



Request for Quotation - Treatment System Data

Company Name & Address:

Contact:

Date:

Phone:

Fax/email:

Site name:

Please provide as much information as is available. The success of our deposit control technology is dependent upon the accuracy of our deposit characterization.

General System and Water Quality Data:

System Flow Rate:

Water Temperature:

Total Iron:

Dissolved Iron:

Total Hardness:

Total Alkalinity:

pH:

TDS or Conductivity:

Discharge to (Check one): POTW Surface Water Groundwater Drinking Water

Treatment Process Units (Check all that apply. If possible, provide process diagram):

Oil/Water Separator

Air Stripper

Activated Carbon (Liquid Phase)

UV Oxidation

Filtration

Other:

Metals Removal (Please Specify):

Microbiological Data: If you suspect microbiological growth, and have done any testing, please describe type of testing and results.

Observations of Deposit: If you or your staff have observed deposits occurring at this site, circle any terms that might describe the deposit itself.

hard scale

granular or flaky, but loose

soft, fine and mud like

slimy

red orange

black

white

tan

pink

opaque

Additional Comments: