

## Cooling System Sizing Sheet

PLEASE PRINT THIS FORM, FILL IN THE INFORMATION AND **FAX IT TO 972-580-0277**

Cabinet Name/Number \_\_\_\_\_ Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Enclosure Dimensions: Height \_\_\_\_\_ inches

Width \_\_\_\_\_ inches

Depth \_\_\_\_\_ inches

External temperature: Now (F): \_\_\_\_\_

Internal temperature: Now (F): \_\_\_\_\_

Maximum external temperature possible: \_\_\_\_\_

Maximum internal temperature desired: \_\_\_\_\_

Heat load in watts: \_\_\_\_\_

Cabinet rating: NEMA 12 \_\_\_ NEMA 4 \_\_\_ NEMA 4X \_\_\_ Other \_\_\_\_\_

Class, Division and Group: \_\_\_\_\_

Cabinet vented? Yes \_\_\_ or No \_\_\_

Enclosure Fans? Yes \_\_\_ or No \_\_\_ If yes, size \_\_\_ CFM \_\_\_ Watts \_\_\_ BTUH \_\_\_

Location of cabinet: Inside \_\_\_ or Outside \_\_\_

If outside, is cabinet in direct sunlight? Yes \_\_\_ No \_\_\_

If in direct sunlight, what is the enclosure's color? \_\_\_\_\_

Any heat source close to panel? \_\_\_\_\_

Air conditioner mount: Top (roof mount) \_\_\_ Vertical \_\_\_

Free standing? \_\_\_ Wall mounted? \_\_\_ Details \_\_\_\_\_

Cabinet insulated? Yes \_\_\_ No \_\_\_ If yes, how thick? \_\_\_ 6 sides? \_\_\_

Are there any clearance issues? \_\_\_\_\_

Voltage available: 120 volts @ 60 hz. \_\_\_ 230 volts @ 60 hz. \_\_\_ 220 volts @ 50 hz. \_\_\_

OTHER ISSUES REQUIRED TO ADDRESS: \_\_\_\_\_

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Customer signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_

**NOTE: Providing the above information will allow Thermal Edge Inc., Inc. to guarantee the performance of our air conditioning systems.**