HYDROTEK® HYDROPONICS

GROW ROOM DEHUMIDIFIER REQUEST

Help us size the right dehumidification solution for your grow room.

FEATURING SOLUTIONS FROM anden X QUEST

PROJECT INFORMATION

Project / Facility Name: _____

Primary Contact Name: _____

Phone: _____

Email: _____

Project Location
(City, State/Province, Postal Code): _____

Estimated Start Date: _____

Project Timeline:
- ☐ ASAP
- ☐ Within 1 month
- ☐ 1 - 3 Months
- ☐ Planning stage

ROOM TYPE & PURPOSE

- ☐ Mother
- ☐ Flower
- ☐ Propagation
- ☐ Cure / Dry
- ☐ Vegetative (Veg.)
- ☐ Other: _____

ROOM DIMENSIONS

Width: _____ ft/m

Length: _____ ft/m

Ceiling Height: _____ ft/m

Total Room Volume (if known): _____ ft^3/m^3

BUILDING MATERIALS

Wall Type: _____

Ceiling Type: _____

Floor Type: _____

LIGHTING INFORMATION

Number of Lights: _____

Watts per Light: _____ W

Total Watts: _____ W

Voltage: _____ V

Type: ☐ HPS ☐ LED ☐ Other (specify): _____

EXISTING AIR CONDITIONING

Type: _____

Tonnage (if known): _____ Tons

Other Details / Model (if known):

VENTILATION

Exhaust (CFM): _____

Intake (CFM): _____

Other Ventilation Notes:

PLANT & WATER FEED INFORMATION

Number of Plants per Greenhouse: _____

Gallons of Water Used per Day: _____ gal / day

Percentage of Runoff: _____ %

Grow Media Type: _____

Grow Media / Container Size: _____

CURE INFORMATION (if applicable)

Total Weight to Cure: _____ (lbs / kg)

# of Days to Cure: _____

Room Temperature: _____ °F / °C

Notes: _____

DESIRED ENVIRONMENTAL CONDITIONS

	Lights On Min.	Lights On Max.	Lights Off Min.	Lights Off Max.
Temperature	_____ °F / °C	_____ °F / °C	_____ °F / °C	_____ °F / °C
Relative Humidity	_____ %	_____ %	_____ %	_____ %

CURRENT HUMIDITY CHALLENGES / GOALS

Select all that apply:

- ☐ High nighttime humidity
- ☐ Excess transpiration load
- ☐ Condensation
- ☐ Improve air exchange
- ☐ Disease pressure
- ☐ Reduce operating cost
- ☐ Drying / curing
- ☐ Other: _____

ADDITIONAL NOTES

Please describe any specific requirements, issues, or goals for this project:

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