



Ultravation, Inc.

Ultraviolet Technology

218 Jones Drive • P.O. Box 234

Brandon, Vermont 05733 USA

802 247 0034

fax 802 247 0033

toll free 1-866-468-8247

ULTRAVIOLET DISINFECTION INFORMATION SHEET

PROJECT (SITE) NAME: _____
CONTACT NAME: _____
CONTACT PHONE #: _____
CONTACT FAX #: _____

**% REQUIRED DISINFECTION
USING SINGLE PASS:**
90%+
80%-90%
70%-80%
60%-70%
50%-60%
other _____%

TYPE OF FILTERS BEING USED:

AIR HANDLER INFORMATION

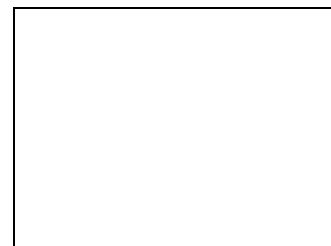
PACKAGE SYSTEM: YES / NO (Please circle one) CFM: _____
AIR HANDLER MAKE: _____ COIL WIDTH: _____
AIR HANDLER MODEL: _____ COIL HEIGHT: _____
TONNAGE: _____

DISTANCE FROM COIL TO WALL OR NEAREST OBSTRUCTION: _____ -

DUCT WORK INFORMATION

PLEASE SKETCH IN DUCT WORK DIMENSIONS AND MARK AN "X" ON ANY SIDES THAT HAVE OBSTRUCTIONS. (DEPENDING ON THE DUCT SIZE, CHANGING A LAMP COULD REQUIRE UP TO 22" OF SERVICE AREA)

DUCT HEIGHT:



DUCT WIDTH:

LENGTH OF USABLE DUCT: _____

IF DUCT WORK CHANGES SIZES PLEASE INDICATE NEW SIZES AND LENGTHS. ONLY DUCT THAT IS REQUIRED TO MEET DISINFECTION WILL BE USED.