

Date: _____ Distributor: _____ Region: _____

Customer: _____ Contact: _____ Position: _____

Address: _____

City: _____ State: _____ Zip Code: _____ - _____

Type Of Business Or Operation: _____

Waste Stream Generated: _____

Pressure Washer Specifications: GPM: _____ PSI: _____ Hot: _____ Cold: _____

Number Of Pressure Washer Being Used: _____ Hours / Day Operated: _____

Average Volume Of Waste Water Generated: Daily, Weekly

Daily (GPM Of PW x 60 x Hrs. / Day) = _____ x (# Of PW's) = _____ Gallons / Day

Weekly: Gallons / Day x # Of Days In Use = _____ Gallons / Week

Is Domestic Water Or Rinse Water Going To Be Introduced Into The System: Yes _____ No _____

If Yes, How Much? Daily (GPM x 60 x Hrs. / Day) = _____ Gallons / Day

Weekly (GPD x Days / Week) = _____ Gallons / Week

Is A Means Of Sewer Discharge Available To Release Excess Water: Yes _____ No _____

If Yes, Please Supply Sewer Discharge Limitations. Will Release Be Permitted: Yes _____ No _____

Existing sump capacity _____ Collection pit capacity _____ Storage Tank Size _____

Has Wash Site Been Sited For Or Put On Notice By A Regulatory Agency: Yes _____ No _____

If Yes, For What Reason? _____

Are Cleaning Detergents Or Wash Chemicals Used? Yes _____ No _____ Gallons / Month _____

What type of cleaning agents: (please indicate pH of agents) _____

What will the pH of the waste steam water to process be? _____ PH, (if known)

Are Cleaners Emulsifying: Yes _____ No _____ Are They Quick Release Formulated: Yes _____ No _____

What residues are removed during the cleaning process? _____

Will in house cleaning procedures be altered to control heavy debris or contaminants, i.e.: Is

there a Separate solids or mud rinse off area and wash area: Yes _____ No _____

Estimated solids load: Very Heavy _____ Heavy _____ Moderate _____ Light _____

Will solids be oil laden: Yes _____ No _____ Heavy _____ Moderate _____ Light _____

Will there be excess free-floating oils, gasoline, diesel, and petroleum products? Yes ___ No ___

Is Rainwater runoff controlled from wash area waste stream: Yes _____ No _____

If NO, what contingency is in place to handle water introduction?

SITE SPECIFICATIONS:

Recycle System and Components Being Considered for Purchase:

RPFSE1 _____ RPMMUAE2 _____ R2TSSE1 _____ R4TSSE1 _____

RCST5 Storage Tank _____ RCS22AE2 _____

Distributor recommendations: _____

Required Options: _____

Note: RPMMUAE2 and RCS22AE2 System is factory wired 230 volts 1 phase 30 amp.

RPFSE1 System is factory wired 120 volts 1 phase, 20 amp.

Available Utilities: Electrical 120 208-230

Phase 1 1 or 3

Max Amps _____ _____

Location of System: Outdoors _____ Indoors _____

Can system be protected from freeze: Yes _____ No _____

Application requirements: (Check all that apply)

_____ TRUCK S _____ VANS _____ BUSES _____ VANS _____ CARS _____ TRACTORS

_____ CONTAINERS _____ TRACTOR-TRAILERS _____ OTHER (specify) _____

Additional comments: _____

PLEASE PROVIDE A DRAWING OF THE EXISTING OR NEW SITE PLAN ON PAGE 3 OR ATTACH DRAWING.

COMPLETE PAGE 3 AND REVIEW ALL QUESTIONS WITH SITE EVALUTATOR.

Please show all dimensions and indicate all flow paths of waste stream.

- | | | |
|--|-----------------------------------|-------------------------|
| WP Wash Pads | SP Sump | W Walls |
| PW Pressure Washer | SW Sewer | HB Hose Bibs |
| CT Collection Trough/Trench | ES Electrical Panels | AD Access Doors |
| EP Equipment Pad | WS Water Supply (domestic) | CA Covered Areas |
| UE Existing Underground utilities | ST Storage Tanks | EA Exposed Areas |
| B Buildings | SD Storm Drains | |

Please attach any drawing or photos and plans and fax, e-mail or mail to Hydro Tek Systems.

SIGNATURE OF SITE EVALUATOR: _____

PRINT NAME: _____ **DATE:** ____ / ____ / ____

FAX TO: 909) 799-9888 attn: A. Greer or e-mail to agreer@hydrotek.us.