



## PROJECT INFORMATION

<b>Customer overview:</b>		
Customer: _____		
Country: _____		
Address: _____		
Proposed location: _____		
Contact person: _____		
Email: _____	telephone: _____	FAX: _____
Brief description of customer's activities: _____		

<b>Desalination project information:</b>		
Capacity or volume of production per day:		
<input type="checkbox"/> < 500 m <sup>3</sup> <input type="checkbox"/> 500 m <sup>3</sup> <input type="checkbox"/> 1000 m <sup>3</sup> <input type="checkbox"/> 2000 m <sup>3</sup> <input type="checkbox"/> 5000 m <sup>3</sup> <input type="checkbox"/> 10000 m <sup>3</sup> <input type="checkbox"/> Other _____		
The plant would consist of: <input type="checkbox"/> One single line <input type="checkbox"/> Several		
Intended time for installation and start up: _____		
Plant description:		
<input type="checkbox"/> New Plant <input type="checkbox"/> Existing / Expansion <input type="checkbox"/> Part of a treatment circuit <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors		
Feed Water source:	<input type="checkbox"/> Surface Seawater <input type="checkbox"/> Seawater well(s) <input type="checkbox"/> Brackish water	
Feed water analysis:	<input type="checkbox"/> YES (please, attach) <input type="checkbox"/> NO (refer to specific table for Water Analysis)	
Location of plant:	Distance from coast line: _____	Elevation over sea level: _____
Energy supply:	<input type="checkbox"/> From network <input type="checkbox"/> Diesel generator <input type="checkbox"/> Other: _____ Price: _____ (kW-h)	
Fresh Water Storage:	<input type="checkbox"/> Existing Facility Capacity: _____ m <sup>3</sup> <input type="checkbox"/> Projected Facility Capacity _____ m <sup>3</sup>	
Brine Disposal:	<input type="checkbox"/> Surface Water <input type="checkbox"/> Well <input type="checkbox"/> Other              Pumping required? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Main use for produced water:		
<input type="checkbox"/> Municipal / Potable <input type="checkbox"/> Irrigation <input type="checkbox"/> Tourism <input type="checkbox"/> Industry <input type="checkbox"/> Other		
Notes and comments: _____		

Please fill as much information as possible and send via fax or regular post to: **AQUALYNG AS**