



LAB SAMPLE DATA FORM

***Please Complete This Form For Sending In PREPAID 2-1/2 Gallon Composite Sample(s) For Free Lab Evaluation.
Ship To: Prime Solution, Inc. – Attn: Lab – 610 S. Platt Street – Otsego, MI 49078 USA**

Date:	Completed By:
COMPANY/PLANT INFO:	
Company/Plant Name:	
Address:	
City/State/Zip:	
Contact(s):	
PH:	FX:
E-Mail:	

PSI Rep Firm:	Contact:
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KEY PLANT INFO:	SLUDGE/PROCESS INFO:
Application Description (municipal/ industrial/GOM):	
Sludge Source:	
Sludge Type:	
Ratio (% primary/% secondary):	
Sludge Process (aerobic/anaerobic/ DAF/ATAD/etc.):	
Sludge Process Pretreatment (ferric/ caustic/etc.):	
Any Known Special Sludge Characteristics:	
Phosphorous Removal (biologically/chemically):	
Sludge Age/Digestion Time (days):	
FOG:	
Temperature:	



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KEY PLANT INFO:	SLUDGE/PROCESS INFO:
pH:	
Feed Solids (% TS):	
Volatile Solids (% VTS):	
Required Flow Rate (gpm):	
Required Solids Throughput (d.s. lbs./hr.):	
Required Dewatered Cake Solids (% TS):	
Required Capture Rate (% TSS):	
Any Required Post Treatment:	
Polymer Currently Used:	
What Will Happen To Cake & Filtrate:	
Will You Require An On-Site Demonstration:	