

Request for Proposal Number: _____
 Project Name: _____
 City/State: _____
 Owner: _____
 Site Contact: _____
 Engineer: _____
 Rep: _____

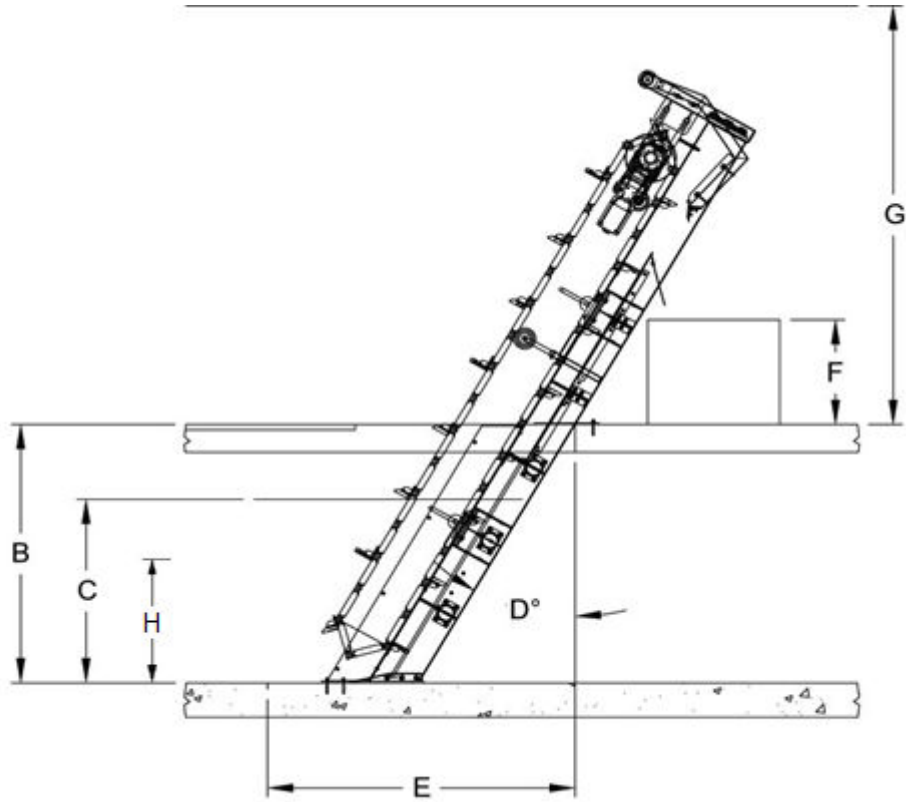
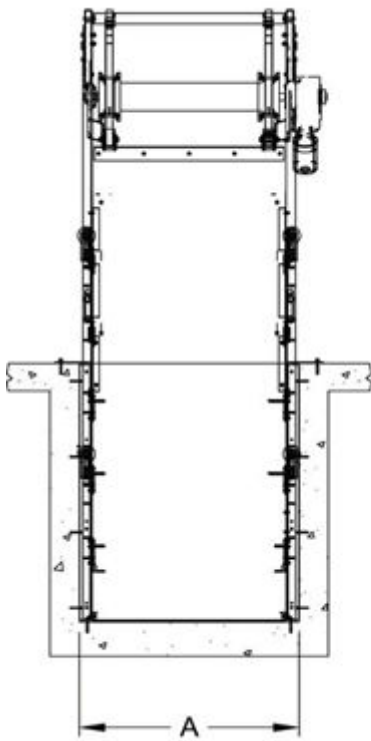
Date Requestd By: _____
 Date: _____
 Site Constraints: _____

 Notes: _____

Project Requirements:

Number of Screens: _____
 Model Requested: Select _____
 Bar Opening Requested: Select _____
 Material of Construction: Select _____
 Project Phase: Select _____
 Site (New or Existing): Select _____

Application: Select _____
 Flow (Pumped/Gravity): Select _____
 Debris Type (WW/septage/sludge/grease): _____
 Average Flow (MGD): _____ **Per Channel**
 Max Flow (MGD): _____ **Per Channel**
 Total Plant Flow (MGD): _____
 Additional Equipment: Select _____
 How Many (Type): _____



Site Data:

A) Channel Width (ft): _____
 B) Invert to Top of Channel (ft): _____
 Invert to Operating Deck (ft): _____
 C) Max. Water Level (ft): _____ Select
 D) Desired Angle (from Vertical): Select

E) Channel Distance (ft): _____
 F) Container Height (ft): _____
 G) Ceiling Height (ft): _____
 H) Min. Water Level (ft): _____ Select

Description of Container Location: "distance from screen discharge, same elevation or offset, left or right (standing from upstream)."