



# Acoustic Calculation Request Form

Date: \_\_\_\_\_  
 Agent Name/Agency: \_\_\_\_\_  
 Project Name: \_\_\_\_\_  
 Project Location: \_\_\_\_\_  
 Specifier Name/Firm: \_\_\_\_\_  
 Specifier Location: \_\_\_\_\_

**Send completed form to:**  
**AcousticCalcs@teganlighting.com**

**Estimated lead-time for support:**  
**5-7 Days from receipt of a "clean" request form + required related documents.**

**Please provide a CAD file and Furniture Plan of the space.**

Room Size (L x W): \_\_\_\_\_ CAD File \_\_\_\_\_ Furniture Plan \_\_\_\_\_

Ceiling Height: \_\_\_\_\_

Approximately how many people will be in this room at any given time? \_\_\_\_\_

How many upholstered chairs are in the room? \_\_\_\_\_

How many metal/wooden chairs are in the room? \_\_\_\_\_

Are there specific BUZZI products that the client would like to see in their space? \_\_\_\_\_

**WALL TYPE**

**FLOOR TYPE**

Brick (painted)

Carpet (on concrete)

Concrete (course)

Carpet (on felt backing)

Concrete (painted)

Tile

Concrete (poured, rough, unpainted)

Linoleum

Plaster (gypsum or lime, on wood lath)

Marble

Plaster (on solid wall)

Wood parque (on concrete)

Plasterboard (on frame, 100mm cavity with mineral wool)

Wood parquet (on joists)

Tile/Marble

Raised computer floor with office-grade carpet tiles

Plywood

If multiple floor types were selected, please indicate which surfaces match which floor areas on the plan.

Hardwood

Glass

If multiple wall types were selected, please indicate which surfaces match which walls on the plan.

**CEILING TYPE**

Plasterboard (in suspended ceiling grid)

Plasterboard (on wood lath)

Perforated metal panels (with underlay)

Perforated metal panels (with 30mm mineral wool)

Sprayed cellulose

Exposed metal deck

Acoustic steel deck

Acoustic ceiling tiles with perforations

Wood tongue and groove

If multiple ceiling types were selected, please indicate which surfaces match which ceiling areas on the plan.