



## UV Sizing Checklist | Custom Products

CONTACT INFORMATION			
CONTACT:		COMPANY:	DATE:
ADDRESS:			EMAIL:
PHONE:	FAX:	EMAIL:	QUOTE BY:
Aquafine Customer Service Rep:		Aquafine RSM:	
QUOTE TIMING:	<input type="checkbox"/> 24 HOURS <input type="checkbox"/> 48 HOURS <input type="checkbox"/> 1 WEEK <input type="checkbox"/> OTHER _____		

APPLICATION DATA *REQUIRED FOR QUOTATION	
MARKET TYPE:	<input type="checkbox"/> AQUACULTURE <input type="checkbox"/> BEVERAGE <input type="checkbox"/> BIOPHARMA <input type="checkbox"/> FOOD <input type="checkbox"/> HEALTHCARE <input type="checkbox"/> LIFE SCIENCES <input type="checkbox"/> MARINE <input type="checkbox"/> MICROELECTRONICS <input type="checkbox"/> OIL & GAS <input type="checkbox"/> POWER <input type="checkbox"/> REC WATER <input type="checkbox"/> OTHER _____
*FLUID TYPE:	<input type="checkbox"/> CITY WATER <input type="checkbox"/> SURFACE WATER <input type="checkbox"/> SPRING WATER <input type="checkbox"/> RAIN WATER <input type="checkbox"/> RO WATER <input type="checkbox"/> WELL WATER <input type="checkbox"/> SEA WATER <input type="checkbox"/> LIQUID SUGAR <input type="checkbox"/> WASTE WATER <input type="checkbox"/> LOW UVT (<20%) <sup>2</sup> <input type="checkbox"/> OTHER _____
*TREATMENT OBJECTIVE:	<input type="checkbox"/> DISINFECTION <input type="checkbox"/> TOC REDUCTION <input type="checkbox"/> OZONE DESTRUCTION <input type="checkbox"/> AOP <sup>3</sup> <input type="checkbox"/> CHLORINE DESTRUCTION <input type="checkbox"/> CHLORAMINE DESTRUCTION <input type="checkbox"/> OTHER _____
*PRE-TREATMENT BEFORE UV UNIT:	<input type="checkbox"/> PARTICULATE FILTER, _____ micron <input type="checkbox"/> CARBON BED <input type="checkbox"/> SOFTENER <input type="checkbox"/> RO <input type="checkbox"/> D.I. <input type="checkbox"/> OTHER _____
*UV TRANSMITTANCE (1cm, 254nm):	<input type="checkbox"/> 95% <input type="checkbox"/> 99% <input type="checkbox"/> OTHER _____
*FLOW RATE, MAXIMUM:	_____ <input type="checkbox"/> GPM <input type="checkbox"/> m <sup>3</sup> /hr
WATER QUALITY PARAMETERS:	HARDNESS _____ mg/L              IRON _____ mg/L              TURBIDITY _____ NTU              TSS _____ mg/L              pH _____
PRESSURE, MAXIMUM:	_____ <input type="checkbox"/> PSIG <input type="checkbox"/> bar G
FLUID TEMP., NORMAL:	_____ <input type="checkbox"/> °F <input type="checkbox"/> °C
FLUID TEMP., MAX/MIN:	_____ <input type="checkbox"/> °F <input type="checkbox"/> °C <input type="checkbox"/> SUBJECT TO SANITIZATION, TYPE _____
LAMP TECHNOLOGY DESIRED:	<input type="checkbox"/> AMALGAM <input type="checkbox"/> MEDIUM PRESSURE <input type="checkbox"/> LOW PRESSURE LOW OUTPUT (LPLO) <input type="checkbox"/> LOW PRESSURE HIGH OUTPUT (LPHO)
INLET/OUTLET CONCENTRATION:	INLET _____ / OUTLET _____ <input type="checkbox"/> PPB <input type="checkbox"/> PPM
MINIMUM UV DOSE SPECIFIED:	<input type="checkbox"/> NO <input type="checkbox"/> YES – if yes: _____ <input type="checkbox"/> mJ/cm <sup>2</sup> <input type="checkbox"/> μW-sec/cm <sup>2</sup> <input type="checkbox"/> J/m <sup>2</sup>
BIOASSAY VALIDATION REQUIRED:	<input type="checkbox"/> NO <input type="checkbox"/> YES – if yes, Specify Regulatory Body: _____

