



Global Consultants

Manual J Information



Select Calculation: Room x Room _____ or Block Load (Whole House) _____

Contact Name & Phone Number _____

Your Company Name, Address & Number _____

Project Address: _____

Front Door Faces: (Circle 1) N NE NW SSE SW E W SQ. Ft: Base _____ 1st _____ 2nd _____ 3rd _____

Floor Type: Conditioned Basement - Yes ___ or No ___ Slab on Grade _____ Crawl Space Sealed _____
 Crawl Space Vented _____ Crawl Space Open _____ Over Garage Y ___ N ___

Floor Insulation: None ___ R-11 ___ R-15 ___ R1-19 ___ R-22 ___ R-30 ___ R-38 ___ Other _____

Roof Type: Fiberglass shingles _____ Tile _____ Metal _____ Wood Shakes _____
 Flat _____ Membrane _____ Tar & Gravel _____ Other _____
 Color: Dark _____ Medium _____ Light _____

Attis Type: Vented _____ With Vapor Barrier ___ Yes ___ No Not Vented _____ Encapsulate _____

Ceiling Insulation: None ___ R-11 ___ R-15 ___ R1-19 ___ R-22 ___ R-30 ___ R-38 ___ Other _____

Wall Type: Concrete Block _____ Frame _____ SIP _____ Other _____

Wall Insulation: None ___ R-11 ___ R-15 ___ R1-19 ___ R-22 ___ R-30 ___ R-38 ___ Other _____

Wall Type: Vinyl Siding _____ Wood Siding _____ Hardy Board _____ Stucco _____ Other _____

Window Type: Single pane _____ Double pane _____ Triple pane _____ Clear _____ Low E _____

U - Factor _____ SHGC _____ Skylights _____

Window Square Footage: N NE NW Side _____ S SE SW Side _____
 East Side _____ West Side _____

Story Levels: Single _____ Two _____ Three _____ Four _____

Duct Location: Conditioned Space _____ Non -Conditioned Space _____

Air Handler Location: Attic _____ Basement _____ Closet _____ Package _____

Condenser Model: _____ AHRI # _____

Air Handler/Coil: _____ AHRI # _____

Furnace/KW _____ AHRI # _____

Ventilation: HRV _____ ERV _____ Fireplace(s) Y ___ N ___

Blower Door Test _____ Y _____ N Results _____