

QUESTIONNAIRE

Contact Information.

Company: _____ Industry: _____
 Address: _____ Country: _____ Contact Person: _____
 Email: _____ Phone: _____ Fax: _____

Technical Information

Production process: _____
 Emission source: _____
 Operating hours per year: _____

	Min	Normal	Max	Unit
Total flow rate				<input type="checkbox"/> Nm ³ /h <input type="checkbox"/> m ³ /h <input type="checkbox"/> kg/h
Waste gas temperature				°C
Waste gas humidity relative humidity				at temperatures min/normal/max <input type="checkbox"/> %rel
or absolute humidity				<input type="checkbox"/> g/Nm ³ <input type="checkbox"/> Vol% <input type="checkbox"/> kg/kg _{dry}
O ₂ content				<input type="checkbox"/> g/Nm ³ <input type="checkbox"/> Vol% <input type="checkbox"/> ppm
Pressure at take-over ⁽⁺⁾ / ₍₋₎				<input type="checkbox"/> Pa <input type="checkbox"/> mbar <input type="checkbox"/> mmWC

Pollutants

	Min	Normal	Max	Unit
Gaseous organic contaminants ¹				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
Gaseous inorganic contaminants ²				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
Organic PM				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
Inorganic PM				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm
				<input type="checkbox"/> mg/Nm ³ <input type="checkbox"/> kg/h <input type="checkbox"/> ppm

Required emission limits

TOC: _____ CO: _____
 NO_x: _____ others: _____

Energy supply

Heating Energy: gas propane oil electric energy
 Power supply: _____ Volt _____ Hertz

Commercial information

Offer by: _____ Placement of order by: _____
 Delivery by: _____ Commissioning by: _____
Notes: _____

¹ Please fill in the actual substance's or TOC; VOC, solvents, etc.

² for example. CO, NH₃, NO_x, SO_x, HCl, ...