

The information provided on this sheet will help us in selecting a system for you. It is important you are as accurate as possible with these details and keep us informed should any change.

Contact Name	Company
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Address	
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Email	
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Tel	
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Environmental Conditions

No of tanks: _____ **Tank size(s) (litres):** _____ **Suggested flow rate (l/m):** _____

System mounting: Outside (enclosure) Inside

Above tank Max lift (from tank bottom) (m): _____

Below tank Max head (to highest point) (m): _____

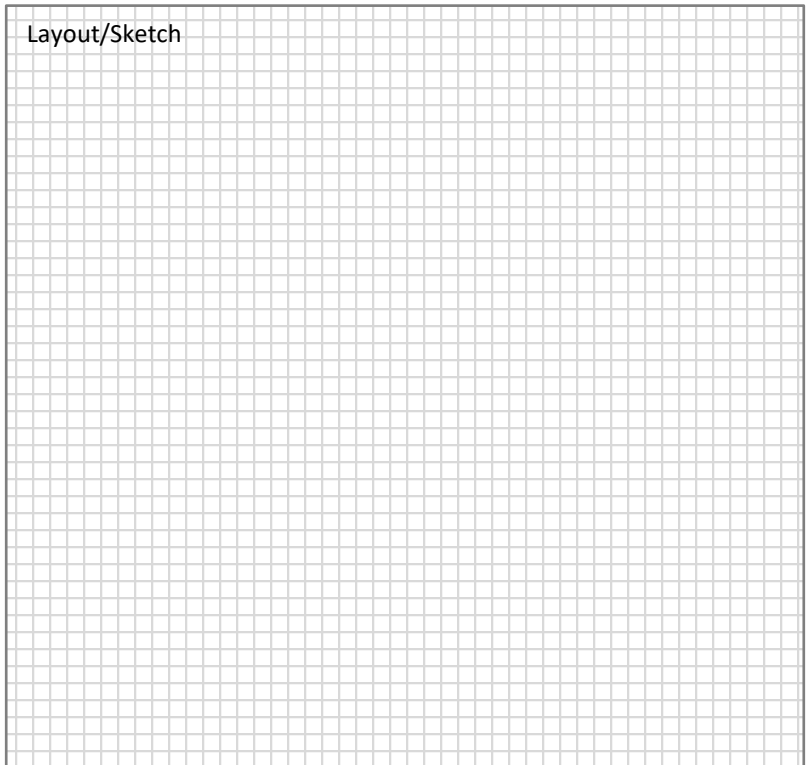
System on level with tank

Power: 220v 50hz 1ph AC 24v DC 12v DC Other: _____

Options required

- 2 / 3 / 4 / 5 tank changeover
- Auto Drain of water
- Stainless steel drip tray
- Modbus BMS
- Other BMS
- Chemical dosing
- Manual self-priming pump
- Automatic self-priming pump
- Stainless Steel Enclosure
- Visual flow indicator
- Other: _____

Layout/Sketch



Application Notes

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