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Specialists in Lake & Pond Management, Services & Supplies

AERATION PROPOSAL REQUEST FORM

(please print the following page and fill in the necessary information)

NAME DATE

LAKE NAME

ASSOCIATION NAME (if applicable)

MAILING ADDRESS

CITY STATE ZIP CODE

OFFICE PHONE HOME PHONE

FAX E-MAIL

PHYSICAL ADDRESS OF LAKE/POND

LAKE/POND CHARACTERISTICS

APPROXIMATE SIZE MAXIMUM DEPTH

AVERAGE DEPTH

WHAT PROBLEM IS YOUR LAKE/POND HAVING? LOW OXYGEN

ALGAE ODORS FISH KILLS EXCESSIVE WEEDS

ORGANIC ACCUMULATION PATHOGENIC BACTERIA OTHER

ARE YOU USING CHEMICALS TO DEAL WITH THESE PROBLEMS?

YES NO

DO FERTILIZERS RUN INTO YOUR LAKE/POND? YES NO

LAKE/POND USES?

AESTHETIC WILDLIFE FISH RECREATION OTHER

SOURCE OF WATER? SPRING GROUND WATER

WATERSHED RIVER/STREAM WELL OTHER

IS THERE A CONSTANT FLOW OF WATER THROUGH THE LAKE/POND?

YES NO

DISSOLVED OXYGEN READING (take at 5:00a.m. bottom of lake/pond if possible) _____

TOTAL PHOSPHORUS _____ PPM: SURFACE _____ BOTTOM _____

DESIRED PRODUCT(S): _____ AERATOR _____ FOUNTAIN

IS ELECTRICITY AVAILABLE AT THE LAKE/POND? _____ YES _____ NO

(IF YES) WHAT IS THE AVAILABLE: VOLTAGE _____ PHASE _____ AMPS _____

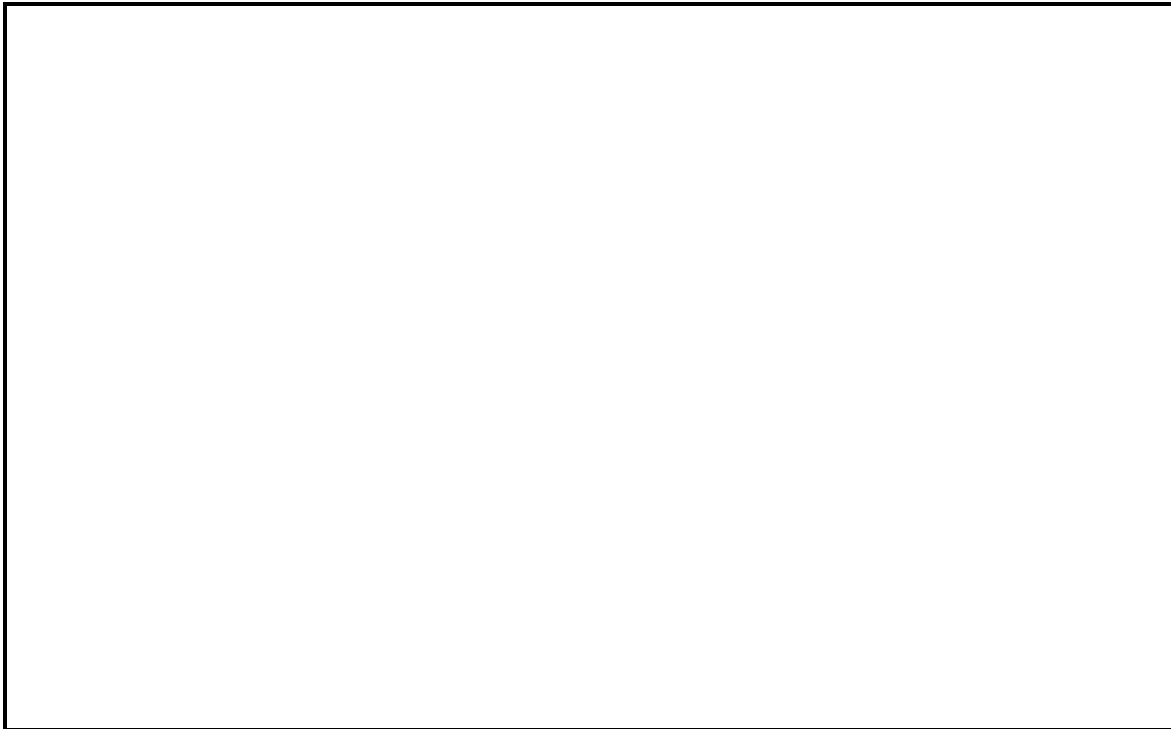
(IF NO) WHAT IS THE DISTANCE FROM THE ELECTRICAL SOURCE TO THE LAKE/POND? _____ FEET

IS NIGHT LIGHTING DESIRED? (FOUNTAINS ONLY) _____ YES _____ NO

DO YOU HAVE ANY EXISTING AERATORS OR FOUNTAINS? _____ YES _____ NO

PRIMARY REASON FOR AERATION: _____

PLEASE PROVIDE A SKETCH OF THE LAKE/POND INCLUDING DIMENSIONS, DEPTH READINGS WITHIN THE LAKE/POND, LOCATION OF AN ELECTRICAL SOURCE, AND ANY INLET OR OUTLET STREAMS.



DO YOU HAVE A BUDGET IN MIND?

- \$0 - \$1,000 \$1,000 - \$2,000 \$2,000 - \$3,000 \$3,000 - ↑