

Heating design request form

Please fill in the details below and send to: sales@electricpoint.com

Customer name	e and address (ple		e unable to c	omplete the s	cheme unles	s full name and	d address deta	ails are include		
Contact:				Co. Na	me:					
Address:										
				Postco	de:					
Fax No:		Tel No:		Email:						
Cito name and	addus o o									
Site name and a	address									
Type of proper	ty (for a flat, please	e tick 'semi-detac	ched' unless	there are othe	er flats on bot	h sides, in whi	ch case, tick '	terrace')		
House	Bungalow	Flat Other (please sp			specify)		Detached	Semi- detache	Semi- detached Terraced	
Type of constru	ıction									
Cavity wall	Yes	No	Roof	Dit	ched		Flat			
With insulation	Yes	∐ No	Insulation				100mm	150mm		200mm
Solid walls	Yes	∐ No	Glazing	Sin	ngle		Double			
Floor	Solid	Timber		Approx	ximate age of	property				
Products to be										
	the product ranges y	ou would like us	to base							
	Iternatively, leave bla				you like us to					
the scheme on. Al right products to y				Water I	heating		Yes	No		
				Water I			Yes	☐ No ☐ No		
				Water I	heating		Yes Internal			
right products to y	our property.	ank and we will m	Floor-to-	Water I	not water	External	Yes Internal wall length to	□ No		
	our property.	ank and we will m	natch the	Water I	heating		Yes Internal wall	No	Roof above?	Open fireplace?
right products to y	our property.	ank and we will m	Floor-to-ceiling	Solar h	not water Window	External door	Internal wall length to unheated	Is room above		
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