

PoolShield: Survey and Model Selection Form

Please fill out the form below, and email to dhotle@easywater.com, or fax to (317) 755-4199.

1) Project Name:

2) Project Address:

3) Water type:

☐ Private Well Water

☐ City Water

*If Private Well Water, email a water report to
dhotle@easywater.com or mail us a water
sample to test to this address >*

*ATTN: Dan Hotle
9910 N by NE Blvd, Ste 200
Fishers, IN 46037*

4) What is the expected application for PoolShield? (Example: pool, spa, fountain, water park)

5) Is this a new or existing facility?

☐ New (If new, skip to #9)

☐ Existing

6) If #5 is "existing", list problems or issues with application:

7) If #5 is "existing", do they currently have water treatment equipment installed?

☐ Yes

☐ No (If no, skip to #9)

8) If #5 is "existing", provide detailed information on existing water treatment equipment. This should include tank sizes/quantities, valves and the designed flow rate for the water treatment equipment and pumps:

9) What is the designed gpm for the pump(s) that will flow through Pool Shield? (Example: 235gpm is the peak demand for treatment)

10) What is the total volume of water in the pool, spa, fountain or other body of water? _____ gal

11) Should PoolShield be skid-mounted (pre-plumbed & pre-wired) or shipped as components (plumbed on site)?

☐ Skid-Mounted

☐ Components

☐ Both Options

12) Project Notes/Additional Details: