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| KLARO GmbH Spitzwegstraße 63 DE-95447 Bayreuth Tel.: +49 921 162 79-333 Fax: +49 921 162 79-300 | Project address: | Builder: Name: Street: City: Telephone: Fax: E-Mail: |
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Questions for the design of wastewater treatment plants for dairy wastewater

① Production of:

Milk
 Cheese
 Milk and cheese

Dairy wastewater

① Maximum amount of milk produced: _____ (l/day)

② Amount of milk used for the cheese production: _____ (l/day)

③ Maximum wastewater flow

- Is the maximum daily wastewater flow known? Yes No

- White water (from cleaning): _____ (m³/day)

- Whey (from the cheese production): _____ (m³/day)

④ Pollutant concentrations

- Has the wastewater been analyzed? Yes No

| Sample 1 | Sample 2 | Sample 3 |
|-------------------------------|-------------------------------|-------------------------------|
| Date: _____ | Date: _____ | Date: _____ |
| BOD ₅ _____ (mg/l) | BOD ₅ _____ (mg/l) | BOD ₅ _____ (mg/l) |
| COD _____ (mg/l) | COD _____ (mg/l) | COD _____ (mg/l) |
| P _____ (mg/l) | P _____ (mg/l) | P _____ (mg/l) |
| N _____ (mg/l) | N _____ (mg/l) | N _____ (mg/l) |
| pH _____ | pH _____ | pH _____ |

⑤ Specific wastewater characteristics

- Which cleaning and disinfection products are used? _____

Domestic wastewater

| | | |
|---|------------------------------|-----------------------------|
| ① Does domestic wastewater have to be also treated? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ② Number of employees: | _____ | |
| ③ Apartments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| - Number of apartments: | _____ | _____ |
| - Size of the apartments: | _____ (m ²) | _____ (m ²) |
| - Number of residents: | _____ | _____ |
| ④ Are there any special events on site? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| - Maximum number of guests per day: | _____ | |

Treatment target:

| | | |
|------------------------|-------------------------|--------------------|
| BOD ₅ _____ | P _____ | Colif. germs _____ |
| COD _____ | NH ₄ N _____ | pH _____ |
| AFS _____ | N _{ges} _____ | _____ |

Remarks/Other:
