



Walk-In Cooler / Freezer Load Calculation Information Form

To obtain a quote from Crescent Parts & Equipment Company, please provide the required information and submit a copy to our support team.

Date: _____ Dealer Name: _____

Project Name: _____ Contact Name: _____

Description: _____ Phone: _____ Fax: _____

Quantity Needed: _____ Estimated Installation Date: _____

Size: _____ x _____ x _____ Indoor or Outdoor Application: _____
Width Length Height Desired Box Temperature: _____ °F

Insulation Thickness and Type: Walls: _____ " of _____ insulation
(Default is 4" of Urethane Foam) Ceiling: _____ " of _____ insulation
Floor: _____ " of _____ insulation

Temperature outside each wall: Wall 1: _____ °F Wall 2: _____ °F Wall 3: _____ °F Wall 4: _____ °F

Temperature outside of ceiling: _____ °F Door (s) located on wall number (s): _____

Product being stored: _____ Entering Product Temperature: _____ °F

Pounds of product per hour or per day: _____ Final Product Temperature: _____ °F
(specify hour or day) Pull down Time (usually 24 hours): _____

Number of Doors: _____ Size of Doors: _____

Type of Doors (service doors, glass doors, dock doors etc.): _____
(Dock doors are assumed to be open to ambient)

Lighting (low intensity lighting = 1 watt per square foot): _____ Number of People: _____

Box Usage (Average, Heavy or Extra Heavy): _____ Number of Forklifts: _____
(Default is heavy : 2 x ASHRAE) Other Machinery or Motors: _____

E Indoor or Outdoor Condensing Unit (Default is Outdoor): _____ Refrigerant: _____

Q Condensing Unit Compressor Type (Semi-hermetic, Hermetic, Scroll): _____ Qty: _____

U Condensing Unit Ambient (Default is 95° F): _____ °F Unit Voltage and Phase: _____

I Evaporator Style Preference (Default based on application): _____ Qty: _____

P Coil Voltage and Phase: _____ Evaporator Defrost Type (Air or Electric): _____

M Accessories Requested: _____

E Additional Comments: _____

N _____

T _____

D _____

A _____

T _____

A _____