

QUICK RESPONSE FORM

If you have an interest in "*THE CUBE*" *Oil/Water Separator* and would like our sales department to review and contact you on a current application, simply complete this form and fax to 336.727.8840.

Name		Title		
Company				
Address				
City	St	tate	Zip	
Phone				
1. Application				
2. Number of Units required _				
3. Types of oil				
4. Enter the influent oil concen	tration in ppm			
5. Where will separator be loca	ated: 🔲 above ground	below ground	☐ flush	
6. Is flow by : \square gravity	p umped			
7. Enter the flow rate of the inf	luent in GPM			
8. Enter the minimum and max	simum operating temperatu	re of the influent of	degrees F.	
(The expected range is 3	2° - 200°F) MIN	MAX		
9. Select the correct choice for	the specific gravity of the	water in the influent	: 🗖 1.0 📮 gr	eater than 1.0
10. Enter the specific gravity of	the oil to be removed from	the influent:		
11. What is the concentration of	f solids in the influent?			
Less than 200 ppm				
Greater than 200 ppm —				
12. Is the mean droplet size of o	oil know? 🔲 Yes 🔲 N	o		
If yes, enter the value of	the mean droplet size of the	e oil in microns ——		
13. Required Performance				
Required smallest drople	et size removed (Microns) _			
Required effluent oil con-	centration (ppm)			
Please check those HOH	options required:			
☐ Integral Oil Storage	☐ Flow-Control	☐ Heater/Freez	e Protection 🚨	Recovered Oil Pump-Out
☐ Influent Pump	☐ Sludge Pump-Out	Sludge Cham	ber	
☐ High-Level Control	☐ MYCELX Filtration	Pre & Post Cl	nemical treatment	
Materials of Construction re	quired:			
Carbon Steel	Fiberglass	ess Steel		
List any special requirem	ients			

This document must be filled out completely in order for the Sales Engineering department to respond accurately. A schematic of the system is desirable. In cases where data is unknown or not available, indicate accordingly.

Please feel free to call our office with any questions or comments at 336.727.4644.