SPECIFICATION SHEET DDC CHECK LIST



CARNES COMPANY, 448 S. Main St., P. O. Box 930040, Verona, WI 53593-0040 Phone: 608/845-6411 Fax: 608/845-6504 carnes@carnes.com http://www.carnes.com

| IMPORTANT INFORMATION ON DDC CONTROLS The DDC branch office is responsible for providing mounting and wiring instructions. | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| Controls contractor must obtain a no-charge P.O. number from Carnes. (Contact Todd Waitrovich.) CONTROLS WILL NOT BE ACCEPTED WITHOUT ONE. | |
| An estimated ship date for the controls MUST be given. | |
| DDC checklist must be completed before order can be processed. | |
| Grounding wires and component safety devices (such as varistors) to be field mounted. | |
| • DDC control samples may be required by Carnes Engineering Department. If control samples are not provided, responsibility for | |
| mounting and wiring control is by others. | |
| This form must be filled out completely or it may be subject to rejection. | |
| Carnes Sales Office: | Date: Terminal Unit Type: |
| Carnes Salesperson: | Job Name: |
| G. SHIPPING | |
| A. DDC MANUFACTURER (Check One) | Controle Chin Date (Must be filled in) |
| [] Alerton [] Invensys [] Andover [] Johnson Controls | Controls Ship Date (Must be filled in): Indicate No Charge P.O.#: |
| [] Automatic Logic [] Siemens | Indicate Carnes Order #: |
| [] Honeywell | DDC Branch Contact: |
| [] Other: | Telephone Number: () |
| B. CONTROLLER MODEL | Fax Number: () |
| []QTY | number and no charge DO # must be marked on neckaging |
| []QTY | SHIP TO: CARNES COMPANY |
| C. ACTUATOR MODEL (Carnes has 3/8" Damper Shaft. Che | Attn: VAV Dept. |
| Integral to controller Damper Actuator Provided by Controls Contractor | 448 S. Main Street (90° Verona, WI 53593 |
| Rotation Required) | |
| List MFG. and Model: | QTY |
| [] 3/8" SHAFT ADAPTER (If Required) BY CONTROL CONTACTOR QTY | |
| D. ROTATION | |
| [] Clockwise to close | |
| [] Counterclockwise to close | |
| E. POWER TRANSFORMER (Check One) | |
| [] 40 VA Transformer by Carnes (Must coordinate with the Carnes Sales Rep.). [] 120v/24v [] 277v/24v [] Otherv/24v. | |
| [] Transformer by Controls Contractor, mounted and wired by Carnes. | |
| [] 120v/24v [] 277v/24v | [] Other v/24v. |
| List MFG. and Model: QTY | |
| [] Transformer to be field supplied and mounted. | |
| F. OTHER CONTROL COMPONENTS (List) | |
| [] | |
| [] | |
| * Additional charges may apply for mounting other control components. | |
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