UMN-TC EQUIPMENT DATA FORM for CONDENSING UNIT
Data entry completed __________
Data entry by _________________

Asset Number ___________________ (To be provided by U of M Planner)

Above section for UMN-TC 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

Architecture Eqpt No: _____________________ (from construction drawings)

Manufacturer: Mfr Name ________________________________

Model No. ___________________ Serial No. ___________________

Location: Building ________________________________

Floor _________________ Room # __________________

Type: _____Air Cooled _____Water Cooled

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 Refrigerant Type</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Unit Refrigerant Weight</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Chilled Water Rate Calc: Y/N</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Condensing Unit Location</td>
<td></td>
</tr>
</tbody>
</table>

Form Completed by:
Name ____________________________ Phone ___________________

Company __________________________ Date___________________

File: K:\PLANNERS\Equipment & PMs\Equipment data sheets\Final Equipment Data Forms\HVAC Package & Terminal Systems\CONDENSING UNIT EDF.doc
File Date: 1/25/2011