



Water Booster Station

Name of system or owner: _____ Phone (____) ____ - ____

Street Address: _____ City _____ State ____ Zip: _____

Name of the existing station _____

Average estimated daily flow: _____ GPD

Voltage _____ Phase _____

Design output range of booster station _____ GPM to _____ GPM

Design Total Dynamic Pressure range of system _____ TDP

Water main diameter _____ (ft) Water main Length _____ (ft)

Total Static Head (Elevation from pump output to highest point in water main) _____

Are drawings of the current system available? Yes / No

Size or dimensions of the pump house _____ (ft) X _____ (ft)

Is there adequate room for the OEC torque control booster system? Yes / No

Is there a separate valve chamber? Yes / No

What is the geographical elevation of pumps in the overall system? _____ (ft)

Number of existing pumps _____ List the brand & model number of each pump:

Brand: _____ Model Number: _____

Brand: _____ Model Number: _____

Brand: _____ Model Number: _____

Number of existing VFD's _____ List the brand & model number of each VFD:

Brand: _____ Model Number: _____

Brand: _____ Model Number: _____

Brand: _____ Model Number: _____

What is the desired system pressure at the pump discharge? _____ PSI

Will there be additional demand on the system in the future? Yes / No