



## COMMUNITY WATER SYSTEM QUESTIONNAIRE

Your project is very important to us. In order for us to determine the best possible solution to your needs you must provide as much information as is possible including test result and diagrams with descriptions of processes and/or existing treatment. We will be happy to contact you if more information is needed.

Contact Name: _____	Project Name: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____
e-mail: _____	

1. What is your daily water consumption? \_\_\_\_\_ (gallons / Liters per day - Use best guess if not known)
2. What is your peak water consumption? \_\_\_\_\_ (gal. / L per minute) Duration? \_\_\_\_\_ (Use best guess if not known).
3. What is the source of your water? \_\_\_\_\_ Ground \_\_\_\_\_ Surface \_\_\_\_\_ Catchment.
4. Please provide (fax or e-mail) the most recent analysis of the water (untreated and treated if available).
5. How many houses are serviced by the system? \_\_\_\_\_.
6. What is the distance to the furthest service? \_\_\_\_\_ (specify measuring unit).
7. Please provide a sketch of the present hydraulic layout, elevation, capacity of any reservoir or dam, and available space for the water treatment equipment.
8. What electrical power is available?  
 Standard Line, \_\_\_\_\_ Volts, \_\_\_\_\_ Phases; \_\_\_\_\_ Cycles (Hz.).  
 Local Generator, \_\_\_\_\_ Volts, \_\_\_\_\_ Phases, \_\_\_\_\_ Cycles.
9. Please provide a sketch or description of your current water treatment (if any). Include all relevant information such as - sizes, capacities, flow rates, distances, materials of construction, chemicals used, size limitations, etc. We will consider all relevant information in the design process.
10. What is your dominant water problem? Please check and give test results (if available) in space provided.
 

Arsenic _____	H <sub>2</sub> S _____	pH _____
Bacteria _____	Iron _____	Turbidity _____
Color/Taste/Odor _____	Lead _____	Virus _____ (Please Describe)
Hardness _____	Manganese _____	Other? _____
11. Required / Desired project completion date? \_\_\_\_\_.

We will be pleased to review this information and propose the best water treatment for your application. Please fax or e-mail this form with all information and drawing(s) to: Application Design at **1-360-794-0856**. If you have any questions please call our application design department at **1-360-794-9511**.