

Request For Quote

Name: _____

Company: _____

Street Address: _____

State/Province: _____

Postal Code: _____

Country: _____

Phone: _____

Fax: _____

Email: _____

Please fax this completed form to:

248 969 3401

You must include 3 of the 4 parameters for each Application you want quoted. We will not be able to give you useful information without them.

Fluid Circulated: _____

Equipment Type: _____

Installation Location: _____

System Details

APPLICATION PARAMETERS

	FLUID IN °	FLUID OUT °	GPM FLOW	BTU / HOUR
Application A				
Application B				
Application C				
Application D				

DESIGN AMBIENT

Dry Bulb Temp: _____

Wet Bulb Temp: _____

Elevation: _____

You can receive quotes for up to 4 different product applications with this form. To accurately quote an application you must enter 3 of 4 parameters.

Notes:
