



Environmental Dynamics Inc.

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AERATION DESIGN INFORMATION

1. Project Name: _____
Project Location: _____

2. Consulting Engineer or Plant Information
Co. Name _____ Contact Name _____
Street _____ Position _____
P.O. Box _____ Phone _____
City/State/Zip _____ Fax _____
Country _____

3. Type of Project: New _____ Upgrade _____ .
If upgrade give blower model or specifications.

4. Type of Waste: _____.

5. Treatment Process: _____.

6. Basin Liquid Temperature: Summer ____ °F/C Winter ____ °F/C

7. Elevation (Plant site elevation above sea level): _____

8. Basin Dissolved Oxygen Concentration _____ mg/l

9. Alpha and Beta Factors: Alpha _____ Beta _____

10. Design Avg. Flow _____ Peak Flow _____

11. Influent - BOD mg/l _____ Effluent Required - _____.

12. Influent - NH₃-N mg/l _____ Effluent Required - _____.

13. Number of Aerated Basins: _____
Depth _____ Length _____ Width _____.

14. When do you need this information? _____

15. From: Name _____
Address _____
Phone _____ Fax _____

16. Show sketch on back of this form.