



AgRadiant.com Web Site Heating Survey

Please Print

Your Name: _____ Company: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Building Use: (Farm shop, machine shop, etc.) _____

Length: _____ Width: _____ Height: _____

All four walls exposed? (Check Yes or No): Yes No (If no, please show inside wall on sketch)

Type of Wall Construction: _____

Thickness and type of insulation: _____

Type of Roof Construction: _____

Thickness and type of insulation: _____

Skylights or Windows, Size: _____ #of Panes: _____

Please state on size line the total sq. Feet

Overhead & Sliding Doors: _____

Show whether slider or overhead, exact location on sketch, including height & width

Floor Construction: _____

If Exhaust Fan's are used on regular basis, list total CFM: _____

Inside building temperature: _____

Inside temperature would be the thermostat setting you would like to maintain during the colder outside temp

Fuel Source (Check one): Natural Gas Propane

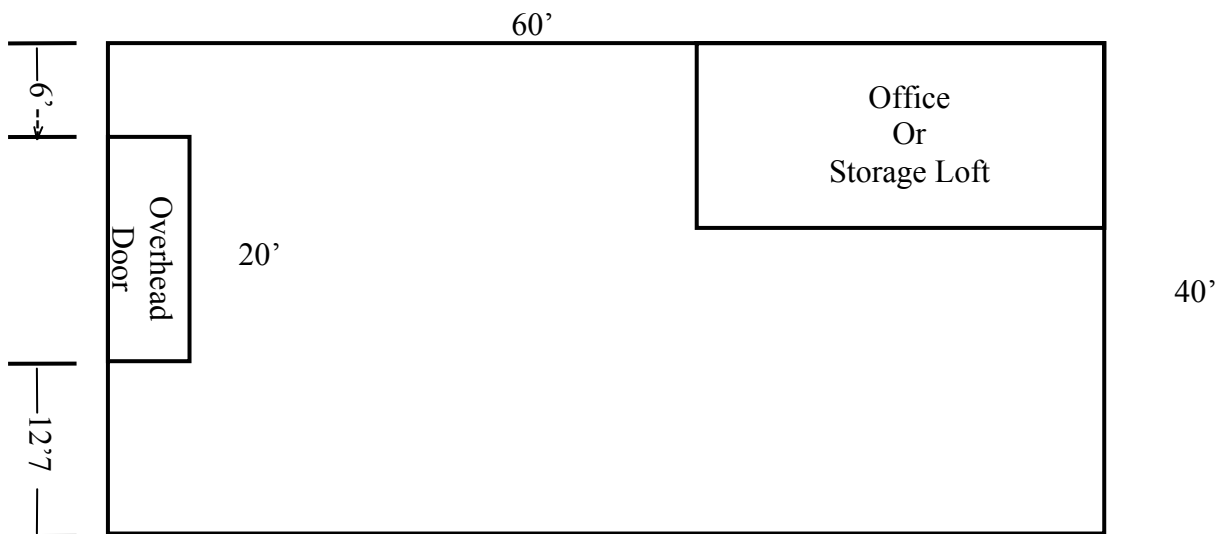
After completing information, Fax both pages to (800) 423-4125.



Heating Survey

Name: _____ Phone Number: _____

Please show exact location of large doors: identify the direction of at least one wall the building is facing. Sample Below.



Sketch Area: