	REQUEST FOR FREE FILTRATION & HYDRAULIC DESIGN
	(Please use one sheet for each pool) - (Tick or "X" where appropriate) - (All information must be provided)
PROJECT NAME:	
Company Name:	Date:- …… / …… / ……..
Builder's name, Mob. & Fax contact #s:	
Email address:	
State installed:	WA [ ] -- SA [ ] -- ACT [ ] -- Vic [ ] -- NSW [ ] -- Qld [ ] -- Tas [ ] -- NT [ ]
Application of use:	Hotel/Motel [ ] -- Residential apartments [ ] -- School [ ] -- Caravan Park [ ]
	Health Resort [ ] -- Hostels [ ] -- university [ ] -- Sports & Leisure Centre [ ]
	Work Place [ ] -- Gymnasium [ ] -- Retirement Village [ ] -- Hydrotherapy [ ]
	Learn to Swim [ ] -- Club [ ] -- Children's Play [ ]
Type of use:	Swimming [ ] Entertainment [ ] -- Therapy [ ] -- SPA [ ] -- Children's Play [ ] -- Education [ ]
Other type of use:	
Construction:	Wet Deck [ ] -- Skimmers [ ] -- Negative edge [ ] -- Other……
Location:	Indoor [ ] -- outdoor [ ]
Heating:	Heated [ ] -- Unheated [ ]
Pool Dimensions:	Length [ ]m -- Width [ ]m -- or pool volume [ ]m3
Depths:	From [ ]mm to [ ]mm
Turn over rate requested -- (Hrs):	[ ] -- or as per State Health Guidelines -- [ ] -- or as suggested by ASPC [ ]
Pipe run to nearest outlet/inlet (m):	Suction pipe [ ]m -- Discharge Pipe [ ]m
Plant Room Floor Slab:	Above W/L by [ ]mm -- Below W/L by [ ]mm -- Distance from pool [ ]m
Plant Room size available (m2):	[ ]m2 -- Unlimited [ ] -- Unknown [ ]
Preferred equipment manufacturer:	
Plan supplied:	Yes [ ] -- No [ ] (Please provide plan wherever possible)
Disinfection method preferred:	Liquid Chlorine [ ] -- Salt [ ] -- Bromine [ ] -- Other ……
Other information or requirements:	

NB:- REQUEST WILL BE IGNORED UNLESS EMAIL ADDRESS IS INCLUDED ALONG WITH ALL OTHER INFORMATION.

DON BULLOCK
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AADVANCE SWIMMING POOL CONSULTANTS

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