High-Capacity Ultrafiltration System Sizing and Design Questionnaire

Project Name: _____

Project Location: _____

Engineer/Rep/Contractor/Rep Name: _____

Please attach any available water testing reports

System Information

Building type:

- ☐ Hospital
- ☐ Apartment complex
- ☐ Nursing home
- ☐ Hotel/motel
- ☐ Dental clinic
- ☐ Residential
- ☐ Office building
- ☐ Other: _____

Building condition:

- ☐ New building/pre-construction
- ☐ Retrofit/remodel
- ☐ Existing
- ☐ Addition

Treatment objective:

- ☐ Legionella mitigation
- ☐ Sediment reduction
- ☐ Brown water events
- ☐ Turbidity reduction
- ☐ Other: _____

Water quality information (attach water quality report if available, or send a sample in for testing):

- ☐ Hardness: _____
- ☐ Manganese: _____
- ☐ Iron: _____
- ☐ Tannins: _____
- ☐ pH: _____
- ☐ TDS (total dissolved solids): _____

Incoming water pressure: _____

Type of use (multiple may apply):

☐ Point of entry (whole building)

Peak flow rate: _____ Expected average flow rate: _____

Flush valve fixture contribution to total peak GPM demand: _____%

If unknown, please list number of fixtures and fixture type: _____

_____

_____

☐ Point of use

Peak flow rate: _____

Is unknown, please describe installation and provide any model number information available:

_____

_____

_____

☐ Hot water recirc

Peak flow rate: _____

Is unknown, please list the make and model of the recirc pump: _____

_____

_____

☐ Other: _____

Point-of-entry systems require a 30 second interruption of water delivery every 24 hours for membrane flushing. Additionally, quarterly membrane integrity testing (recommended) requires 25 minutes of down-time. These activities typically occur at night. Included hydropneumatic tanks may not suffice to provide water during these periods. There is also the very low possibility of a system alarm scenario which could result in longer shutdown. To contend with these situations, Water Control recommends a redundant system — or one of our temporary/emergency (filtered) System Bypass Assemblies. Bypass assemblies are sized based upon required peak flow rates in these off-hour or emergency periods.

Do you require a system bypass assembly? ☐ Yes ☐ No

If yes, what bypass flow rate would suffice? (please indicate actual GPM or % of normal peak flow rate requirement) _____

Where will this equipment be located? _____

How much space is available for installation? _____

System will require 120V power, is this available? ☐ Yes ☐ No

Is there a budget cost you had planned for on this equipment? _____

Other comments or requests:

_____

_____

Submitting this Questionnaire

Thank you for working with Water Control. We value your business. Please fax, email, or mail this questionnaire to us (or your local representative) for processing and system selection.

Email: engineering@watercontrolinc.com