



CONTINUOUS SLUDGE DRYER APPLICATION DATA FORM

Company _____
 Address _____
 City/State/Zip _____
 Contact _____ Title _____
 Phone _____ Fax _____
 Email _____
 Sales Rep _____ Company _____

Type of Waste

Metal Hydroxide _____
 Other (Please Specify) _____
 Oils or Organics Present? Select One: Yes No
 Chlorides Present? Select One: Yes No

Treatment Processes

Chemical Select One: Yes No If yes, describe _____
 Biological Select One: Yes No If yes, describe _____
 Neutralization Select One: Yes No If yes, describe _____
 Flocculation Select One: Yes No If yes, describe _____
 Other Please Describe: _____
 Material Classified as Hazardous Waste? Select One: Yes No EPA ID No. _____

Filter Press

Size: _____ Cubic feet Number of Filter Plates: _____ Plate Size: _____ mm
 % Cake Solids (From Press) _____ % Frequency of Emptying (Per Day): _____ Hours of Operation (Per Day): _____

Sludge Disposal Costs

Disposal Costs \$ _____ Select One: per ton cubic yard bag drum roll off
 Container Costs \$ _____
 Transportation Costs \$ _____ Select One: per ton cubic yard bag drum roll off
 Lab Fees \$ _____
 Rental Fee for Container \$ _____
 Taxes \$ _____
 Bag / Drum Cost \$ _____

Sludge Dryer Installation

Electric Available? _____ Volts Natural Gas Available? Select One: Yes No

Equipment Objectives

Material for Disposal Material for Recycle Material is Product Vol. Reduction Weight Reduction
 Desired Moisture Content of Dried Material: _____ % Other: _____