



# Design Engineer Form

*Complete this form to get assistance in specifying a propane standby system.*

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## Engineering Firm Contact Info

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Company

Name

Title

Phone

Email

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## Project Installation Information

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Project Name

City

State/Prov.

**Is this a new or existing facility?**

New Construction

Retrofit Existing Facility

**Is a site plan available showing the natural gas meter location?**

Yes  No

If yes, please send a copy with this form.

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## Project Information

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What is the total BTU/hr gas load to be served by the standby system?

Backup Fuel to be:

- Propane-Air (Synthetic Natural Gas)  
 Propane Vapor

What is the interior building natural gas distribution pressure? (PSIG)

Electrical Voltage Available

- 480V  
 240V  
 208V  
 120V

Electrical Phase Available

- Single Phase  
 3 Phase

Propane Tank Location

- Below Ground  
 Above Ground

How many hours of propane operation would you like before requiring more fuel?

Please provide any additional information you believe may be of use in evaluating a propane standby system for this facility.



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