QUESTIONNAIRE

Vapor Recovery System

**PURPOSE:** To gather the information to size and price a new vapor recovery system.

**CONFIDENTIALITY**: All information gathered is kept strictly confidential.

**QUALITY OF INFORMATION**: There is certain information we “must have” to generate a meaningful proposal. All other information is helpful to us, and while not critical, it is also quite important. Therefore, we ask for two sets of information. The one marked “Must Have Data” is the information we must have to generate a priced proposal. The “Other Information” is quite helpful to us, allowing us to address your needs and wants more precisely. You do not have to provide this information, but when you do, you’ll find our proposal to be more thorough and it will better fit your needs.

**Must Have Information:**

Please provide ALL of the following information.

Today’s Date:

Your name:

Phone:

E-mail address:

Name of an Alternate Contact:

Your Company Contact Information

Company Name:

Street Address:

City:

State/Province:

Postal Code:

Country:

Phone:

Fax:

E-Mail:

Name of Terminal:

Nearest City (proximity to indicated city):

Facility Physical Address:

Your Inquiry/Project Number:

Loading Profile

Please tell us about the flow rate of products loaded which generate vapors fed to the VRS. Use the units of measure you prefer.

Maximum instantaneous flow rate: Liter/minute\_\_\_\_\_\_, M³/hour, or \_\_\_\_\_\_GPM\_\_\_\_\_

Please tell us about the total volume of products loaded which generate vapors fed to the VRS. Use the units of measure you prefer.

Total volume loaded in 15 minutes: Liters\_\_\_\_\_\_, M³\_\_\_\_\_\_\_, or \_\_\_\_\_\_Gallons

Total volume loaded in 60 minutes: Liters\_\_\_\_\_\_, M³\_\_\_\_\_\_\_, or \_\_\_\_\_\_Gallons

Total volume loaded in 4 hours: Liters\_\_\_\_\_\_, M³\_\_\_\_\_\_\_, or \_\_\_\_\_\_Gallons

Total volume loaded in 24 hours: Liters\_\_\_\_\_\_, M³\_\_\_\_\_\_\_, or \_\_\_\_\_\_Gallons

Total volume loaded annually: Liters\_\_\_\_\_\_, M³\_\_\_\_\_\_\_, or \_\_\_\_\_\_Gallons

**Additional Information**

Please tell us what you can about your terminal and its operation by answering as many of these questions as you can. We will use the following information to tailor our proposal more closely to these conditions for your terminal.

Please tell us the source of the vapor you want us to process.

Truck vapor Yes\_\_\_ No\_\_\_

Rail vapor Yes\_\_\_ No\_\_\_

Marine vapor Yes\_\_\_ No\_\_\_

Tank vapor Yes\_\_\_ No\_\_\_

# What is the distance from the loading rack or dock to the VRS? Meters\_\_\_\_ Feet\_\_\_\_

# What is the distance from the VRS site to the absorbent supply storage tank? Meters\_\_\_\_\_ / Feet: \_\_\_\_\_

# How many hours each day is the terminal open and operating? \_\_\_\_\_\_ Hours

How many days is the terminal open for business each year? \_\_\_\_\_\_ Days

For marine loading, please tell us the loading rates and volumes for Barges & Ships:

 Barges Ships

Instantaneous \_\_\_\_\_\_M³ \_\_\_\_\_\_GPM \_\_\_\_\_\_M³ \_\_\_\_\_\_GPM

1 Hour \_\_\_\_\_\_M³ \_\_\_\_\_\_GPM \_\_\_\_\_\_M³ \_\_\_\_\_\_GPM

Total Loading Event \_\_\_\_\_\_M³ \_\_\_\_\_\_GPM \_\_\_\_\_\_M³ \_\_\_\_\_\_GPM

For tank farm vapor recovery, please tell us about the tank farm and the liquid product transfer.

Number of Storage Tanks: \_\_\_\_\_\_\_ Total stored volume: \_\_\_\_\_bbls. \_\_\_\_\_ M³

Maximum product tank fill rate: \_\_\_\_\_\_ m³/hour / \_\_\_\_\_\_Gal/hour

Total product into rank farm monthly: \_\_\_\_\_\_M³ \_\_\_\_\_\_Gal

Total product loaded annually: \_\_\_\_\_\_M³ \_\_\_\_\_\_Gal

Please tell us about your utilities.

Electric Utilities

Voltage: \_\_\_\_\_\_

Number of Phases: \_\_\_\_\_\_

Frequency: \_\_\_\_\_\_

Is dry compressed air, plant gas, or nitrogen available on Site: Yes\_\_\_\_ No\_\_\_\_

Which will you use in the VRS plant? \_\_\_\_\_\_\_

Please tell us about the physical qualities of the absorbent you plan to use in our VRS.

Type (i.e. gasoline, diesel, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_

Reid Vapor Pressure (RVP) of absorbent:

Summer \_\_\_\_\_\_ RVP ANSI \_\_\_\_\_\_RVP bar

Winter \_\_\_\_\_\_ RVP ASNI \_\_\_\_\_\_RVP bar

Maximum absorbent temperature

Summer \_\_\_\_\_\_ C° \_\_\_\_\_\_ F°

Winter \_\_\_\_\_\_ C° \_\_\_\_\_\_ F°

Please provide any additional information or comments that you feel would be beneficial.