



# OPERATOR CAB QUESTIONNAIRE

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www.surrtec.com

COMPANY _____	PROJECT NAME _____
NAME _____	DATE _____
EMAIL _____	PHONE _____
WEBSITE _____	FAX _____

## GENERAL SPECIFICATIONS

EXTERIOR DIMENSIONS: _____ L _____ W _____ H	INDOOR <input type="checkbox"/> OUTDOOR <input type="checkbox"/>	MIN. TEMP.: _____ C / F MAX. TEMP.: _____ C / F
ENVIRONMENTAL CONDITIONS: _____		
SOUND ATTENUATION: _____		
BASE FRAME: 3" <input type="checkbox"/> 4" <input type="checkbox"/> OTHER _____	WIREWAYS IN BASE: <input type="checkbox"/>	QTY: _____
WALLS: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2" (R9) 3" (R13) 4" (R17) OTHER _____	WIREWAYS	
ROOF: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
VIBRATION ISOLATION: RUBBER PAD <input type="checkbox"/>	SPRING MNT <input type="checkbox"/>	AIR BAG MNT <input type="checkbox"/>
DOORS (QTY): _____	FREEZER STYLE HARDWARE <input type="checkbox"/>	PANIC STYLE HARDWARE <input type="checkbox"/> DOOR CLOSER <input type="checkbox"/>

## GLAZING

SLOPED FRONT <input type="checkbox"/>	SLOPED SIDE <input type="checkbox"/>		
LAMINATED SAFETY GLASS <input type="checkbox"/>	TINT: NONE <input type="checkbox"/>	SINGLE GLAZED <input type="checkbox"/>	
LEXAN <input type="checkbox"/>	REGULAR <input type="checkbox"/>	DOUBLE GLAZED <input type="checkbox"/>	
OTHER _____ <input type="checkbox"/>	OTHER: _____ <input type="checkbox"/>	SLIDING WINDOWS <input type="checkbox"/>	

## HVAC

STANDARD HEATING <input type="checkbox"/>	VOLTAGE: _____ PHASE: _____ HERTZ: _____	THERMOSTAT: BUILT-IN <input type="checkbox"/> / WALL <input type="checkbox"/>
	FAN FORCED <input type="checkbox"/> kW: _____ BASEBOARD <input type="checkbox"/> kW: _____	
AIR CONDITIONER <input type="checkbox"/>	COOLING BTU: _____ VOLTAGE: _____ PHASE: _____	THERMOSTAT: BUILT-IN <input type="checkbox"/> / WALL <input type="checkbox"/>
	HEATING kW: _____	
LOCATION: WALL <input type="checkbox"/>	ROOF <input type="checkbox"/>	DUCTING <input type="checkbox"/>

## ELECTRICAL

DISTRIBUTION PANEL: 12 CCT <input type="checkbox"/> 24 CCT <input type="checkbox"/> 42 CCT <input type="checkbox"/>	LIGHTING: OMNI <input type="checkbox"/> QTY: _____	RECEPTACLES: UTILITY <input type="checkbox"/> QTY: _____ ISOLATED GRND <input type="checkbox"/> QTY: _____ GFI <input type="checkbox"/> QTY: _____
MAIN BREAKER: 60A <input type="checkbox"/> 100A <input type="checkbox"/> OTHER <input type="checkbox"/> _____	FLOURESCENT <input type="checkbox"/> QTY: _____	
VOLTAGE _____ PHASE _____ WIRE _____	2 x 32W <input type="checkbox"/> 4 x 32W <input type="checkbox"/>	

### ADDITIONAL OPTIONS:

PLC <input type="checkbox"/>	SURRTEC SUPPLY <input type="checkbox"/>	INSTALL ONLY <input type="checkbox"/>
COMMENTS: _____		
MCC, VFD, SWITCH GEAR <input type="checkbox"/>	SURRTEC SUPPLY <input type="checkbox"/>	INSTALL ONLY <input type="checkbox"/>
COMMENTS: _____		

