Edwards Engineering
60 Years of Excellence

Print Form

Chiller Solutions LLC
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Industrial Process Chiller Request for Quotation

Company _____

Name _____ Date _____

Address _____ Office Number _____

_____ Cell Number _____

City _____ Fax Number _____

State/ Province _____ Zip/ Postal Code _____ Email _____

Unit Specification

○ New

○ Replacement: Model _____

Serial # _____

Tpe/Application

○ Ind/Mach Tool ○ Plastics

○ Food/Pharm ○ Elec/Semicon

Desired Location

☐ Indoors

☐ Outdoors

Condenser

☐ Air Cooled

☐ Water Cooled

☐ Tower Water

	Yes	No
Reservoir Tank	○	○
Integrated Pump Assembly	○	○
Remote Electrical Panel	○	○
Bag or Cartridge Fluid Filter	○	○
Air Filter	○	○
HEPA Filter	○	○

Electrical _____V HZ _____ Phase _____

Heat Load (Idle) _____ ○ k BTUH ○ kW/H

Heat Load (Full Load) _____ ○ k BTUH ○ kW/H

Refrigerant to Be Used _____

Fluid Type

○ Water /Glycol Mix _____ _____ ○ Propylene ○ Ethylene

○ Water Soluable _____ Brand _____ Model _____ SSU

○ Hydraulic Fluid _____ Brand _____ Model _____ SSU

○ Other (describe) _____

Description of Application - Comments & Requests

Desired Chiller Fluid Leaving Temp _____

Chiller Fluid Returning Temp _____

Ambient Temp (ºF)

Min: _____

Max: _____

Desired Flow Rate _____ ○ GPM ○ LPM

Pressure Drop _____ ○ FT ○ PSI ○ Bar

Print & Fax Form