Please take a moment to supply us with the requested site information. Please also send additional documentation such as plume map, groundwater elevation map, cross sections and boring logs and groundwater biogeochemical characterization and analytical data.

**Contact Information Box**

Submitted By Enter First & Last Name Company Name Enter Company Name

Street AddressEnter Street Address

City­ Enter City State/Province Enter State/Province Zip/Postal Code Enter Zip/Postal Code

Country Enter Country

Office Phone Enter phone # Mobile Enter mobile # Email Enter email

Planned remedial actions and/or technology combinations Enter project approach

Project Budget Enter project budget, if known

When would you like the evaluation completed by? Click to select need by date

**Type of Evaluation Requestes**

Balllpark Estimate  Detailed Estimate

**Project Description**

Project Name Enter project name Project Location Enter project location, City & State/Province

**Project Drivers**

Is the project funded or only proposal?  Funded  Proposed

If funded, source Choose funding source, click here and select funding source by clicking on down arrow Regulatory Agencies Involved?  Yes  No

Lead regulatory Agency (oversight) Enter lead regulatory agency

What is the primary driver for the remediation? Click here and select primary driver by clicking on down arrow

Project Schedule (Anticipated Remediation Start/End Date)? Click to select anticipated start date

What percentage of the treatment area is located below buildings/structures? Enter %

**About the Site**

Contaminant(s) of Concern Provide contaminants of concern and concentrations

Age of Plume (yrs.) Enter age of plume, if know

Previous Remedial Actions (Check all that apply)

Excavation

SVE or Multi phase extraction

*In-situ* Heating

Air Sparge

Pump and Treat

ISCO

Biostimulation

Bioaugmentation

ISCR

Other Enter other remedial actions

What other remedial methods are being evaluated? Provide other options you are evaluating

Remedial objectives (% reduction / concentration) Enter project objectives

Are there active businesses or dwellings on or within 100 yards of the site?  Yes  No

Does remediation need to be performed beneath a structure?  Yes  No

**Dissolved Phase Treatment Zone Physical Dimensions**

Length of treatment area parallel to groundwater flow (ft)

Width of treatment area perpendicular to groundwater flow (ft)

Saturated Treatment Thickness (ft)

Depth to water (ft)

Soil Type / Lithological description Please provide soil type / lithological description.

**Treatment Zone Hydrogeologic Properties**

Total porosity (%)

Effective Porosity (%)

Average Hydraulic Gradient, i (ft/ft)

Soil Bulk Density (gm/cm3)

Soil Fraction Organic Carbon, foc (%)

Average Aquifer Hydraulic Conductivity (ft/day)

**Aquifer Geochemistry (Optional Screening Parameters)**

ORP (mV)

Temperature (°C)

pH

Alkalinity (mg/L)

TDS or salinity, (mg/L)

Specific Conductivity, (µs/cm)

Chloride (mg/L)

Total Iron (mg/L)

**Natural Attenuation Parameters (not all applicable for each site)**

Oxygen (mg/L)

Nitrate (mg/L)

Sulfate (mg/L)

Methane (mg/L)

Ethene/Ethane (mg/L)

BOD (mg/L)

COD (mg/L)

Carbon Dioxide, estimated as the amount of Methane produced, (mg/L)

Manganese (IV), estimated as the amount of Mn (II) produced (mg/L)

Iron (III), estimated as the amount of Fe (II) produced, (mg/L)

**Non-Aqueous Phase Liquids (NAPLs)**

***Please complete this section if you have non-aqueous phase liquids (NAPLs).***

The surfactant formulations we offer can be developed via a treatability study for site specific contaminants and geochemistry or pre-formulated for well characterized sites. These surfactant blends in combination with one or more electrolytes have proven capable of producing ultra-low interfacial tensions between NAPL and ground water.

Is free phase observed or suspected?  Yes  No

Are you interested in eliminating the reoccurrence of NAPL in your wells or are you interested in as much mass removal as practicable? Please provide interest

Length of NAPL Plume Parallel to Groundwater Flow (ft)

Width of NAPL Plume Perpendicular to Groundwater Flow (ft)

Treatment Thickness (ft)

Average NAPL Actual Thickness (in)

Average Depth to top of contaminant impact (ft bgs)

Average Depth to groundwater (ft bgs)

Seasonal groundwater variation depths (ft bgs) from       to

NAPL’s viscosity, if known (include units)

Ground water or perched water in the treatment zone hardness

Ground water or perched water in the treatment zone TDS

Soil porosity

Source for make-up water

Calcium concentration and/or TDS for make-up water

**Infrastructure**

Please include a site map showing wells and the outer perimeter of the NAPL plume.

Please describe or send existing well infrastructure.

Is there piping infrastructure connecting the well infrastructure?  Yes  No

Is the site paved?  Yes  No

Is there any groundwater production onsite and if so, any of the following treatment equipment?

Holding tanks

Oil water separator

Activated carbon units

Air strippers

Other: Enter any other treatment equipment on-site

Are there any site access restrictions?  Yes  No

Please describe access requirements. Enter access requirements

**Water treatment and disposal**

Where does site sewage get disposed to? Enter site sewage disposal location