Ultrafiltration System Optimization Service℠ (SOS) Request Form

This form must be filled in with all the requested information and e-mailed with a Purchase Order to sos@dow.com before the System Optimization Service℠ Process can begin. Once a purchase order and a completed form have been recieved you will receive an email containing a Return Authorization (RA) Number and shipping instructions. For assistance with a quotation for SOS requests - please contact your local sales representative.

System Optimization Services℠ (S.O.S.)

Assessment of products returned by customers in order to determine its general status, source of performance issues or areas for optimization. In addition, the information collected in our lab results can be complemented with customer feedback and plant troubleshooting observations. The cost of this service will depend on the number and complexity of the tests required. The expected turn-around time for this service will be approximately 30 working days on average, starting when products are received at Dow testing sites. A complete report including the main relevant findings is included in the service. Different types of services are available.

Ultrafiltration Services:

Service Package requested:

	Ultrafiltration Services		
	Service Package 1	Service Package 2	Service Package 3 (*)
Visual inspection	●	●	●
Flux Test	●	●	●
Integrity Test	●	●	●
Fiber Repair	● (optional)		
Autopsy		●	●
Fouling Identification		●	●
Conventional cleaning			●

(*) Two UF modules are needed for Service Package 3

Water analysis and special tests are available upon request. Contact you Dow Representative for detailed information.

Section 1: Must be completed for all returns independent of the technology

Dow Water Solutions offers product testing services to its customers for a nominal fee:

Please indicate Purchase Order (PO):

DOW TS&D Contact:

DOW KAM Contact:

Invoice to be sent to		
Name		
Company		
Plant Name		
Address		
City	State	Country
Postal Code/Zip		
Phone		

Product Return Details		
Name		
Company		
Plant Name		
Address		
City	State	Country
Postal Code/Zip		
Phone		
Fax		
e-mail		

Fax	
e-mail	

Section 2: System Optimization Services SM

Ultrafiltration Modules:

Number of modules sent for SOS:
(Attach separate sheet if needed with S/N's)

Product Model(s)	Serial Number(s)	Date installed	Module Position on Skid	Symptoms Description (Low Flow, high TMP…)

System Information – Required for RA number to be provided

Application ☐ Industrial/Power ☐ Specialties ☐ Municipal
☐ Pharma ☐ Oilfield ☐ Others, please indicate:

trains: # modules per train: Operational Flux (L/m²·h): Filtration Cycle:
Backwash Flux (L/m²·h): Type of water used for Backwash: Air Scour Flow (Nm³/h):
Oxidant CEB Chemical/Frequency: Alkali CEB Chemical/Frequency: Acid CEB Chemical/Frequency:
CIP Frequency: CIP Recipe:

Feed water source: ☐ Surface Water ☐ Ground Water ☐ Salt Water (Ocean/Sea) ☐ Municipal Waste Water
☐ Industrial Waste Water ☐ Other (Please describe)

Feed water chemistry available? ☐ YES (attach separately) ☐ NO
Operational data avialble? ☐ YES (attach separately) ☐ NO

Upstream Process ☐ Aeration ☐ Pressure Sand Filter ☐ A/O treatment ☐ Multimedia Filter
☐ Coagulation/Flocculation ☐ Green Sand Filter ☐ Sedimentation ☐ Activated Carbon
☐ Clarification ☐ Cartridge Filter. Pore size Exchange Frequency
☐ Secondary Sedimentation ☐ Bag Filter. Pore size Exchange Frequency
☐ Lime Softening ☐ Self cleaning filter. Pore size Exchange Frequency
☐ Sterilization/Disinfection ☐ Other (please specify)

Chemicals used (if any) ☐ Sodium Hypochlorite Dosage (ppm) Dosing Point
☐ Ferric Chloride Dosage (ppm) Dosing Point
☐ Organic Polymer Dosage (ppm) Dosing Point
☐ Aluminum Chloride Dosage (ppm) Dosing Point

☐ PAC (Powder Activated Carbon) Dosage (ppm) Dosing Point

☐ Other (Please describe) Dosage (ppm) Dosing Point