



## Ventilation Equipment (MUA) Quote Form

Please complete and return this form to your local branch or email it to [commercial@munchsupply.com](mailto:commercial@munchsupply.com).  
If your application requires something more custom or special, please add items to the notes section at the end or call us directly at (815) 205-5025.

Date: \_\_\_\_\_ Company name: \_\_\_\_\_ Company contact: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone (main): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

Project name: \_\_\_\_\_ Project location: \_\_\_\_\_

Unit location\*:  Indoor  Outdoor

Cabinet configuration/Discharge orientation\*:

- Horizontal / Horizontal
- Horizontal / Vertical (Down)
- Horizontal / Vertical (Up)
- Vertical / Horizontal
- Vertical / Vertical (Up)

Unit mounting\*:

- Provide perimeter curb
- Mounted on curb (no curb needed)
- Mounted on rails (no curb needed)
- Provide unit stand (vertical units only)
- Other: \_\_\_\_\_

Voltage/phase\*:  120/1  208/1  230/1  208/3  230/3  460/3

Required airflow (CFM)\*: \_\_\_\_\_

External static pressure requirement in inches WC (ESP)\*: \_\_\_\_\_

Do you need a VFD?\*:  Yes  No If yes, please describe how the fan should be controlled: \_\_\_\_\_

Heat Source\*:

- Indirect fired
- Direct fired (not allowed in residential applications)
- Electric resistive heat
- Hot water
- Steam
- None (cooling only unit or air handler only)
- Other: \_\_\_\_\_

Please enter the winter design temperature in degrees F\*: \_\_\_\_\_  
(i.e. the coldest temperature expected to hit the heating source or X for units without heat in degrees F; ex. -10)

Please enter the requested heat size (or X for units without heat)\*: \_\_\_\_\_  
(ex. 400 MBH or 90 degree temperature rise or 120 kW)

Heating Controls\*:

- Modulating - Discharge Temperature
- Two-Stage (Indirect Fired/Electric Only) - Discharge Temperature
- By others
- None (for units without heat)
- Other: \_\_\_\_\_

\*Required information.

## Ventilation Equipment (MUA) Quote Request Form continued

Space Override Required\*:  Yes  No Please add any specific heating requirements: \_\_\_\_\_

Cooling Source\*:

- None
- DX (Packaged)
- DX (Split with remote condenser)
- DX (Split with remote condenser by others)
- Chilled Water
- Other: \_\_\_\_\_

Please enter the summer design temperature in degrees F\*: \_\_\_\_\_  
(i.e. the warmest temperature expected to hit the cooling source (or X for units without cooling; ex. 91/74))

Please enter the requested cooling capacity (or X for units without cooling)\*: \_\_\_\_\_  
ex. 20 tons or 240 MBH or specify leaving air temperature

Reheat\*:

- None
- On/Off - Hot Gas DX
- Modulating - Hot Gas DX
- Hot Water or Steam Coil in Reheat Position
- Other: \_\_\_\_\_

Please add any specific cooling of humidity requirements: \_\_\_\_\_

Dampers\*:

- No Dampers
- On/Off 100% outside air damper
- Modulating OA/RA dampers - maintain building pressurization
- Modulating OA/RA dampers - maintain building pressurization with minimum OA position
- Modulating OA/RA dampers - potentiometer position control
- Two-position OA/RA dampers
- Three -position OA/RA dampers
- Multiple position OA/RA dampers based on multiple external contact logic control
- Other: \_\_\_\_\_

Please add any specific damper control requirements: \_\_\_\_\_

Building Management System Integration\*:

- None
- BACnet
- Lonworks
- N2 (JCI)
- Modbus
- Other: \_\_\_\_\_

Please add any other options, notes, or requirements you will need or which may be shown in the schedule notes or specifications. Please do not assume that we will include anything—if you want it, please let us know (or X for nothing)\*:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### For internal use only

Date: \_\_\_\_\_ Employee name: \_\_\_\_\_  
Company account #: \_\_\_\_\_ Comments: \_\_\_\_\_