COMPASS EQUIPMENT DATA FORM for WATER HEATER

Data entry completed __________
Data entry by __________

COMPASS Equipment Number ____________________________ (To be provided by U of M Planner)

Above section for University of Minnesota use only

All fields below this line to be completed by knowledgeable equipment supplier, contractor, architect, engineer or FM Maintenance staff and returned to the designated University of MN Project Manager or FM Planner

<table>
<thead>
<tr>
<th>TYPE:</th>
<th>Electric</th>
<th>Natural Gas</th>
<th>Steam (Converter)</th>
</tr>
</thead>
</table>

Architecture Eqpt No: ____________________________ (from construction drawings)

Manufacturer: Mfr Name ____________________________
Model No. __________________ Serial No. ____________

Location: Building ________________________________
Floor _______________ Room # _______________

Equipment Serves (Identify building area(s) i.e. floors or rooms, and interlocked equipment)
______________________________________________________________________________
______________________________________________________________________________

Warranty Information:
Vendor __________________________________________

Warranty Start Date _______________ Warranty Expiration Date _______________

Vendor Contact:
Name __________________________ Phone ____________

EQUIPMENT SPECIFICATIONS

<table>
<thead>
<tr>
<th>LINE</th>
<th>SPEC_TYPE</th>
<th>DATA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>UNIT CAPACITY IN GALLONS</td>
<td>____________________________</td>
</tr>
<tr>
<td>2</td>
<td>UNIT WATTS/BTUS</td>
<td>____________________________</td>
</tr>
<tr>
<td>3</td>
<td>CIRCULATING PUMP: Y/N</td>
<td>____________________________</td>
</tr>
<tr>
<td>4</td>
<td>UNIT LUBE</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

If pump or motor are lube-able fill out Circulating Pump equipment data sheet.

Form Completed by:
Name __________________________ Phone ____________

Company __________________________ Date ____________