

NOVELAIRE TECHNOLOGIES

Quote Request Form

Project Name:				
Project Location:				
Customer Representative/Contact Info:				
Model:	Unit Type:	ERV?	Elevation:	ft
DH Regen Type:		Process Heating Type:		
	Supply	Regeneration	Exhaust	Outdoor
Airflow	min cfm max cfm	min cfm max cfm	min cfm max cfm	min cfm max cfm
Ext. Static Press "H2O	in. wc	in. wc	in. wc	in. wc
Filter Requirements				
Duct Locations				
Air Conditions	Summer	Winter	Shoulder	
Outside Air	°F	°F	°F	
Space Air	°F	°F	°F	
Supply Air	°F	°F	°F	
Dehumidification Control:				
Controlled Space Volume:	cubic feet		Air Changes/Hr	
Does the customer have specific air requirements?				
Utilities				
Voltage:		Gas:	Valve Mount:	
Hot Water	N/A	EWT	LWT	
Cold Water	N/A	% Prop. Glycol	% Ethyl. Glycol	
Steam	N/A	EWT	LWT	
		% Prop. Glycol	% Ethyl. Glycol	
		PSI		
Type of Installation				
Roof Top Curb Mount	Mechanical Room	Indoor Suspended	Outdoor Pad	Other
External Sensors	N/A	CO	CO2	NO2
Human/Machine Interface Requirements				Protocol
Building Management System	Yes	No		
Equipment Touch in Space	Yes	No		
Humidistat	Yes	No		
Local Control	Yes	No		
By Others	Yes	No		
Does this unit feed into an air handler?	Yes	No		
Local 120 Volt convenience outlet?	Yes	No		

Other Unit Notes: