
| <input type="checkbox"/> College/University | <input type="checkbox"/> Religious Facility | <input type="checkbox"/> Other |
| <input type="checkbox"/> Historic House/Site | | (Specify): _____ |
| <input type="checkbox"/> Children's | | |
| <input type="checkbox"/> Other (Specify): _____ | | |

Facility Information

- Is your building/facility locked and secure after viewing hours? Yes No
- Does your facility have fire systems and fire protection devices according to local ordinances? Yes No
- Does your facility have an electronic security control system? Yes No
- Is your temporary exhibition gallery/space limited-access (no exterior doors)? Yes No
If no, please explain: _____
- Is your temporary exhibition gallery/space locked after public hours? Yes No
- Can you provide exhibition supervision by volunteer, receptionist, or guard during public hours? Yes No
- Size of your temporary exhibition gallery/space? Square Feet _____ Linear Feet _____
- On what floor of your building is your temporary exhibition gallery/space located? _____
- Do you have a freight or passenger elevator that can handle crates up to 600lbs? Yes No
- Do you have a climate-controlled, pest-free crate storage area? Yes No

Environmental Information

- Does your gallery have a temperature and humidity control system active at all times? Yes No
- Does your temporary exhibition gallery/space maintain a temperature between 68-72 degrees? Yes No
- Does your temporary exhibition gallery/space maintain relative humidity between 45-55%? Yes No
- Are all sources of sunlight in temporary exhibition gallery/space blocked by UV filters or shades? Yes No

What type of lighting system do you use in the temporary exhibition gallery/space? Check all that apply.

- | | | |
|---|--|--|
| <input type="checkbox"/> Artificial Light: | <input type="checkbox"/> Daylight Windows: | <input type="checkbox"/> Skylights: |
| <input type="checkbox"/> Fluorescent Lighting | <input type="checkbox"/> Shades or Draperies | <input type="checkbox"/> Shades or Draperies |
| <input type="checkbox"/> Fluorescent Lighting with UV Filters | <input type="checkbox"/> UV Filters | <input type="checkbox"/> UV Filters |
| <input type="checkbox"/> Incandescent Lights, Stationary | | |
| <input type="checkbox"/> Incandescent Lights, Track | | |
| <input type="checkbox"/> Halogen Lights, Stationary | | |
| <input type="checkbox"/> Halogen Lights, Track | | |

- Are you able to adjust the light levels in your temporary exhibition gallery/space? Yes No
- Do you allow eating and drinking in the temporary exhibition gallery/space or during packing/unpacking? Yes No
- Have you had any pest/insect problems in the building within the past 6 months? Yes No

Shipping and Handling Information

Who handles exhibition objects? Check all that apply.

- Trained Staff
- Professional
- Technical
- Clerical
- Volunteer Staff:
- Trained
- Untrained with trained supervision
- Other (specify): _____

Are you able to provide 3-4 people to assist in loading, unloading, installation and de-installation? Yes No

Do you have staff or volunteers able to handle exhibit crates up to 600 lbs in weight? Yes No

Do you have a raised loading dock? Yes No

If no, please explain your loading area: _____

If yes, can your loading dock accommodate a 53' tractor trailer? Yes No

Contact person for shipping and installation issues:

Name: _____ Title: _____

Phone #: _____ ext. _____ Email: _____

Please attach a building floorplan and photographs of your temporary exhibition gallery/space.

Name

Title

Signature

Date (mm/dd/yyyy)

Mail to: National Archives Traveling Exhibits Service
400 W. Pershing Road
Kansas City, MO 64108

---or---

Email to: NATES@nara.gov

Contact NATES at: 816.268.8088



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