

Survey Layout Date: _____

To: *confesor.badillo@us-egi.com*

From: _____

Company: _____

Phone # _____

Email: _____



4560 West 160th Street
Cleveland, OH 44135
PH: 855-579-9157
Fax: 800-321-0552

Integrator Name: _____

Project City, State: _____

BUILDING DATA : Type of House: Front / Center / Whole (Circle One)

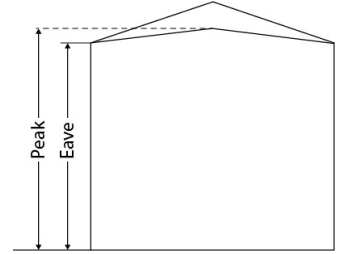
Preferred Fuel: Natural Gas Propane House BTU Requirements: _____

Building Length: _____ Building Width: _____

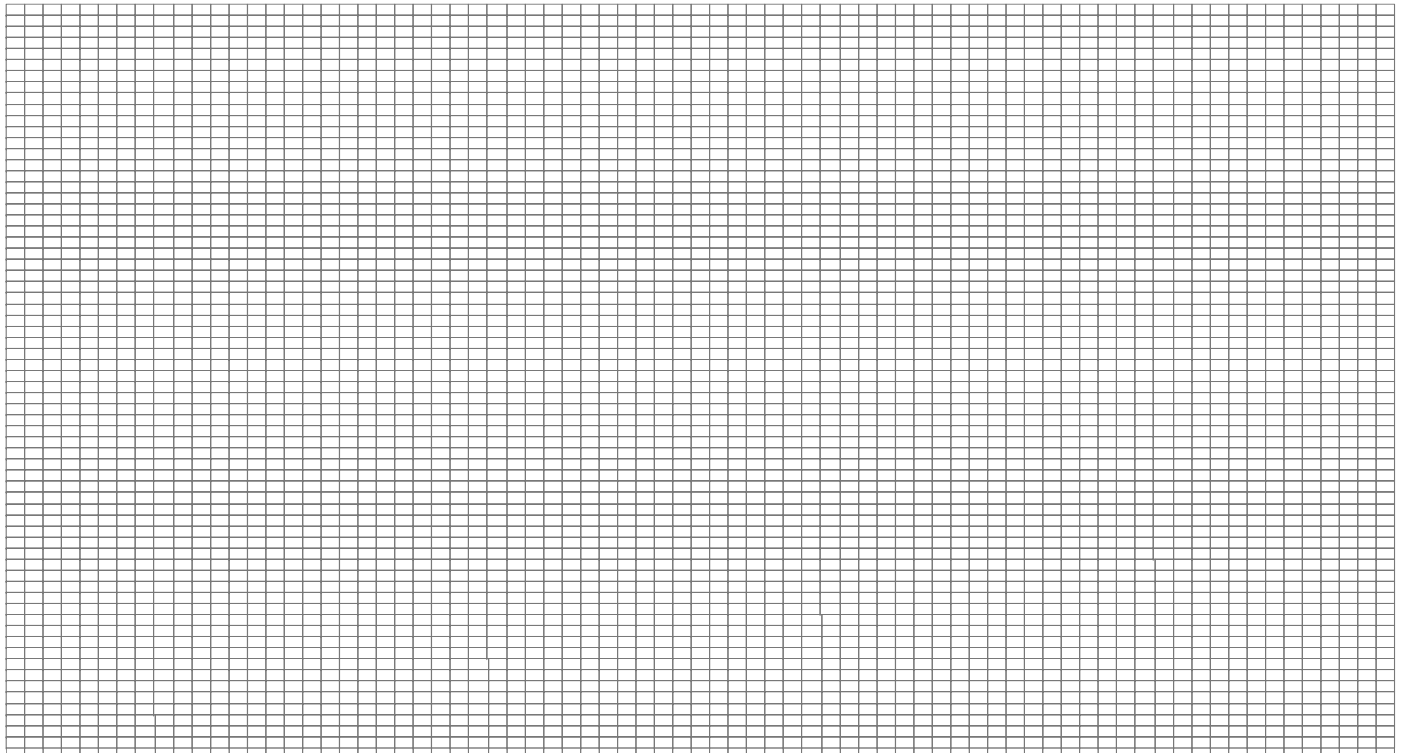
Eave/Fixed Ceiling Ht: _____ Peak Ceiling Ht: _____

Brood (Front House or Center House): Length _____

Gap Distance of Heaters _____ Feet from Center _____



Please Sketch Building Below. Show All Pertinent Dimensions



Please note any additional requirements or relevant information: