

Water Treatment Questionnaire

Please complete this form for us to be able to offer the best solution for treating your effluent.

Company Name:	Address:	Post Code:
Contact Person:	Email:	Tel/Mob:
Department/Position:	Date:	

<p>Process Details (Please Fill)</p> <p>Media (Type & Supplier):</p> <p>Media consumption per day: _____ (kg/day) estimate</p> <p>Material(s) of parts being processed:</p> <p>Compound used (Type & supplier):</p> <p>Compound consumption per day: _____ (l/day) estimate:</p> <p>Part contamination (oil, emulsion etc.*): **Please attached MSDS</p> <p>Drying method (if any):</p> <p>Process application: (Deburring, polishing, descaling etc.)</p>	<p>Effluent Volumes (Please specify effluent discharge per machine below)</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width:33%;">Machine model</th> <th style="width:17%;">Size</th> <th style="width:17%;">l/h</th> <th style="width:17%;">l/day</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="4">Total effluent per day:</td> </tr> </tbody> </table> <p>Total number of machines:</p> <p>Daily total machine run time: _____(hours/day) estimate</p> <p>Number of shifts:</p>	Machine model	Size	l/h	l/day																													Total effluent per day:			
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<p>Is there a water treatment system already in place: If Yes, please answer the below:</p> <p>Model Number: Manufacturer:</p> <p>Batch/automatic: Recirculation (Y/N):</p> <p>Satisfied with current treatment process (Y/N):</p> <p>Current water treatment consumables used:</p> <p>Any issues with existing machines:</p> <p>Do you require ActOn to test your effluent(Y/N): If Yes, ActOn require 2L of effluent to be sent to us for initial tests.</p> <p>*Please also let us know if you have a discharge consent or a specification that your effluent needs to be within when sending effluent for trials</p>	<p>Reason for new water treatment system:</p> <p>Location of the water treatment system:</p> <p>Distance of water treatment system from the mass finishing machines:</p> <p>Type of system required (please circle): Batch Automatic Other(please state):</p> <p>Treatment required (pleas circle) Yes with floc Not required Not sure, ActOn to test</p>
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<p>Comments/Remarks:</p>
