

Solid Waste Application

 Questionnaire

1. **Contact information:** **Contact name:** NAME

 **Company/firm:**  COMPANY

 **Address:** ADDRESS

 **Telephone:** PHONE NUMBER.

 **Fax:** FAX NUMBER

 **Email:** EMAIL ADDRESS

**2. Relationship of inquirer to the project:** Choose inquirer’s relationship to project:

**3. Experience of inquirer with Incineration Equipment:** Choose experience level:

**4. Type of project:**  Choose a project type:

**5. Location of project:** If outside of the USA, please advise nearest port of entry – click to type here

**6. Composition of the waste stream:**  Be as specific as possible - Click to type here

**7. BTU value of waste being incinerated if known?** Click here to enter text.

**8. Volume of waste:** Enter number Choose a value:

**9. Desired frequency and duration of operation:** Enter duration of operation:Choose duration of use:

Enter frequency of operation:Choose Frequency:

**10. Specific emissions requirements:** Click here to enter text.

**11. Available fuel:**  Diesel: [ ]  Natural Gas [ ]  LPG: [ ]

**12. Available electrical service:**

Voltage: Click here to enter Frequency: 50 Hz [ ]  60 Hz [ ]  Phase: One-Phase [ ]  Three-Phase [ ]  PHASE: Choose

**13. Status of project:**  Choose an item.

**14. Time frame for acquisition of equipment for project:**  Choose timeframe:

**15. Scope of supply sought:** Choose scope:

**16. Additional comments:**

Click here to enter text.

GEI Works LLC | www.geiworks.com | 772-646-0597 | 5400 85th Street, Vero Beach, FL 32967 | info@geiworks.com