

| | | |
|--|---|---|
| KLARO GmbH Spitzwegstraße 63 95447 Bayreuth Germany Tel.: +49 921 16279-0 E-Mail: info@klaro.eu | Client: Street: ZIP code / City: Country: Phone: E-Mail: | Project: Project address: Street: ZIP code / City: Country: |
|--|---|---|

a) Field of application

① Residential wastewater: _____ (e.g. apartment blocks, communities, villages, etc.)

② Commercial wastewater: _____ (e.g. construction sites, camps, seasonal tourism, etc.)

- The wastewater treatment plant will receive the maximum daily flow in _____ hours

- Please describe here expected peak flows (weekly, monthly, seasonal):

③ Temporary use, approx. _____ month

Permanent usage

b) Design parameters

① Population equivalent (PE): _____

② Max. hydraulic load: _____ m³/day or _____ l/pers./day

③ BOD₅ load: _____ kg/day or _____ g/pers./day

④ _____ load: _____ kg/day or _____ g/pers./day

⑤ Temperature exposure: min. _____ °C max. _____ °C

⑥ Altitude above sea level: _____ m

c) Required effluent values after treatment

BOD₅ _____ mg/l

NH₄-N _____ mg/l

P_{tot} _____ mg/l

COD _____ mg/l

NO₃-N _____ mg/l

Coliforms _____ CFU/100ml

SS _____ mg/l

N_{tot} _____ mg/l

Other _____

Is it planned to store the treated water?

Yes

No

d) Containerized wastewater treatment plant

① Preferred system: *Container.One/One+* *Container.Pro* *Container.Xtra*

② Installation situation: New wastewater treatment plant Extension of existing tanks

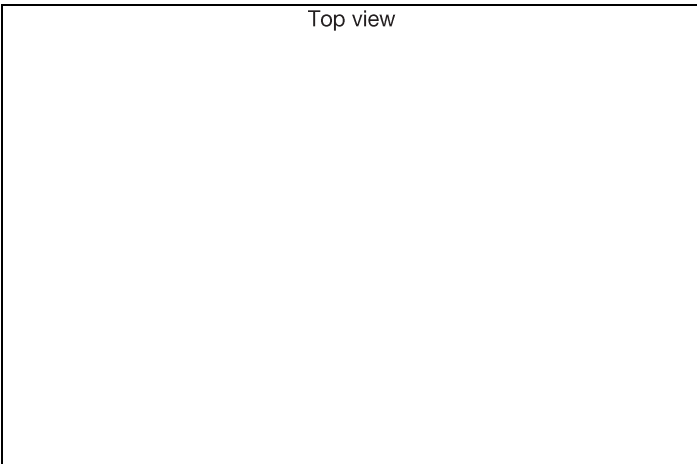
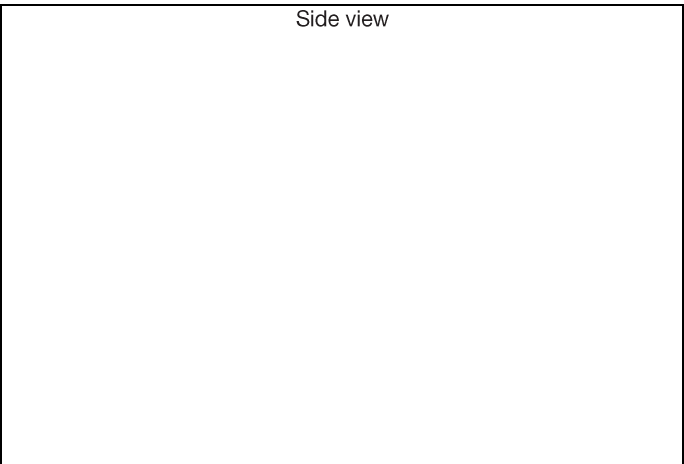
③ Location: No limitations Available area: _____ m²

e) Extension of existing tanks

Please indicate below the characteristics of the existing tanks:

| | | | |
|--------|---|---------------------|---------------------------|
| ① Tank | <input type="checkbox"/> Circular (\emptyset) | Dimensions _____ cm | max. water level _____ cm |
| | <input type="checkbox"/> Rectangular ($L \times B$) | | |
| ② Tank | <input type="checkbox"/> Circular (\emptyset) | Dimensions _____ cm | max. water level _____ cm |
| | <input type="checkbox"/> Rectangular ($L \times B$) | | |
| ③ Tank | <input type="checkbox"/> Circular (\emptyset) | Dimensions _____ cm | max. water level _____ cm |
| | <input type="checkbox"/> Rectangular ($L \times B$) | | |

