

Project Request

Please provide the following information

Contact Details

Your Position: Engineer / Designer Energy Consultant Architect
 General Contractor Mechanical Contractor Project Owner
 Other – please specify:

Company Name:

Contact Name:
(Surname / Last Name) (First Name) (Initial)

Address:
(Street Name / Apartment Number / Unit Number)

City: State/Province/Region:
Country: Postal / Zip Code:
Telephone number: Mobile / Cell:
E-mail address: Website:

Project Overview

Project Name:

Project Location:

Address:
(Street Name / Apartment Number / Unit Number)

City: State/Province/Region:
Country: Postal / Zip Code:

Project Type: New Construction Retrofit

Building Type: Residential MURB Office Commercial
 Industrial Institutional District Energy Other

Bore field size/shape: or
(m² – square meters) (ft² – square feet) (description shape, e.g. rectangle, U-form)

Bore field location: Below construction Next to the construction

If New Construction – Planned project start date:

For **New Construction** turn to **page 2** and fill in all information.
For **Retrofit Applications** turn to **page 3** and fill in all information.

Project Particulars – New Construction

Approximate date of construction:			
Floor space of Building requiring conditioning:		or	
	(m ² – square meters)		(ft ² – square feet)
Annual Heating Requirement (if known):		or	
	(kWh)		(kBtu)
Annual Cooling Requirement (if known):		or	
	(kWh)		(kBtu)
Peak Heating Demand (if known):		or	
	(kW)		(kBtu / hour)
Peak Cooling Demand (if known):		or	
	(kW)		(kBtu / hour)
Capacity of Heat pump (if known):		or	
	(kW)		(kBtu / hour)

Please check the following:

Is the building requirement for heating only?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Is the building requirement for cooling only?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are both, heating and cooling required?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes, are you using active cooling (engaging the heat pump)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Or are you using passive cooling (cooling with circulating pump).	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Is there a Domestic Hot Water (DHW) requirement? Yes No

If yes, total peak hourly requirement of DHW (60 °C / 140 °F):

	or	
(L/h)		(US Gal/min)

Has an Energy Model been completed?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes, is the Energy Model hourly or monthly?	<input type="checkbox"/>	Hourly	<input type="checkbox"/>	Monthly
Are project site plans available for review?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are mechanical drawings available for review?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are architectural drawings available for review?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Have heat pumps been selected for the project?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes, please provide make, model and specifications.				

Are additional features integrated into the design such as:

<input type="checkbox"/> Snow melt / prevention	<input type="checkbox"/> Swimming Pool Heating	<input type="checkbox"/> Ice Storage
<input type="checkbox"/> Other – please specify:		

Please forward all relevant documents and drawings for review – thank you.

Project Particulars – Retrofit Applications

Floor space of Building requiring conditioning:	<input style="width: 100%;" type="text"/>	or	<input style="width: 100%;" type="text"/>
	(m ² – square meters)		(ft ² – square feet)
Annual Heating Requirement (if known):	<input style="width: 100%;" type="text"/>	or	<input style="width: 100%;" type="text"/>
	(kWh)		(kBtu)
Annual Cooling Requirement (if known):	<input style="width: 100%;" type="text"/>	or	<input style="width: 100%;" type="text"/>
	(kWh)		(kBtu)
Peak Heating Demand (if known):	<input style="width: 100%;" type="text"/>	or	<input style="width: 100%;" type="text"/>
	(kW)		(kBtu / hour)
Peak Cooling Demand (if known):	<input style="width: 100%;" type="text"/>	or	<input style="width: 100%;" type="text"/>
	(kW)		(kBtu / hour)
Capacity of Heat pump (if known):	<input style="width: 100%;" type="text"/>	or	<input style="width: 100%;" type="text"/>
	(kW)		(kBtu / hour)

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Or are you using passive cooling (cooling with circulating pump)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Is there a Domestic Hot Water (DHW) requirement? Yes No

If yes, total peak hourly requirement of DHW (60 °C / 140 °F):

<input style="width: 100%;" type="text"/>	or	<input style="width: 100%;" type="text"/>
(L/h)		(US Gal/min)

Has an Energy Audit or review been completed?
 If yes, please provide a copy. Yes No

Have any upgrades to the building been completed? Yes No

If yes, what type of upgrades were completed?

Glazing
 Insulation
 Building Envelop
 Mechanical
 Other

List years in which upgrades were completed:

Please provide relevant documents – drawings and specifications – of the heating system and equipment currently in use in the building.

Please provide relevant documents – drawings and specifications – of the cooling system and equipment currently in use in the building.

Please provide relevant documents – drawings and specifications – of the DHW system and equipment currently in use in the building.