

Installer: _____ Pick Up or Delivery Preferred Date: _____

Ship To: _____




Homeowner Name: _____ Phone: _____

E-mail _____

Biofilter Address: _____ City: _____ Postal Code: _____

Mailing Address: _____ City: _____ Postal Code: _____

System Information: Please circle Waterloo Biofilter treatment unit configuration below

<p>Waterloo Shed</p> 	<p>Waterloo Baskets</p> 	<p>Precaster: _____</p> <p>Tank Model: _____</p>	<p>Bulk-Filled Plastic Tank</p> 
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Design Flow = _____ L/day Biofilter Package Price: \$ _____

System Component:	Component Supplied by:	Price:
Anaerobic Digester w/ Internal Pump Chamber Additional Riser: _____ <i>16" of riser supplied</i>	<input type="checkbox"/> Waterloo	\$ _____
	<input type="checkbox"/> Precaster Tank: _____	\$315
Or		
Anaerobic Digester Additional Riser: _____ <i>20" of riser supplied</i>	<input type="checkbox"/> Waterloo	\$ _____
	<input type="checkbox"/> Precaster Tank: _____	n/a
Pump Tank Additional Riser: _____ <i>20" of riser supplied</i>	<input type="checkbox"/> Waterloo	\$ _____
	<input type="checkbox"/> Precaster Tank: _____	n/a
Leaching Bed	<input type="checkbox"/> Type A Stone Area (m ²): _____	n/a
	<input type="checkbox"/> SBT Length (m): _____ Number of Ports: _____	\$ _____
	<input type="checkbox"/> Other (please indicate): _____	n/a
System Upgrades:		
<input type="checkbox"/> Waterloo Smart Panel		\$ _____
<input type="checkbox"/> Pump Extended Warranty		\$ _____
<input type="checkbox"/> Other: _____		\$ _____
<input type="checkbox"/> Design, Permit Application, and Approval Attached		TOTAL: \$ _____

Authorized Signature: _____ Date: _____ Reference PO #: _____