

Fragebogen Top-Klima-System

Questionary Top-Climate-System

Kontaktdaten / Contact Information

Name <i>Name</i>	Tel. <i>Tel.</i>
Straße / Nr. <i>Street / Nr.</i>	Fax <i>Fax</i>
PLZ / Ort <i>Postcode / City</i>	E-Mail <i>E-Mail</i>
Projekt <i>Project</i>	Datum <i>Date</i>

Stalldaten / House data

Stalllänge <i>House length</i>	m	Stallbreite <i>House width</i>	m
Tierart <i>Animal species</i>	Anzahl der Tiere <i>Number of animals</i>	Endgewicht <i>End weight</i>	kg
Vorhandene Netzspannung <i>Existing power supply voltage</i>	V	Hz	Phasen <i>Phases</i>

Ventilationsdaten / Ventilation data

Position der Ventilatoren <i>Position of ventilators</i>	Max. Gesamtablufrate <i>Max. total air rate</i>	m³/h
Position der Lufteinlässe <i>Position of the air inlets</i>	Klimazone / Land <i>Climate area / Country</i>	

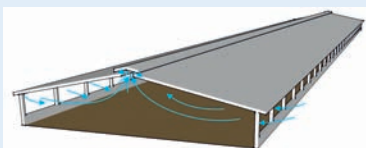
Einsatzbereich / Operating range

Steuerung durch vorhandenen Klimacomputer? <i>Control by existing climate computer?</i>	☐ Ja / Yes ☐ Nein / No	Einsatz Zudosierung geplant? <i>Admixture is planned?</i>	☐ Ja / Yes ☐ Nein / No
		Einsatz zur Desinfektion geplant? <i>Disinfection use is planned?</i>	☐ Ja / Yes ☐ Nein / No
System mit Druckentlastung? <i>System with pressure relief?</i>	☐ Ja / Yes ☐ Nein / No	Verschraubung: <i>Couplings:</i>	☐ Schneidring <i>Cutting ring</i> ☐ PressFix <i>PressFix</i>

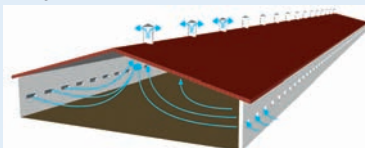
Stallskizze / House sketch

Bitte die gewünschte Pumpenposition angeben: / Please specify the desired pump position:

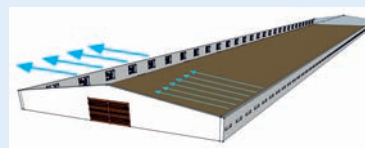
Natürliche Belüftung
Natural ventilation



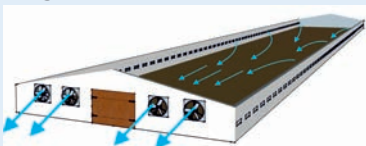
Firstventilation
Roof ventilation



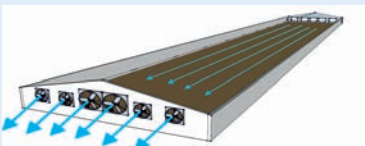
Querventilation
Cross ventilation



Längsventilation
Length ventilation



Tunnelventilation
Tunnel ventilation



Andere Ventilation
Other ventilation

☐ (Bitte Skizze oder Zeichnung anfügen)
(Please attach a sketch or drawing)

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Name
Name

Projekt
Project

Notizen - Skizze / Notice - Sketch

LUBING Maschinenfabrik GmbH & Co. KG

Lubingstraße 6 · 49406 Barnstorf (Germany) · Tel.: +49 (0) 54 42 - 98 79-0
Fax: +49 (0) 54 42 - 98 79-33 · www.lubing.com · info@lubing.com