

CDS® SeparatorSIZING REQUEST FORM

CUSTOMER DETAILS			
Name:	Project Name:		
Company:	Date:		
Phone:	Email:		
SITE INFORMATION			
(*Critical Information required for sizing CDS_GPT units)			
* Catchment Location:			
* Catchment Area (ha):	*Equivalent Impervious Area (% or ha):		
*Treatable Flow Desired (e.g.			
*Max. Design Flow at GPT (e.g. Q5, Q10):			
*Inlet Pipe Diameter (mm):	*Pipe Grade (%):		
*Outlet Pipe Diameter (mm):	*Pipe Grade (%):		
*Invert Level of Inlet Pipe _ RL(m):	*Finished Surface Level _ RL(m):		
*Invert Level of Outlet Pipe _ RL(m):	* Depth to Invert (DTI) (m):		
*Backwater Impact? (Lake level or tidal	NO If YES, Standing water depth at		
level at the downstream of GPT)		downstream of GPT (m) for	
	3month ARI storm event:		
*If Yes, MHWLS (RL) High Tide:	MLWLS (RL) Low Tide:		
Target Pollutants (e.g. TSS, GP)			
Preferred Configuration: (Please tick)	Right-Hand		Left-Hand
Structure Location (e.g. carpark, road, footpath, park, etc.):			
Local Authority (Council, etc.):			
Land Use Category (urban, road, industrial, etc.):			
Class of Cover Required (Surface Conditions & Traffic Loadings): (Please tick)			
Class D(Heavy)	Special Cover (>Class D)		
COMMENTS			
E.g. Request Oil baffle, Volute pipe and secondary weir, etc.			