



Room Analysis Plus



PLEASE PRINT CLEARLY AND USE ONE (1) SHEET PER ROOM. Use black pen or dark pencil when filling out by hand.

❶ Fax: 317-842-2760 ❷ Email To: pluspro@auralex.com -or-
❸ Mail To: 9955 Westpoint Dr., Ste 101, Indianapolis, IN 46256

Your Info

Your Name: _____ E-mail _____@_____
Phone: (____) _____-____ Fax: (____) _____-____ Zip Code: _____-____

Dealer Info

Preferred Dealer: _____ Contact Name: _____ Date: ____/____/____
Dealer Phone: (____) _____-____ Dealer Fax: (____) _____-____ Dealer Email: _____@_____

You Are A(n) (Check all that apply.)

- Engineer/Producer Vocalist/Voice-over Talent Musician (Instrument: _____)
- Church/Worship facility Audiophile Other: _____

Type of Room (Check all that apply.)

- Project Studio Mastering Rehearsal Space Control Room Audiophile/Listening Teaching Studio
- Live Room Vocal Booth Video Edit/Production Broadcast Office Space Other: _____

Music Style/Production (Check all that apply.)

- Pop/Rock/Blues Jazz Country Classical Hip-Hop/Urban Dance/Techno
- MIDI/Electronic Acoustic Contemporary Worship Alternative/Hard Rock Other: _____

Is this facility (Check one) New Construction Renovation

Is this space? (Check one) Residential Commercial

Do you have access to?*

- Digital Photos CAD/Architectural drawings (*Send these files to pluspro@auralex.com with your Room Analysis Plus Form)

Room Dimensions (please indicate dimensions, e.g., "ft," "in," "mm" or "cm")

Length: Width: Height: (Note: Please use the back of this sheet to sketch)

Surface Types

- Walls: Drywall/SheetRock®/Gypsum Board Plaster Wood Paneling Concrete (Block or Poured)
 Brick Unfinished Other: _____
- Ceiling: Drywall/SheetRock®/Gypsum Board Exposed Joists Drop Tile Ceiling ("T" bar, "grid", etc.) Metal Deck/Trusses
 Other: _____
- Floor: Carpet Hardwood Concrete Vinyl/Tile Unfinished Subfloor
 Other: _____

Observed or Measured Acoustical Problem(s) (Check all that apply.)

Room Acoustics

- Flutter Echo ("slapback")
- Bass Build-up ("boomy") and/or Cancellation ("no bass")
- Room "Ring"
- Excessive Reverberation
- Mixes don't translate
- Other: _____

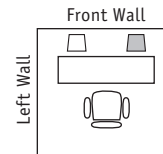
	Distance from...		
	Front Wall	Left Wall	Floor
Loudspeaker			
Microphone			

*Test should be run through just one speaker - preferably the left speaker.

Speaker Info: Stereo 2.1 5.1 Other: _____

Manufacturer: _____ Model: _____

Additional Info: _____



Omnidirectional Measurement Microphone Used

- Auralex Supplied
- Other: _____

Sampling Rate

- 44.1k 96k
- 48k 192k

Bit Depth

- 16
- 24

Existing Treatment (if any)- Please provide product description and quantity.

No Yes, Describe: _____

Anything else you can tell us about your situation (including preferred treatments, e.g., Pyramids or Metro™, etc.) _____

