

**LANCASTER<sup>®</sup>**  
**WATER TREATMENT**

**COMMERCIAL / INDUSTRIAL WORK SHEET**

Fill in all areas that apply.

Job name: \_\_\_\_\_ Date \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
Contact person: \_\_\_\_\_ E-mail: \_\_\_\_\_

**A. Water to be used for:**

- |                                                                    |                                      |
|--------------------------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> school number of students _____           | <input type="checkbox"/> laundromat  |
| <input type="checkbox"/> motel number of units _____               | <input type="checkbox"/> dishwasher  |
| <input type="checkbox"/> apartments number of units _____          | <input type="checkbox"/> boiler      |
| <input type="checkbox"/> restaurant number of guests per day _____ | <input type="checkbox"/> other _____ |

**B. Hours per day operation** \_\_\_\_\_ **Days per week** \_\_\_\_\_

**C. Water requirements**

constant flow rate \_\_\_\_\_ gpm  
daily usage/24 hour \_\_\_\_\_ gallons  
was usage determined by  fixture count?  flow meter?  water bill?  
\*see below

**D. Fixture count**

tubs/showers: \_\_\_\_\_ sinks: \_\_\_\_\_ urinals: \_\_\_\_\_ tank type toilets: \_\_\_\_\_  
flush valve toilets: \_\_\_\_\_ comm. clothes washers: \_\_\_\_\_ comm. dishwashers: \_\_\_\_\_

**E. Water quality required**  all water treated  hot water only treated  
permissible hardness leakage \_\_\_\_\_ ppm?

**F. Water influent**

Source:  municipal  private well  other \_\_\_\_\_  
  
Water composition:  
hardness \_\_\_\_\_ gpg      pH \_\_\_\_\_      manganese \_\_\_\_\_ ppm  
turbidity \_\_\_\_\_      iron \_\_\_\_\_ ppm      H<sub>2</sub>S \_\_\_\_\_  
TDS \_\_\_\_\_      color when drawn \_\_\_\_\_

**G. Facilities**

supply pipe size \_\_\_\_\_ inches      operating pressure \_\_\_\_\_ psi  
pump capacity \_\_\_\_\_ gpm      pressure at point of installation \_\_\_\_\_ psi  
constant pressure pump yes or no      c.p. pump rated at \_\_\_\_\_ gpm, set at \_\_\_\_\_ psi  
drain line size \_\_\_\_\_ inches      number of floors in building \_\_\_\_\_  
minimum pressure allowed after water treatment \_\_\_\_\_ psi

**H. Installation details or limitations**

available floor space (inches) \_\_\_\_\_ length X \_\_\_\_\_ width X \_\_\_\_\_ height  
basement/ground level/or floor \_\_\_\_\_ weight versus floor support \_\_\_\_\_

**I. Installation details or limitations (cont'd)**

door openings \_\_\_\_\_ stairways \_\_\_\_\_  
remote brine tank location \_\_\_\_\_  
any other unusual installation requirements \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**J. Existing equipment at this prospect?**

tank size (inches): \_\_\_\_\_ diameter x \_\_\_\_\_ height  
valve size (inches): \_\_\_\_\_ cu. ft. resin \_\_\_\_\_  
make \_\_\_\_\_ model # \_\_\_\_\_ approx. age \_\_\_\_\_

**K. Existing equipment (cont'd)**

tank size (inches): \_\_\_\_\_ diameter x \_\_\_\_\_ height  
valve size (inches): \_\_\_\_\_ cu. ft. resin \_\_\_\_\_  
make \_\_\_\_\_ model # \_\_\_\_\_ approx. age \_\_\_\_\_

**L. Notes:**

Blank area for notes.