UV TREATMENT CHAMBER OPTIONS	
CHAMBER INSTALLATION ORIENTATION:	<input type="checkbox"/> (H) Horizontal Mounting <input type="checkbox"/> (V) Vertical Mounting <input type="checkbox"/> (S) Skid Mounting <sup>4</sup>
LAMP SERVICE ACCESS:	<input type="checkbox"/> (L) Left Side <input type="checkbox"/> (R) Right Side (as viewed from the control panel side)
INLET/OUTLET ROTATION:	<input type="checkbox"/> (A) 12 O'clock <input type="checkbox"/> (B) 3 O'clock <input type="checkbox"/> (C) 6 O'clock <input type="checkbox"/> (D) 9 O'clock
INLET/OUTLET CUSTOMER CONNECTION:	SIZE: _____ TYPE: <input type="checkbox"/> Flanged <input type="checkbox"/> Sanitary (Tri-Clamp® Ferrule) <input type="checkbox"/> NPT <input type="checkbox"/> Other <sup>4</sup> : _____ APPLICABLE STANDARD: <input type="checkbox"/> ANSI B16.5 150 lb <input type="checkbox"/> DIN 2576 PN10 <sup>4</sup> <input type="checkbox"/> Other <sup>4</sup> : _____ Isolation Valves Included? <input type="checkbox"/> No <input type="checkbox"/> Yes <sup>4</sup> , Type: _____
INLET/OUTLET MANIFOLD:	<input type="checkbox"/> No <input type="checkbox"/> Adapter/Sizing <input type="checkbox"/> UV Light Trap <input type="checkbox"/> Header Skid <sup>4</sup> <input type="checkbox"/> Other <sup>4</sup> : _____
SAMPLE PORT CUSTOMER CONNECTION:	<input type="checkbox"/> No <input type="checkbox"/> Yes

QF 754-005 UV Sizing Checklist for Custom Products

<b>WETTED SURFACE FINISH (Ra):</b>	<input type="checkbox"/> Standard Finish <input type="checkbox"/> Ultra Finish, Ra: _____
<b>GASKET &amp; O-RING MATERIAL:</b>	<input type="checkbox"/> EPDM <input type="checkbox"/> Silicone <input type="checkbox"/> Viton® <input type="checkbox"/> Other <sup>1</sup> : _____
<b>COMPRESSION NUT MATERIAL:</b>	<input type="checkbox"/> Polymer <input type="checkbox"/> Stainless Steel
<b>QUARTZ SLEEVE WIPER SYSTEM:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes – if yes: <input type="checkbox"/> Manual <input type="checkbox"/> Automatic (only available on UVLogic, UVSwiftSC, UVFit, UVSwiftBev)
<b>UV SENSOR:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes – if yes, do you want NIST certificates? <input type="checkbox"/> No <input type="checkbox"/> Yes
<b>WATER TEMPERATURE SWITCH:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>UV LAMP REQUIREMENT</b>	
<b>VALIDATED UV LAMP:</b>	<input type="checkbox"/> No (STD) <input type="checkbox"/> Validated
<b>ELECTRICAL CONTROL PANEL OPTIONS</b>	
<b>AGENCY APPROVAL:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes – if yes: <input type="checkbox"/> CE <input type="checkbox"/> UL <input type="checkbox"/> Other <sup>1</sup> : _____
<b>PANEL RATING:</b>	<input type="checkbox"/> No <input type="checkbox"/> Type1 <input type="checkbox"/> Type3R <input type="checkbox"/> Type12 <input type="checkbox"/> Type4 <input type="checkbox"/> Type4X <input type="checkbox"/> Other <sup>1</sup> : _____
<b>EXTERNAL COOLER:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes, Type: _____
<b>CONTROL PANEL MATERIAL:</b>	<input type="checkbox"/> Painted Carbon Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Other <sup>1</sup> : _____
<b>INSTALLATION MOUNTING:</b>	<input type="checkbox"/> Fixed (Local) <input type="checkbox"/> Remote – if remote, conduit length: <input type="checkbox"/> 9' <input type="checkbox"/> 15' <input type="checkbox"/> 25' <input type="checkbox"/> Other <sup>1</sup> : _____
<b>CONTROLLER TYPE:</b>	<input type="checkbox"/> Analog (No Digital display) <input type="checkbox"/> Digital Intensity/Temperature Display (Monitoring Station, UV Vision 2000, or P-40 Board)
<b>REMOTE ON/OFF:</b>	<input type="checkbox"/> No <input type="checkbox"/> 24V HOA <input type="checkbox"/> 120VAC HOA <input type="checkbox"/> 240VAC HOA <input type="checkbox"/> Other <sup>1</sup> : _____
<b>LAMP OUT ALERT:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>CONTROL OPTION; ANALOG INPUT:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Other <sup>1</sup> : _____
<b>CONTROL OPTION; ANALOG OUTPUT:</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Other <sup>1</sup> : _____
<b>ELECTRICAL REQUIREMENTS</b>	
<b>CUSTOMER SUPPLY VOLTAGE:</b>	<input type="checkbox"/> 120V/60Hz <input type="checkbox"/> 240V/50Hz <input type="checkbox"/> 240V/60Hz <input type="checkbox"/> 208V/60Hz <input type="checkbox"/> Other <sup>1</sup> : _____

<sup>1</sup>Request QF-752-012 Design Request Form: Waste Water Disinfection  
<sup>2</sup>Request QF-752-013 Design Request Form: Low UVT Disinfection  
<sup>3</sup>Request QF-752-014 Design Request Form: Contaminant Reduction - AOP  
<sup>4</sup>Request QF-752-006 Custom Configuration List Form

FINAL SIZING RECOMMENDATIONS ARE BASED ON APPLICATION REQUIREMENTS, AND MAY NOT BE AVAILABLE WITH ALL OPTIONS SHOWN. FOR MORE INFORMATION PLEASE CONTACT AQUAFINE. Aquafine Corporation will not be held to or liable for any changes or submittals made to this form without consent and agreement of all signed parties.