

Email to info@bluefrogssystem.com or your Absolute Aeration Sales Manager, or Fax to (866) 583-4160

Industrial Evaluation Form

_____ Date

Company Name: _____

Contact Name & Title: _____

Corporate Address: _____ City: _____ State: _____

Corporate Environmental Engineer: _____

Plant Address: _____ City: _____ State: _____

Plant Manager: _____

Office#: _____ Cell#: _____ Email: _____

Plant Environmental Engineer: _____

Office#: _____ Cell#: _____ Email: _____

Review process of how a decision is made to purchasing equipment for wastewater treatment?

Example: Local Level or Corporate Level

Will you be purchasing or leasing? _____

What is the timeframe to accomplish project? _____

List all contact information for your consulting engineering firm:

Will your require performance/material and labor bonds?

Number of Lagoons/Ponds: _____

Address of Lagoons/Ponds:

Describe your WWT process (include pre-treatment details):

Describe WWT Facility (include flows):

Project objective (clear review of what your company would like to achieve):

- | | |
|----------|----------|
| 1) _____ | 4) _____ |
| 2) _____ | 5) _____ |
| 3) _____ | 6) _____ |

Approximate dimensions of each lagoon/pond. Include where the inlet and outlets are located:

Pond 1) Length _____ Width _____ Depth _____
Inlet/Outlet _____

Pond 2) Length _____ Width _____ Depth _____
Inlet/Outlet _____

Pond 3) Length _____ Width _____ Depth _____
Inlet/Outlet _____

Pond 4) Length _____ Width _____ Depth _____
Inlet/Outlet _____

Current Retention Times: _____ **Permitted Retention Time(s):** _____

Permitted Capacity Lagoon/Pond Design: _____ MGD

Flow size: _____ MGD

Hourly Peak Flow: _____ MGD **Influent :** _____ MGD **Effluent:** _____ MGD

Peak flows: When: _____ How long: _____ How much: _____

Plant operation hours per day: Shifts per day? _____ Operating days per week? _____

When does plant shut down? _____ Time/Days

How do you disinfect? _____

Level of Odor: _____ List 1 to 10 (1 being minimal, 10 being high level)

What is your POTW surcharge rates:

Where do you discharge to? _____ Frequency? _____

If utilizing land application what is the:

_____ Wetted surface area acres _____ Total acres

_____ Application rate (inches per week) _____ Instantaneous application rate (inches/hours)

Do you have water analyses of the influent and effluent (including nutrients)? _____

Do you make any nutrient adjustments or add any chemicals to the wastewater stream? _____

Have you dredged the lagoons/ponds in the past? _____ (YES/NO)

Do you dredge the lagoon/ponds? _____ (YES/NO)

If yes when was the last time and estimated costs: _____

What are the current sludge/solids levels? _____

Do you currently have aerators or diffusers in place? If yes please list:

_____ Number in each lagoon/pond _____ HP _____ HP _____ HP

Current electrical supply: _____ Phase _____ Hz _____ Volts

Current electrical cost per KW/Hr: \$ _____

List any problem you feel is unique to your treatment facility:

Are heavy metals present? If so what are they and where do you think they originate?

Please provide your 12-month effluent chemistry and other permit requirements (note impacts to any variances). Complete if you have more than one pond and permit requirements vary.

	Current Wastewater Characteristics Of Influent MG/L	Average Effluent MG/L	What Are You Looking To Achieve?
TKN			
BOD			
COD			
TSS			
Ammonia			
Phosphorus			
PH			
DO			
TOC			
Nitrite			
Magnesium			
H2S			
Chlorides			
Conductivity			

Note: Provide updated measurements