

Cold-room or Cellar Cooling Selection

Company Details

Name: _____ Company: _____

Address: _____

Tel: _____ Fax: _____ Email: _____

Equipment selection

Installation type: _____

Temperatures

Ambient temp: _____ deg F or C

Floor temp: _____ deg F or C

Required room temp: _____ deg F or C

External Dimensions

Length: _____ ft or metres

Width: _____ ft or metres

Height: _____ ft or metres

Insulation

Type

Thickness

Wall _____

Ceiling _____

Floor _____

Product Type: _____

Input per day: _____ lbs or kg

Entering temp: _____ deg F or C

Cooling time: _____ hours

Air Changes: _____ light, normal or heavy

Number of Occupants: _____

Working time: _____ hours/day

Working time (Lights): _____ hours/day

Desired plant running time: _____ hours/day

Refrigerant: _____ type

Preferred number of coolers: _____

Preferred number of cond units: _____

Comments _____
