



# WATER ANALYSIS FORM

FOR RESIDENTIAL AND COMMERCIAL APPLICATIONS (see back)

Report Number: \_\_\_\_\_

RETURN TO: **Great Lakes Green Products**  
10123 Bergin Rd.  
Howell, MI 48843  
Phone: (248) 847-5150  
Email: [customercare@greatlakesgreenproducts.com](mailto:customercare@greatlakesgreenproducts.com)

- Please complete entire form, including distributor information, for proper sizing equipment.
- **Health related contaminants i.e. microbiological (bacteria, cysts), chemical, lead or arsenic tests are not performed. Consult a State-Certified lab for testing health-related issues.**
- Water analysis is performed on hardness, iron, manganese, TDS, pH, tannin, turbidity and (optionally) copper or silica for recommending water treatment.
- GLGP is not responsible for recommendations based upon inaccurate information.

**RETAILER:** Contact \_\_\_\_\_  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**DEALER/CONTRACTOR:** Contact \_\_\_\_\_  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**Customer Name:** \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### HOW TO DRAW A SAMPLE:

Use outlet nearest pump (not from bottom of pressure tank). Run water for 5 minutes, then fill CLEAN bottle to neck and cap immediately. Never use hot water. Return bottle with this completed form.

### HOW TO MEASURE PUMPING RATE OF PUMP:

1. Make certain no water is being drawn. Open spigot nearest pressure tank. When pump starts, close spigot and measure time (in seconds) to refill pressure tank. This is cycle time.
2. Using a container of known volume, draw water and measure volume in gallons until pump starts again. This is drawn-down. Divide this figure by cycle time from step 1 and multiply result by 60 to arrive at pumping rate in gallons. Insert figure in Sec. 3.

\_\_\_\_\_ Gals. ÷ \_\_\_\_\_ Secs. X 60 = \_\_\_\_\_ gpm

### Draw-down Cycle Time

**EXAMPLE:** Cycle time is 65 secs., draw-down is 6 gals., then, pumping equals: 6 gals. 65 secs. X 60 = 5.5 gpm

## 1. WATER SOURCE

Municipal / City or area-wide authority, community well:  
 Reservoir      Lake      Wells      River      Unknown  
 Community water system  
 (small water system usually supplying 12 homes or fewer)  
 Water comes from:    Well    Lake    Reservoir    River  
 Private Well                      Private lake or pond  
 Private spring                      Private cistern  
 Other - describe \_\_\_\_\_

## 2. HOUSEHOLD INFORMATION

### Do you currently have water conditioning equipment?

No                      Yes: Type \_\_\_\_\_ Size \_\_\_\_\_

### Sizing information:

No. persons \_\_\_\_\_ No. bathrooms \_\_\_\_\_  
 Lawn irrigation on system \_\_\_\_\_  
 Swimming pool Capacity \_\_\_\_\_ gals.  
 Geothermal heating/cooling - gpm required \_\_\_\_\_  
 High flow fixtures (i.e. multi-head showers) \_\_\_\_\_

### Equipment type/size:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## 3. WATER SYSTEM

Pumping rate of pump \_\_\_\_\_ gpm (see instructions "How to measure pumping rate.")  
 Type of Well Pump:    Submersible    Jet    Other \_\_\_\_\_  
 Operating pressure (Low/High) \_\_\_\_\_ / \_\_\_\_\_ psi  
 Service Pipe size: \_\_\_\_\_ in.  
 Type of Pipe:    Plastic    Copper    Other \_\_\_\_\_

## 4. WATER PROBLEMS

### When this water sample was drawn, it was:

Clear                      Colored                      Cloudy

**Is this water sample:**    Untreated                      Treated (see sec. 2)

### PROBLEMS:

Hardness (high soap usage, bathtub ring, lime deposits, etc.)  
 Iron deposits - If yes, is iron build-up in flush tank:  
     Stringy (Iron bacteria)                      Greasy  
 Color of water - describe \_\_\_\_\_  
 Greenish/bluish stains on sinks, tubs, etc.  
 Pitting of fixtures and/or pipes  
 Sand    Silt    Sediment (settles)    Cloudiness (floats)  
 Bad taste:                      Metallic    Chlorine    Bitter    Salty  
 Other - describe \_\_\_\_\_  
 Bad odor:    Rotten Egg\*    Musty    Metallic    Chlorine  
 On-site sulfur test (if rotten egg)                      ppm  
 \*Sulfur test must be completed on site.  
 Other problems - describe \_\_\_\_\_

**BUSINESS / COMMERCIAL WATER ANALYSIS  
INFORMATION FORM**

**NOTE:** Complete section 4 (Water Problems), and Customer, Dealer, Distributor information on the front side of this form. Do not complete Sections 1, 2, and 3 on front side. Complete the following information. Additional information may be required based on application.

