



NetWell Noise Control Room Analysis Worksheet

I. Your Name _____ Date _____
Company _____ Address _____
Phone _____ City/St/Zip _____
Fax _____ Email _____

Select: Commercial Industrial Residential

I. What kind of room is this?

II. Room Dimensions:

L= _____ ft.

W= _____ ft.

H= _____ to _____ ft.

III. Surface Textures:

Floor: _____

Ceiling: _____

Wall 1: _____

Wall 2: _____

Wall 3: _____

Wall 4: _____

1. Outline your room, show location of walls, windows, doors, etc
2. Include dimensions. Do not worry about drawing to scale.
3. The more detail you provide, the better the treatment
4. This complimentary analysis is performed for customers using NetWell products only. Any use of non-NetWell product can void anticipated results.

Check any that apply;

- | | | |
|---|---|--|
| <input type="checkbox"/> I have used Acoustic Material before | <input type="checkbox"/> High Temp Exposure | <input type="checkbox"/> New Build |
| <input type="checkbox"/> I am a NetWell customer | <input type="checkbox"/> Moisture Potential | <input type="checkbox"/> RetroFit |
| <input type="checkbox"/> Need a Class A fire Rating | <input type="checkbox"/> Outdoor Treatment | <input type="checkbox"/> Clean Room |
| <input type="checkbox"/> My noise source is encloseable | <input type="checkbox"/> Oil Mist Exposure | <input type="checkbox"/> Litigation Involved |

Fax completed form to 1-763-694-8909

Questions? Call 1-800-638-9355