

# CONDITIONING PUMP INQUIRY FORM

|  |   |                 |      |             |              |            |        |             |  |
|--|---|-----------------|------|-------------|--------------|------------|--------|-------------|--|
| Name: _____<br>Company: _____<br>Address: _____<br>City: _____<br>State/Country: _____ Zip/Code: _____   | Phone: _____<br>Fax: _____<br>e-mail: _____<br>Project Name: _____<br>Project Location: _____   |                 |      |             |              |            |        |             |  |
| <b>Application:</b><br>Lift Station Conditioning<br>Influent Station/Channel Conditioning<br>Basic Conditioning<br>Holding Tank Conditioning<br>Digester CleanOut/Homogenization<br>Other: _____   | <b>Type of Pump:</b><br>Submersible:<br>Vertical Recirculator<br>Self Primer w/ 3 Way Valve Nozzle  |                 |      |             |              |            |        |             |  |
| <b>Facility:</b><br><table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Prison</td> <td style="width: 50%;">Shopping Center</td> </tr> <tr> <td>Jail</td> <td>Residential</td> </tr> <tr> <td>Nursing Home</td> <td>Industrial</td> </tr> <tr> <td>Casino</td> <td>Other _____</td> </tr> </table> | Prison  | Shopping Center | Jail | Residential | Nursing Home | Industrial | Casino | Other _____ | <b>What is the current issue with the sump?</b><br>Floating Mat<br>Settling Solids<br>Clogging Duty Pump<br>All of the above |
| Prison   | Shopping Center   |                 |      |             |              |            |        |             |  |
| Jail   | Residential   |                 |      |             |              |            |        |             |  |
| Nursing Home   | Industrial  |                 |      |             |              |            |        |             |  |
| Casino   | Other _____   |                 |      |             |              |            |        |             |  |
| <b>Property of Liquids:</b><br>Temperature: _____ °F _____ °C<br>PH: _____ % SOLIDS: _____<br>Specific Gravity: _____<br>Viscosity (cps): _____ (ssu): _____<br>Type of Solids:<br>Scum<br>Screenings<br>Lift Station<br>Other _____   | <b>Sump Geometry:</b><br>Square or Rectangular<br>_____ ft deep x _____ ft wide x _____ ft long<br>_____ M deep x _____ M wide x _____ M long<br>Circular<br>_____ ft, _____ meters diameter x _____ deep<br>Minimum Liquid Level: _____<br>Maximum Liquid Level: _____<br>Maximum Inflow Rate: _____<br>Retention Time: _____ Hours _____ Days<br><b>Sump floor:</b><br>Flat and level<br>Sloped or tiered |                 |      |             |              |            |        |             |  |
| <b>Horsepower Limitations:</b> _____<br><b>Electric Motor Requirements:</b><br>_____ HP, _____ RPM, _____ Volts, _____ Ph, _____ Hz<br>_____ KW, _____ RPM, _____ Volts, _____ Ph, _____ Hz<br>Enclosure Type:<br>_____  | Please provide geometry of floor if floor is not a flat level surface.<br>If sump is covered please provide detailed locations and sizes of access hatches.   |                 |      |             |              |            |        |             |  |