



Armstrong International—Humidification Group

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Humidification Installation Details Form (IDF)

We ask that this form accompanies every Humidifier order that contains complete units. This does not pertain to repair parts purchase orders.

PO# _____ JOB NAME: _____

Point of Order (Sold To): _____

(eg: ABC Mechanical)

City: _____ State: _____ Rep Firm: _____

Point of Installation: _____

(eg: Mercy Hospital)

City: _____ State: _____ Rep Firm: _____

Point of Specification: _____

(eg: DEF Consulting Engineers)

City: _____ State: _____ Rep Firm: _____

Other Influence: _____

(eg: point of installation recommended product to point of specification)

For orders with multiple humidifiers please be sure all information required below is on the purchase order

Section 1 – Series 1000 & 9000

Model No. _____ psi _____ orifice size _____

If operator is electric you must specify the input power voltage _____

Section 2 – Series EHU

Model No. _____ Voltage _____ Phase _____ CM module _____

Section 3 – Series HC6000 HumidiClean

Model No. _____ Voltage _____ Phase _____ Kw _____

Section 4 – Series ACV Control Valves

Model No. _____ psi _____ orifice size _____

If operator is electric you must specify the input power voltage _____

Section 5 – Series CS10 Steam-to-Steam

Model No. _____ Steam Pressure _____ Required lbs/hr _____

Steam outlet required _____ Operator type _____ Are legs required? _____

Is insulation required? _____

Section 6 – Series GFH

Model No. _____ Gas Type _____ Steam Outlet required _____

Section 7 – Series HumidiPack (Check one)

Submittal Drawings needed: _____

Submittal Drawing(s) attached: _____

Section 8 – Communication

Check one: Modbus _____ BACnet IP _____ BACnet MSTP _____ Lonworks _____

Baud Rate _____ Node ID _____ Network ID _____ Identification _____