

BUILDING HEAT LOSS / GAIN SURVEY



Company Name: _____
Address: _____
Date: _____
Requested by: _____
Contact Phone # _____

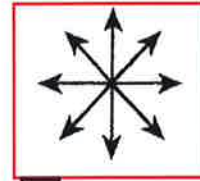
**Fill out the following information completely,
In order to insure an accurate heat loss.**

Indoor temperature desired: _____
Outdoor winter design operating temperature: _____

BUILDING CONSTRUCTION

Walls:	Insulation:	
<input type="checkbox"/> 8" Concrete Block	Floor: <input type="checkbox"/> Insulated <input type="checkbox"/> Not Insulated	
<input type="checkbox"/> 12" Concrete Block	Insulation Type _____	
<input type="checkbox"/> 8" Poured Concrete	Thickness: _____	
<input type="checkbox"/> 12" Poured Concrete		
<input type="checkbox"/> Metal	Walls: <input type="checkbox"/> Insulated <input type="checkbox"/> Not Insulated	
<input type="checkbox"/> Wood	Insulation Type _____	
	Thickness: _____	
Roof:	Ceiling / Roof: <input type="checkbox"/> Insulated <input type="checkbox"/> Not Insulated	
<input type="checkbox"/> Concrete	Insulation Type _____	
<input type="checkbox"/> Metal	Thickness: _____	
<input type="checkbox"/> Wood	Roof Color: _____	
Ceiling:	Entry Doors: **	Overhead Doors: **
<input type="checkbox"/> Open to Roof	<input type="checkbox"/> 1" Wood	Height: _____
<input type="checkbox"/> Attic Above	<input type="checkbox"/> 2" Wood	Width: _____
	<input type="checkbox"/> Metal - Uninsulated	Quantity: _____
Floor:	<input type="checkbox"/> Metal - Insulated	
<input type="checkbox"/> Soil	Windows: **	
<input type="checkbox"/> Concrete	<input type="checkbox"/> Single pane	**Show ALL window and door size and location on page two.
<input type="checkbox"/> Wood	<input type="checkbox"/> Double pane	
	<input type="checkbox"/> Triple pane	
	<input type="checkbox"/> Protected*	<input type="checkbox"/> Not Protected
	*shades, blinds, drapes	

INDICATE NORTH



Please complete this form with as much detail as possible.
Draw in all windows, doors and other construction details.
*Enter dimensions where indicated by asterisk.

