

## **Enquiry Form**

**Title: Acoustic Enclosure** 

Customer Details:									
Company Name :									
Address									
Post Code									
Telephone no.					Fax no.				
Contact Person					Designation				
Telephone / Mob. No.					ail				
Required data for Acoustic Enclosure Design									
Project /Reference									
Service					Equipment for which Enclosure is required				
Room Dimension	W x L x H meter			No	No. of Equipments				
Engine Make					gine Mode				
Engine Rating					GA Drawing Layout of Equipment				
Ventilation Requirement	Yes / No.				Heat Rejection (kW)				
Air born Noise of the Equipment, Lp (dBA) @ 1 m	Frequency (Hz)	63	125	250	500	1K	2K	4K	8K
	Sound pressure Level (Lp)								
Acoustic Performance Required (dBA)									
Additional Requirement	Vision Window : Size x Quantity								
	Single Door : Size x Quantity								
	Double Door : Size x Quantity								
	Enclosure Finish & Colour								
Specific Instructions									
Please fill in as much information as possible to give you our best Quotation									