

Industrial Wastewater Treatment Interview Sheet

Date completed		Company name	
Division		Representative	
Address		E-mail	
TEL		FAX	

Factory / production line business category			
About production line	Operating hours : () hours per day		Operating days : () days per week
Current treatment method for wastewater / sludge			
Size of equipment	W : () mm	D : () mm	H : () mm
Capacity of equipment	m ³		
Water depth	mm		
Monthly cost			
Wastewater type			
Daily volume of wastewater	m ³ /day		
Putrid odor	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Discharge method	<input type="checkbox"/> Discharge to sewage system <input type="checkbox"/> Discharge to river		
Quality of untreated water	BOD : () mg/L		SS : () mg/L
	COD : () mg/L		PH : ()
	N-Hex : () mg/L		
Quality of treated water (current)	BOD : () mg/L		SS : () mg/L
	COD : () mg/L		PH : ()
	N-Hex : () mg/L		
Quality of treated water (standard value for discharge)	BOD : () mg/L		SS : () mg/L
	COD : () mg/L		PH : ()
	N-Hex : () mg/L		
Schedule for introduction of circulating water treatment equipment	<input type="checkbox"/> Budget allocated (Year : , approximate month :)		
	<input type="checkbox"/> Under consideration <input checked="" type="checkbox"/> Currently gathering information		
	Budget for equipment introduction : ()		
	Are you considering equipment from a manufacturer other than Aience? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Please write any questions or requests in the space below.

Thank you very much.

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