



## Project information

Project Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Project Location \_\_\_\_\_ Phone \_\_\_\_\_  
 Company \_\_\_\_\_ Email \_\_\_\_\_

## WWTP information

Max. ambient temperature \_\_\_\_\_ °F Number of aeration tanks \_\_\_\_\_  
 Min. ambient temperature \_\_\_\_\_ °F Number of Duty Blowers per tanks (can be left blank) \_\_\_\_\_  
 Max. relative humidity \_\_\_\_\_ % Number of Backup Blowers (can be left blank) \_\_\_\_\_  
 Altitude \_\_\_\_\_ ft asl

Process information on total requirement if individual blower capacity is open

Condition	Inlet temperature °F	Relative humidity %	Volume flow cfm	Discharge pressure psi	Yearly hours h
1					
2					
3					
4					
5					

## Blower requirement

Installation  New  Replacement  
 Indoor  Outdoor  
 Preferred technology (can be multiple)  Lobe  Screw  Multistage  Magnetic bearing turbo  Integrally geared turbo  Other \_\_\_\_\_  
 Motor  Fixed speed  Variable speed  
 Frequency convertor  No  Included  
 Sound insulating canopy  No  Included

Individual blower information if blower capacity is fixed

Condition	Inlet temperature °F	Relative humidity %	Volume flow cfm	Discharge pressure psi	Yearly hours h
1					
2					
3					
4					
5					

Special requirements/comments:

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Which technology floats your bubble?

