



IDF and Placement Options Form

In order to enter P.O.'s and guarantee delivery dates, a technically accurate and complete IDF is required.

The review and acceptance of the information on the IDF by Armstrong:

1. Approves the order for processing which triggers an e-mail confirmation.
2. Indicates that Hamilton Engineering and AHWG supports you by endorsing the application.
3. Initiates the warranty.
4. Delivers a complete, Hamilton Engineering and AHWG supported performance guarantee to the final user of the product.
5. Drives the relevant point of specification/influence, point of installation and point of order financial allocation if appropriate.

Section 1 - Ordering Processing/Tracking Detail:

Point of Order / Sold To: _____ (eg: ABC Mechanical)

City: _____ State: _____ Rep Firm: _____

Point of Installation: _____ (eg: Heinz Ketchup)

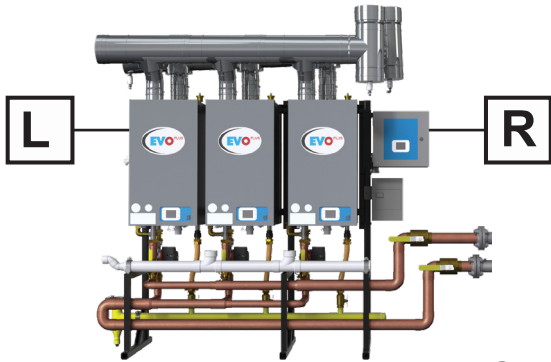
City: _____ State: _____ Rep Firm: _____

Point of Specification: _____ (eg: DEF Consulting Engineers)

City: _____ State: _____ Rep Firm: _____

Other Influence: _____ (eg: Source of Recommendation)

EVO .2/.3 Water Heater Placement Options



EVO Model: _____ .2 .3
 1 2 3 4 5 6 7 8

System Connections

Tank Location: L R New Existing } Distance (TEF): _____
 Pipe Diameter: _____

CWIS: No Yes } Building Recirc Line Laundry w/Recirc
 No Building Recirc Line Laundry wo /Recirc

Gas Connections: L R Gas Type: NG LP

Hamilton Supplied Gas Regulator: Y N Incoming Gas Pressure: _____ WC PSI

Condensate Drain Connection: L R Regulator type: Vented Ventless

Electrical Panel & Cascade Box: L R Transformer Ordered: Y N Voltage: _____

Common Exhaust Vent Manifold: L R Horiz. Length (ft.) _____ Vert. Length (ft.) _____ 90° Elbows _____ 45° Elbows _____ Tees _____

Common Intake Vent Manifold: L R Room Air Length (ft.) _____ 90° Elbows _____ 45° Elbows _____ Tees _____

Venting Manifold Termination: Horizontal Vertical Venting Material: Stainless Steel PVC

External Communication Options: None Protonode* Protocol _____ Router _____

**NOTE: If protonode is selected, Protocol must be completed.*

Altitude: At what elevation will this system be installed? _____ ft.

Manual High Limit Setpoint _____ °F

Maximum Operating Temperature: _____ **City Water Pressure:** _____

Reports Required: ASME (LIT CG500) CSD-1 (LIT CSD1U1)

Note: If water temperature setpoint will be over 120°F, a water analysis is required.

Desired temperature exceeds 160°F; Order conversion package CNV 8913. (May also require CNV 74274)

Additional Notes and Special Parameters :

Distributor: _____ **Project:** _____ **Purchase Order #:** _____
Signed: _____ **Date:** _____ **Quote Builder #:** _____