Please sketch the tanks below or attach a drawing of the tanks:

| | |
|---|--|
| Top view  | Side view  |
|---|--|

f) Additional modules and accessories

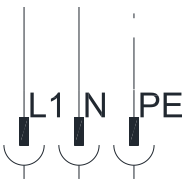
| | | |
|-----------------------|---|--|
| Pump station: | <input type="checkbox"/> Single pump station | <input type="checkbox"/> Double pump station |
| ① Cover: | <input type="checkbox"/> pedestrian loading up to 1,5 t | <input type="checkbox"/> driveable by car up to 12,5 t <input type="checkbox"/> driveable by lorry up to 40 t |
| Feed pumps: | <input type="checkbox"/> Single feed pump | <input type="checkbox"/> Double feed pump |
| ② Incl. mounting set: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ③ Additional dosing: | <input type="checkbox"/> Phosphate precipitation | <input type="checkbox"/> Carbon dosing |
| ④ Disinfection: | <input type="checkbox"/> UV disinfection | <input type="checkbox"/> Chlorine disinfection <input type="checkbox"/> for underground tank <input type="checkbox"/> for aboveground tank <input type="checkbox"/> inside container |
| ⑤ Remote monitoring: | <input type="checkbox"/> via SIM connection | <input type="checkbox"/> via LAN connection |
| ⑥ Other: | <input type="checkbox"/> Sieve screw | <input type="checkbox"/> Sludge dewatering module (only for KLARO Container.One/One+) |

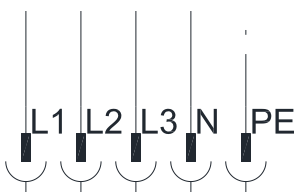
g) Additional remarks

Power supply

Please describe the existing power supply for the wastewater treatment plant onsite.

| | | |
|------------------|--------------------------------|--------------------------------|
| Frequency | <input type="checkbox"/> 50 Hz | <input type="checkbox"/> 60 Hz |
|------------------|--------------------------------|--------------------------------|

| | |
|---|---|
| <input type="checkbox"/> 1 phase | |
|  | L - N <input type="checkbox"/> 110 V <input type="checkbox"/> 230 V <input type="checkbox"/> _____ |

| | | | | | | | | | |
|---|---|--------------------------------|--------------------------------|--------------------------------|--------------------------------|--------------|-------|-------|-------|
| <input type="checkbox"/> 3 phases | | | | | | | | | |
|  | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">L - N</td> <td style="width: 33%; border: 1px dashed black; text-align: center;"><input type="checkbox"/> 110 V</td> <td style="width: 33%; border: 1px dashed black; text-align: center;"><input type="checkbox"/> 230 V</td> <td style="width: 33%; border: 1px dashed black; text-align: center;"><input type="checkbox"/> _____</td> </tr> <tr> <td>L - L</td> <td style="border: 1px dashed black; text-align: center;">230 V</td> <td style="border: 1px dashed black; text-align: center;">400 V</td> <td style="border: 1px dashed black; text-align: center;">_____</td> </tr> </table> | L - N | <input type="checkbox"/> 110 V | <input type="checkbox"/> 230 V | <input type="checkbox"/> _____ | L - L | 230 V | 400 V | _____ |
| L - N | <input type="checkbox"/> 110 V | <input type="checkbox"/> 230 V | <input type="checkbox"/> _____ | | | | | | |
| L - L | 230 V | 400 V | _____ | | | | | | |

| | | | | | | | | | |
|---------------------------------------|---|--------------------------------|--------------------------------|--------------------------------|--------------------------------|--------------|-------|-------|-------|
| <input type="checkbox"/> other | | | | | | | | | |
| | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">L - N</td> <td style="width: 33%; border: 1px dashed black; text-align: center;"><input type="checkbox"/> 110 V</td> <td style="width: 33%; border: 1px dashed black; text-align: center;"><input type="checkbox"/> 230 V</td> <td style="width: 33%; border: 1px dashed black; text-align: center;"><input type="checkbox"/> _____</td> </tr> <tr> <td>L - L</td> <td style="border: 1px dashed black; text-align: center;">230 V</td> <td style="border: 1px dashed black; text-align: center;">400 V</td> <td style="border: 1px dashed black; text-align: center;">_____</td> </tr> </table> | L - N | <input type="checkbox"/> 110 V | <input type="checkbox"/> 230 V | <input type="checkbox"/> _____ | L - L | 230 V | 400 V | _____ |
| L - N | <input type="checkbox"/> 110 V | <input type="checkbox"/> 230 V | <input type="checkbox"/> _____ | | | | | | |
| L - L | 230 V | 400 V | _____ | | | | | | |

Additional remarks for the power supply:

Date: _____

Name: _____

Signature: _____