



EMAIL COMPLETED FORM TO (matthew.r.mcnaair@jci.com) or fax to (866-406-9675 attention: Matt McNair)

HVAC REPLACEMENT EQUIPMENT FORM (RTU Units only) EMERGENCY? YES ___ NO ___

Store Number: _____ Zip/Postal Code: _____
 Address: _____ Site Contact: _____
 City: _____ Surveyor: _____
 State/Province: _____ Surveyor Phone Number: _____

*Does the site only have Split System/Residential or Window unit(s): (Y/N) ___ If Yes complete only Page 1
 *Is there a “decorative” enclosure surrounding any of the units (Yes/No) ___

EXISTING EQUIPMENT INFORMATION

	Unit # 1	Unit # 2	Unit # 3	Comments
Manufacturer				
Type - RTU, Cond, AHU, Heat Pump, Make-Up Air				
Model #				
Serial #				
Year Mfr (best guess)				
Tonnage				
Voltage 208/230-1, 208/230-3, 460-3,575-3				
Breaker Size				
BAS System (Y/N)				
T-stat (Y/N)				
Programmable (Y/N)				
Tstat # of Wires				
Power Exhaust (Y/N)				
Does New Unit need Power Exhaust				
Heat - Gas, LP, Electric Strip, Duct Furnace				
If gas- MBH output, If electric- KW/unit				
Supply air ducted - Bottom or Side				
Return air ducted - Bottom or Side				
Additional Options				
Original Curb or Curb Adapter				

ROOF CURB INFORMATION & MEASUREMENTS

	Unit #1	Unit #2	Unit #3	Comments
Is Existing Curb Original (Y/N)				
Is Existing Curb an Adapter (Y/N)				
New Curb-Adapter Measurements				

Contacts:

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