Steam QM-3
Installation Details Form (IDF)

We ask that this form accompanies every Steam QM-3 order that contains complete units. This does not pertain to repair parts purchase orders.

Section 1 Ordering Processing/Tracking Detail:

Point of Order (Sold To): ____________________________ City: ____________ State: ____ Rep Firm: ______________
(eg: ABC Mechanical)

Point of Installation: ______________________________ City: ____________ State: ____ Rep Firm: ______________ SIC: _______________
(eg: Mercy Hospital)

(eg: DEF Consulting Engineers)

Other Influence: ______________________________________________________________________________
(eg: point of installation recommended product to point of specification)

Section 2 Technical Detail:

Model: Steam QM-3

Calorimeter Orientation: Horizontal  Vertical

Equipment Type: ________________________________

Is the steam generated from purified water: Y   N

Operating Steam Pressure: __________________ psi

Number of wall mount brackets needed: _________________________

Utilities available at installation location*:

Steam Measurement point (1/4" or 1-1/2" sanitary fitting): Y   N

Water Supply (1-5 bar): Y   N

Drain Available: Y   N

Power Supply: 115 Volts   230 Volts

Communication: Local Display  Modbus (BAS/DCS)  Modbus w/ Data Logger

Modbus w/ Armstrong supplied data logger

* Cabinet must be mounted within 3 m (79 in.) of the calorimeter and in a secure and level position.

Section 3

Service Contract Desired: Y   N

EN 285 Regulated: Y   N