

Walk-in Box Request

Email to estimating@imperial-brown.com



Sent By:		Job name:	
Address:		Address:	
City, State ZIP:		City, State ZIP:	
Phone:			
E-mail:			

Cooler ☐	Freezer ☐	Cooler/Freezer ☐	Cooler/Cooler ☐	Freezer/Freezer ☐	3 or more compartments ☐	Misc ☐
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Box Design Application _____ Foodservice (NSF required) or _____ Scientific/Special Application * Contact IB Sales 800-238-4093

Box Location _____ Indoor or _____ Outdoor * Show box location in relation to other structures on sketch below

DIMENSIONS & FINISHES

DIMENSIONS:		Exterior Finish	Interior Finish	SKETCH
*Nominal Dimensions OK? _____		☐ Stucco Galvalume	☐ Stucco Galvalume	
*Exact Dimensions Req'd? _____		☐ Stucco Galvanized	☐ Stucco Galvanized	
Compt Type	Compt Dim	☐ Stucco. White (Any)	☐ Stucco White (Any)	
	__ID__OD	☐ Stainless Steel	☐ Stainless Steel	
	__ID__OD	☐ Stucco Aluminum	☐ Stucco Aluminum	
	__ID__OD	☐ Stucco White Alum.	☐ Stucco White Alum.	
	__ID__OD	☐ Other _____	☐ Other _____	
Exposed Finish Varies? List:				*Sketch Layout or attach project floor plan *Show adjacent building walls

FLOORS: STEP IN HAND TRUCK PALLET JACK EXTREME

None-Floorless	__Smooth Alum. __Treadplate	__Smooth Alum. __Treadplate	__Smooth Alum. __Treadplate	Contact Sales Dept 800-238-4093	Box to sit in ____" recessed pit Insulated slab material provided by Imperial Brown
List here if the floor type varies by compartment: _____					

DOORS: (show qty & door swing on sketch or plan)

__ Swing doors: __Wx__H	List Pricing Option(s) Needed on Quote
__ Sliding doors: __Wx__H __ Electric __ Manual L R	1.
__ Bi-parting doors: __Wx__H __ Electric __ Manual	2.
__ Insulated Reach-in doors: __Wx__H	3.
__ Glass doors: __Wx__H __ Qty	

ACCESSORIES:

__ Dial Therm __ Digital Therm __ Temp Alarm __ Pilot Light Switch	Cove base: __Int __Ext Ceiling Closure: _____ Vertical Closure: _____	Ramp: __Int or __Ext Strip Curtain: _____ Door Kickplates: _____ Wainscot: _____	Lights: __ Fluorescent: __4' or __Compact __ LED: __4' or __Compact __ Special: - _____
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REFRIGERATION: _____ INCLUDE _____ OPTION _____ NONE

CONDENSING UNIT(S):	Power Requirements _____ volts _____ phase
__ Outdoor Remote (Split) Condensing Unit __ Indoor (Split) Condensing Unit __ Indoor Self-Contained __ Outdoor Self-Contained	
EVAPORATOR COIL(S):	
__ Standard Low Profile Evap Coil __ Center Mount Evaporator Coil __ Evaporator Coil Type (list): _____	
List here if cond unit type or evap coil type varies by compartment: _____	
Operating Temp (Holding Temp): _____ Typical: 35 deg F for cooler, -10 deg F for freezer	
__ Special Temp: List per Comp: _____	
PRODUCT LOAD: __ Holding only (no product load) __ Warm products will be entering*** This requires discussion with IB Sales 800-238-4093	
Refrigeration Notes:	