

Customer Information:

Contact Name: _____
 Company: _____
 Address: _____
 City: _____ State: _____
 Zip: _____ Phone: _____
 Email: _____

Project Information:

Project Name: _____
 Project Location: _____
 Specifying Engineer: _____
 General Contractor: _____
 New or Existing Construction: _____
 Special Notes: _____

Project Type (select):

- Warehouse Manufacturing Residential Mission Critical
 Data Center Parking Garage Cold Storage Other _____

Riser #	Valve Room # (i.e. #1, #2, ...)	System Size (Gallons)	Supervisory Pressure (psi)	Air Maintenance Device Model # (if known)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

If there are multiple valve rooms, can all systems be supplied from a single nitrogen source?

Yes No N/A Comments: _____

Cold storage temp (if applicable): _____ °F or °C

Power Availability (check all that apply): Single Phase: 120V 240V Three Phase: 208V 480V

Existing Compressor: Yes No Model: # _____

Venting Devices (must select one, check both for alternate price):

Venting: Standard Automatic (PSV-D) Automatic with zone purity and pressure monitoring (AVC-6)

Accessories:

ILD-X In-Line Corrosion Detector: Single Zone One per Valve Room Percentage _____% All
 SGA-1 On-Line Gas Analyzer (with monitoring outputs): Yes No
 PHGA-1 Handheld Gas Analyzer (one included in base quote): # _____
 Annual Filter Maintenance Kit: # _____

Notes: _____

NOTE: Please provide specifications and drawings if available.