



Industrial Water and Filtration Systems

Application Data Sheet - Industrial Water Applications

Date: _____ Project name: _____

Location: _____ Contact name: _____

Phone: _____ Email: _____

Water Source, Process or Waste Stream Description: What (if any) component/technology are you replacing or complementing?

Application description / desired solution:

Duty Cycle of Operations (hours/day, days/week)? _____

Process equipment solution you are considering: _____

Flow to screen: Pumped or gravity flow to filter influent? _____ Piping Material: PVC, 304, 316?

Peak Flow GPM: _____, System (MAWP) pressure: _____, Operating temperature: ____ F

Description of solids to remove/filter: _____

Are the particles hard or deformable (explain)? _____

Does the material or fluid consist of gels or polymers (if so, describe)? _____

Peak solids loading ppm _____, % solids _____

Micron size removal desired: _____ micron Target ____ % removed above that size.

UV Dose and Disinfection Requirements Yes __, No __: If yes what level of disinfection is required (log reduction of bacteria, viruses, or other microorganisms)?

Controls Required? Electrical utilities (3-Phase, 200-240VAC, 400-480 VAC, or other), Utility air available (Clean dry air? Pressure ____ psi

Particle Size Analysis? Y or N (please provide copy)

Installation floor area available (please provide sketch if possible):

Is there an approved budget for this project? Budget, or firm quote? _____

Other Project Info:

Expected PO date: _____