Membrane Installation Questionnaire

Please complete this questionnaire (two pages) and mail or E-mail to the address or number at the bottom of page 2, Attn: Frank Buehner.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title:</th>
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<tbody>
<tr>
<td>Company</td>
<td>Div./Dept.:</td>
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<td>Mailing Address</td>
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**Process Information**

1. Application is: New [ ] Retrofit [ ]

[ ] Module replacement

Present module manufacturer

Module Model No.:

Number of Trains: Number of Stages:

Number of Vessels Per Stage:

Number of Membranes Per Vessel:

Micron rating:

2. Process will be: [ ] Continuous [ ] Batch [ ] Semi-continuous

@ ambient temp: cp

@ feed temp: cp

3. Project type: [ ] Waste treatment [ ] Product recovery [ ] Other

4. Permeate: [ ] Recycled [ ] Disposed

5. Residue: [ ] Recycled [ ] Disposed

6. Feed Source:

7. Specific gravity:

8. Silt Density Index SDI

9. Total Hardness: m Total Alkalinity: p

10. Viscosity:

11. Material compatibility:

304 SS [ ] 316 SS [ ] Non- Corrosive [ ] 316L SS [ ] Hastelloy C

12. Total Suspended Solids, TSS: mg/l

13. Total Dissolved Solids ,TDS: mg/l

14. Total organic carbon, TOC: mg/l

15. Chloride/Halogen: mg/l

16. Free Chlorine

17. Turbidity: NTU

Please continue to next page →
Feed Stream Description

<table>
<thead>
<tr>
<th>Component</th>
<th>M. W., weight % or Particle Size Range (μm)</th>
<th>Soluble</th>
<th>Feed Wt. %</th>
<th>Filtrate Wt. %</th>
<th>Concentrate Wt. %</th>
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Membrane System Information

Process objectives:

Describe Previous membrane separation experience for the proposed process

Simple sketch of the present system: Simple sketch of proposed system including membrane:

Please note cost targets such as ¢/unit of feed, ¢/unit of filtrate, ¢/unit of concentrate. Please specify units:

Current Operating Cost Data

In order to assess optimal/cost effective systems designs for your separation requirements, please provide the following basic applicable cost data for your intended operating location.

Electricity: ¢ perk kwh Operating labor: $/hr.

Projected/Estimated Timing for Project (Quarter or Month/Year)

Test System: | Purchase: | Installation: |

Please forward completed questionnaire to one of the following:

fmt-houston@att.net or

Attn: Frank Buehner at

FMT, Inc
8342 Silvan Wind
Houston, TX 77040
Attn: Frank Buehner
www.fmt-houston.com
fmt-houston@att.net

Thank You