

Carhoo Technical Services

Carhue, Clonakilty, West Cork, Ireland
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SEI BER Registered Assessor Number: 100027

BER Technical Specifications Document

All documents, drawings, site plans and specifications, including the detail listed below supplied are to be clearly signed and dated by the client.

Date:
Client Name:
Client Address:
Client Phone No:
Client Email:
Property Type:
Property Address:
Construction Details
Structure Type (Timber or Steel Frame / Masonry):
Main Wall (type and U-value):
Secondary Wall (type and U-value):
Ground Floor (type and U-value):
Roof (type and U-value):
Window and Door Detail
Dimensions (if not on house drawings):
U-value (if available):
Glazing Type (double/Triple, Air/Argon filled):
Gap Size:
Frame Type:
l ow a (vas/no):

V.A.T. Registration No: IE 3878071A

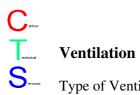
Payment Terms: 14 days



Main Heating System

Boiler Type:				
Boiler Make & Model:				
Boiler Efficiency (if known):				
Main Fuel:				
Individual or Community System:				
Distribution System Losses and Gains				
How Many Zones:				
Type of Zone Heating Controls:				
Room Stats (Yes / No):				
TRV's (Yes / No):				
Separate Primary Pipe work for different Zones (Yes / No):				
Weather Compensator (Yes / No):				
Load Compensator (Yes / No):				
Central Heating Pump (Yes / No, how many):				
Interlock on Boiler (Yes / No):				
Boiler Flue (Fan assisted?):				
Heat Emitter Detail:				
Type of Secondary Heating:				
Water Heating System				
Type of Water Heating Primary Source:				
Type of Water Heating in Summer:				
Cylinder Size:				
Type and Thickness of Insulation:				
Cylinder Stat Present (Yes / No):				
Primary Pipework Insulated (Yes / No):				
Solar Water Heating (Yes / No):				
Combi (Yes / No):				

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Type of Ventilation:			
If Mechanical ventilation give M	Ianufacturer & Model:		
No. of Intermittent Fans & Passi	ve Vents:		
No. of Flueless Gas Fires:			
No. of Chimneys:			
No. of Open Flues:			
Lighting			
% of Low Energy Light Fittings:			
		e (if any):	
List of all Drawings and / or Doo	cuments provided for t	he assessment:	
Drawing / Document	Reference	Revision No.	Revision Date
		Date://	20
Authorised signatory (Client	t)		

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