**1. WATER SOURCE**

Municipal/Community    Private Well    Lake    Pond

**2. WATER USAGE**

Usage \_\_\_\_\_ gals. per    Month    Week    Day

Other \_\_\_\_\_    Usage not known

Usage figure based on:    Meter Reading

Estimate based on \_\_\_\_\_

Water is used \_\_\_\_\_ Hours/Day and \_\_\_\_\_ Days/Week.

Is system expansion planned for future?    Yes    No

**3. WATER SYSTEM**

Pump Type \_\_\_\_\_ Pumping Rate \_\_\_\_\_ gpm

Pipe Sizes: Well to pressure tank \_\_\_\_\_ in. Service \_\_\_\_\_ in.

Pressure Tank: Bladder \_\_\_\_\_ Air/Water \_\_\_\_\_ Cap. \_\_\_\_\_ gal.

Operating Pressures: Low \_\_\_\_\_ psi    High \_\_\_\_\_ psi

Type of Pipe:    Plastic    Copper    Other \_\_\_\_\_

**4. EQUIPMENT**

New Installation    Replacement of \_\_\_\_\_

Addition to existing \_\_\_\_\_

Type of equipment desired:

Softener    Filter    Other

Recommendation by factory requested

Meter(s) regeneration or    Time Clock regeneration

Available space: Length \_\_\_\_\_ x Width \_\_\_\_\_ x Height \_\_\_\_\_

Door Size \_\_\_\_\_

Treating:    Hot Water Only    or    Hot and Cold Water

**5. APPLICATION**

(Locate appropriate application to complete form, include additional information under remarks.)

**APARTMENT BUILDING\*:** No. apartments \_\_\_\_\_

Laundry facilities:    Central    Individual    None

Number of washers \_\_\_\_\_ Capacity (in lbs.) \_\_\_\_\_

**BEAUTY SALON, BARBER SHOP:** No. Stations \_\_\_\_\_

**CAR WASH:**    Automatic    Wand Type    No. Bays \_\_\_\_\_

gpm Required \_\_\_\_\_

**CHURCH\*:** Maximum Daily Attendance \_\_\_\_\_

**COUNTRY CLUB:** No. members \_\_\_\_\_ No. showers \_\_\_\_\_

**FACTORY (NO PROCESS WATER)\*:** No. employees \_\_\_\_\_

**FACTORY (INCLUDING PROCESS WATER)\*:**

No. employees \_\_\_\_\_

Gals. per day usage of process water \_\_\_\_\_

**FARM:**    Cattle, dairy    Cattle, beef    Hogs

Horses    Sheep    Chickens    Turkeys

Ducks    No. head \_\_\_\_\_

**HOUSING DEVELOPMENT:** No. wells \_\_\_\_\_ No. homes \_\_\_\_\_

**HOTEL\*:** No. rooms \_\_\_\_\_ Restaurant    Laundry

**REST HOME\*:** No. beds \_\_\_\_\_ Cafeteria    Laundry

**LAUNDRY\*:**    Coin-operated    Commercial

No. washers \_\_\_\_\_ Capacity (in lbs.) \_\_\_\_\_

**MOTEL\*:** No. units \_\_\_\_\_ Restaurant    Laundry

**OFFICE BUILDING\*:** No. employees \_\_\_\_\_

**RESTAURANT\*:** Seating Cap. \_\_\_\_\_

Type:    Luxury    Family    Cafeteria    Fast food

Ethnic: (pizza, etc.) \_\_\_\_\_

**RETAIL STORE\*:** No. toilets \_\_\_\_\_

**SCHOOL\*:**    Elementary    Middle    High School

No. students \_\_\_\_\_

**STEAM BOILER:**    Condensate return, make-up

No condensate return \_\_\_\_\_ No. horsepower \_\_\_\_\_

**TAVERN\*:** Seating Capacity \_\_\_\_\_

**TRAILER PARK:** Total Lots \_\_\_\_\_

Central Laundry - Number of Washers \_\_\_\_\_

**UNIVERSITY\*:**    Dormitory    No. of students \_\_\_\_\_

For other applications, explain under REMARKS.

**IRRIGATION:** No zones \_\_\_\_\_ gpm/Zone \_\_\_\_\_

**GEOTHERMAL SYSTEMS:**    Heating and Air Conditioning

A/C only    Heating only    gpm \_\_\_\_\_

**OTHER:** \_\_\_\_\_

**\*6. GENERAL FIXTURE LIST:**

**Indicate the quantity of each fixture below.**

\_\_\_\_\_ Urinals    \_\_\_\_\_ Tank Type Toilets    \_\_\_\_\_ Flush Valve Toilets

\_\_\_\_\_ Lavatories    \_\_\_\_\_ Showers    \_\_\_\_\_ Kitchen Sinks

\_\_\_\_\_ Other Fixtures

**REMARKS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_