

Inquiry about an offer

Object information: Name: Object description (e.g. school, hotel, hospital): Location (country, postcode, city): Maximum heat requirement (approx.): Rated power of existing boilers:	kW kW
Details of the CHP unit: We are interested in a CHP unit with:	
Electric power: And/or heating power:	kW kW
Following types of operation are intended: (please mark)	 only parallel to mains operation parallel to mains plus emergency current operation only emergency current operation
Mains voltage Mains frequency	V Hz
Heating water flow temperature max.: Heating water return flow temperature max.:	°C °C
Fuel available:	□ natural gas pressure: mbar □ biogas pressure: mbar □ sewage gas pressure: mbar □ propane gas pressure: mbar
Remarks:	
To:	From (indenter):
SOKRATHERM GmbH Bünder Str. 179	
D-32120 Hiddenhausen	
Phone: +49 5221/9621-0 Fax: +49 5221/9621-	-34 Contact person:
F-Mail: info@sokratherm.de	Phone: