NEW COOLING TOWER DATA SHEET

Please fill out the form fields in the most comprehensive way possible. Additional documents may be attached and described in the 'Notes' sections below.

Date In: _____ ICST Salesperson: _____

Due Date: _____ ICST Representative: _____

Project/Proposal Name: _____ Proposal Number: _____

Bid Type: ☐ Engineering ☐ Budgetary ☐ Firm ☐ Priority | Note:

EVALUATION/BUYING BASIS

☐ Price ☐ Size ☐ Horse Power ☐ Performance ☐ Noise ☐ Pump Head

Buying Notes:

CUSTOMER INFORMATION

EPC/Customer Name: _____ Contact Name: _____

Street Address: _____ Suite/Bldg/Floor: _____

City: _____ State: _____ Zip: _____

Country: _____ Telephone: _____

Email Address: _____ Website: _____

BID INFO

Submit Bid to: ☐ Engineer ☐ Owner ☐ Rep | Email Proposal Acceptable? ☐ Yes ☐ No

Estimated Purchase Date: | Bid Source: ☐ Rep Outside Inside

Financing Approved? ☐ Yes ☐ No | ☐ Vendor ☐ Sales ☐ Sales Call

Notes for Bid: _____

TOWER INFORMATION

☐ Crossflow ☐ Counterflow ☐ Other | Specialty Components ☐ Package ☐ Plume Abatement ☐ Lightning Protection ☐ Fire Protection

Number of Cells:

Tower Configuration: ☐ In-line ☐ B2B ☐ Other | Flow | GPM: | M^3: | HWT:

Cell Dimensions: | Fan HP/Cell: | Altitude: | CWT:

Tower Dimensions: | Pump Head Height: | Heat Duty: | WBT:

Basin Type: ☐ Concrete ☐ FRP ☐ Stainless | Structure: ☐ Concrete ☐ FRP ☐ Wood

Water Quality: ☐ Good ☐ Intermediate ☐ Poor ☐ Sea Water | Fill Type: ☐ Film ☐ Splash ☐ Non-Clog

Industry: ☐ Power ☐ Geothermal ☐ Pulp/Paper ☐ Refinery ☐ Air Sep ☐ Manufacturing ☐ Chemical ☐ Other | Specific Product: _____

Location/ Restrictions:	Noise Requirements:	Drift Requirements:
Estimated Start Date:	Materials on Site Date:	Finish Date:

OWNER INFORMATION

Owner Name: _____ Contact Name: _____

Street Address: _____ Suite/Bldg/Floor: _____

City: _____ State: _____ Zip: _____

Country: _____ Telephone: _____

Email Address: _____ Website: _____