



Project information

Project Name _____ Contact Person _____
 Project Location _____ Phone _____
 Company _____ Email _____

WWTP information

Max. ambient temperature _____ °C Number of aeration tanks _____
 Min. ambient temperature _____ °C Number of Duty Blowers per tanks (can be left blank) _____
 Max. relative humidity _____ % Number of Backup Blowers (can be left blank) _____
 Altitude _____ m asl

Process information on total requirement if individual blower capacity is open

Condition	Inlet temperature °C	Relative humidity %	Volume flow m ³ /h	Discharge pressure mbar	Yearly hours h
1					
2					
3					
4					
5					

Blower requirement

Installation New Replacement
 Indoor Outdoor
 Preferred technology (can be multiple) Lobe Screw Multistage Magnetic bearing turbo Integrally geared turbo Other _____
 Motor Fixed speed Variable speed
 Frequency convertor No Included
 Sound insulating canopy No Included

Individual blower information if blower capacity is fixed

Condition	Inlet temperature °C	Relative humidity %	Volume flow m ³ /h	Discharge pressure mbar	Yearly hours h
1					
2					
3					
4					
5					

Special requirements/comments:

Which technology floats your bubble?

