

						DISE	1 KUUI	VI SUKVET								
JOB NAME:	Contact name:															
Dealer:																
Contact name:								Decision maker:								
Position/Title:								Position/Title:								
Phone:	Fax:						Phone:				Fa	ax:				
Email:									Email:							
Address:									.							
City:									State:		Zip					
Prepared by:							group:			_	Email	:				
ON SITE INFORMATION																
Ceiling height:				Door	way h	eight:			Ais	le width	:					
NOTE:		Verify how unit is received and moved into room. Measure elevator with doors closed.														
	LARGEST SECTION SITE CAN ACCOMMODATE															
Floor condition:	Level					Sloped				e of Large	est ware	washe	d			_
Meals per day:				#		erators:	ration per	day:								
					E.	XISTING	UNIT	INFORMAT	ION							
Manufacturer:						N	lodel:			Overall length:						
										ent colla						
Direction of unit:	 			I. 5		Pre-wash tank:		Vac	No	centerline: Blower/Dryer unit:		_		[П	NI-
Direction of unit:		R-L		L-R	,	Pre-wasn	tank:	Yes Size:	No	DIOW	er/Dryei	unit:	'	es		No
Electrical supply:					Total amps:			Size.		# Electrical connections			_ :		<u> </u>	
Circuit Breakers:													<u>- </u>			
Tank heat type:						Booster heat		FI	ectric	40°	70°		Ste	am		
Incoming H ₂ O °F			_	IE STI				booster near			Recover	_	Yes			No
	°F IF STEAM PSI: Installation Quotation Requ								Heat	Necover	y.					
Pieces Per Hour:									MATION							
lancaria Matau Tana					WAIL			ON INFOR			.					
Incoming Water Temperature				°F Existing Ventila					Load Er			Unload I				
Incoming Water Pressure: PHOTOGRAPH MACHINE GAUGES F			 					uctwork CFM:		Load Er			Unload I			
												KIPS I	O ESTIIV	IAIE		
WATER HARDNESS	.РПО	TUGKAF	² П Е/	KHAU						o if PUSS	IDLE.					
					Cŀ	HAMPIC	ON REC	OMMENDA	TION							
Model:										Overall length:						
Direction of unit:						-wash tan	ash tank size:			Blower/Dryer: Yes						No
Electrical supply:							_	# Electrical connections:								
Tank heat type:								er heat:				Stear		<u> </u>		
Heat Recovery:								24" 29" Tank I		Tank Ler	ngth(Flig	tht):	4' (5'	8'	
Special Instructions:																
						INFOR	RMATIC	ON REQUIRI	ED							
Specifics Needed:	Quotation Spe							ecifications				rawings	5			
Send to:							Customer Other:			ther:						
Date Needed:		•														
					А	UTHOR	RIZED S	ERVICE AGE	NCY _							
ASA:									t name:							
Phone:	Fax:						Email address:									
Ship address:										1						
Silip address:				ı												
City:									State:			7	ip:			