Healthy Homes of Louisiana, LLC PO Box 3127

West Monroe, Louisiana 71294 or

Fax this sheet to 318-459-9016

email to bobby@parksair.com

Request for

(Please circle one needed)

+.05 cents per heated sq ft (total .15 cents)	Included	\$300 first unit \$200 each additional unit per same house	Blower Door Testing \$125 if done with duct tightness \$250 if stand alone	
nit zones bel	ow for Duct	tightness testing and/or Bl	lower door request only;	
Zone name		Heated square footag	ge	
Zone name		Heated square foota	ge	
Zone name	:	Heated square foota	ge	
Unit four Zone name		Heated square foota	Heated square footage	
(SUB)/CONTRACTOR INFORMATION Name			BUILDING INFORMATION Job Name	
	nit zones belo Zone name Zone name Zone name Zone name Zone name Zone name	nit zones below for Duct (Zone name Zone name Zone name Zone name Zone name Zone name Zone name	heated sq ft (total .15 cents) nit zones below for Duct tightness testing and/or B Zone name Heated square foota Heated square foota Heated square foota Heated square foota BUILDING TRACTOR INFORMATION BUILDING BU	

Information required for Manual J, Manual D and Manual S

MUST provide floor plan with room and window dimensions Walls 2x4 2x6 or description Ceiling R_____ or description _____ Shingle or Metal Roof Radiant barrier roof decking Yes - No Floor R_____ or description _____ **Windows** (and French Doors) / (From white sticker on windows) SHGC _____ Uo _____ SHGC _____SHGC ____ Uo _____ Uo ____ **Ducts** Where will ducts be located - Attic / Basement / Inside building / Building Exterior Duct R Value -R4.2_____ R6 ____ R8 _____ **Furnace Type** Gas Electric strip Heat pump Front Door faces North_____ South____ East____ West____ North East_____ North West_____ South East _____ South West_____