



Commercial High-Purity Systems Sizing & Design Questionnaire

Project Name _____

Project Location _____

Engineer/Contractor/Rep Name(s) _____

PLEASE ATTACH ANY AVAILABLE WATER TESTING REPORTS

1) Incoming (raw) water quality levels (Grains per gallon or mg/l hardness, iron ppm): _____

2) Incoming (raw) water TDS (Total Dissolved Solids): _____ Silica: _____

3) City or Well water: City Well

4) Incoming water pressure (psi): _____

5) Incoming water temperature: _____

6) Peak flow rate (gpm) required through high-purity system (if known): _____

7) If peak flow rate is not known, please list all fixtures/equipment (and quantities) to receive high-purity water:

8) Estimated gallons-per-day usage for all fixtures/equipment using high-purity water (if known): _____

9) If GPD not known, please give some information on how many occupants or users the facility might have on a typical day:

10) Hours of operation: _____

11) Distance to the furthest fixture on high-purity water:

Vertical feet _____ Horizontal feet _____

12) Do you require a packaged skid system (pre-piped, pre-wired, pre-plumbed, delivered to jobsite)? Yes No

13) If you answered yes to #12, how wide is the mechanical room door? _____

14) If you answered yes to #12, how tall is the mechanical room ceiling? _____

15) Do you require a recirculation system? Yes No

16) Available power supply: Voltage _____ Phase _____

17) Other comments or requests?

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

Contact Our Technical Support Department at:

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