



TESTING, ADJUSTING AND BALANCING BUREAU
THE PROFESSIONAL'S CHOICE™

COIL VELOCITIES

JOB NAME: _____ ADDRESS: _____

SYSTEM NO: _____ TRAVERSE LOCATION: _____

POINT	1	2	3	4	5	6	7	8	9	10
A										
B										
C										
D										
E										
F										
G										
H										
I										
J										
TOTAL										

TOTAL FPM ÷ NO. READINGS = AVERAGE FPM x AREA = CFM

_____ ÷ _____ = _____ X _____ = _____ CFM

	1	2	3	4	5	6
A						
B						
C						
D						

MEASUREMENT POINTS

REMARKS: _____

T	COIL SIZE O.D.	
E		
S	AREA	
T		
	AVERAGE FPM	
D	MEASURED CFM	
A		
T		
A		