JBW HVAC ORDER FORM

|  |  |
| --- | --- |
| CUSTOMER NAME: |  |
| ADDRESS: |  |
| PHONE NUMBER: |  |
| DATE: |  |
| CITY: |  |
| STATE: |  |
| ZIP CODE: |  |

|  |  |
| --- | --- |
| CONTRACTOR NAME: |  |
| INSTALLER NAME: |  |
| PHONE NUMBER: |  |
| DATE INSTALLED: |  |
| SQUARE FOOTAGE (FOR CONDITION AREA): |  |
| PERMIT NUMBER: |  |
| ZIP CODE: |  |

HVAC SYSTEM INFORMATION

ALL INFORMATION ARE REQUIRED AS APPLICABLE

|  |  |
| --- | --- |
| TYPES OF SYSTEM INSTALLED: |  |
| MANUFACTURER: |  |
| OUTDOOR MODEL #: |  |
| OUTDOOR SERIAL #: |  |
| INDOOR MODEL #: |  |
| INDOOR SERIAL #: |  |
| AHRI REFERENCE NUMBER: |  |
| TOTAL CAPACITY (BTUH): |  |
| SEER: |  |
| HSPF: |  |

Note: After filling up this form please send this to our Gmail account (jbwemailtest@gmail.com)