

## DEICING QUESTIONNAIRE

***To properly target your needs, we ask that you fill out this form to the best of your knowledge.  
Accurate and complete responses will help us attain a design closest to your needs.  
Do not hesitate to contact us if you have any questions.***

1 of 3

|              |  |
|--------------|--|
| <b>DATE:</b> |  |
|--------------|--|

Please complete, save and return to us. **Thank-you.**

|                             |  |
|-----------------------------|--|
| <b>GENERAL INFORMATION:</b> |  |
| Company Name*:              |  |
| Billing Address*:           |  |
| Company Address*:           |  |
| Contact Name*:              |  |
| Title / Function*:          |  |
| Contact Person's e-mail*:   |  |
| Billing e-mail*:            |  |

|   |  |
|---|--|
| <b>PROJECT INFORMATION:</b>                 |  |
| Project Name :                              |  |
| Location<br>Google Earth Link (GPS Point) : |  |
| Purpose or Application:                     |  |
| Area or Length to Deice:                    |  |
| Project Deadline :                          |  |

|  |  |                       |                       |
|--|--|-----------------------|-----------------------|
| <b>INFORMATION ON THE SITE:</b>  |  |                       |                       |
| Type of Body of Water :  | <input type="checkbox"/> Lake <input type="checkbox"/> River <input type="checkbox"/> Sea <input type="checkbox"/> Ocean   |                       |                       |
| Type of Water :  | <input type="checkbox"/> Fresh <input type="checkbox"/> Brackish <input type="checkbox"/> Salt   |                       |                       |
| Depth or Depth Gradient :  | <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><b>Maximal Depth:</b></td> <td style="width: 50%;"><b>Minimal Depth:</b></td> </tr> </table> | <b>Maximal Depth:</b> | <b>Minimal Depth:</b> |
| <b>Maximal Depth:</b>  | <b>Minimal Depth:</b>  |                       |                       |
| Water Flow, or Speed of Water :  |  |                       |                       |
| Electric Power Available on the Site :<br>(Voltage and Amperage)         |  |                       |                       |
| Electric Power Location:   | <input type="checkbox"/> Barge <input type="checkbox"/> Shore <input type="checkbox"/> Others:   |                       |                       |
| Distance from Electrical Source to<br>Work Area : (Indicate on the Plan) |  |                       |                       |

|   |     |    |
|---|-----|----|
| Is there or will there be a Call for Tender associated to this project? | YES | NO |
|---|-----|----|

|  |  |
|--|--|
| If yes, what is the name or reference number of the Call for Tender? |  |
|--|--|

|  |
|--|
| <b>ADDITIONAL INFORMATION:</b><br><br><br><br><br><br><br><br><br><br><br> |
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|  |  |
|--|--|
| <b>REQUIRED DOCUMENTS:</b>                                 |  |
| On Page 3, please provide a sketch or plan that includes : | <ul style="list-style-type: none"> <li>- Location of the power source</li> <li>- Area to be deiced</li> <li>- Bathymetry (depth)</li> <li>- Current direction</li> <li>- Restrictions or Obstructions</li> <li>- Data on Ice Thickness and/or Weather</li> </ul> |

*Thank you for completing this form. This document will be used for evaluation and estimation purposes only. The information provided in this form will allow us to develop a solution that will fullfill your needs as accurately as possible. This solution may be subject to change if the information in this document is not accurate enough or is missing. In some cases, additional tests or an on-site visit may be necessary.*

**INSTALLATION SKETCH:**

A large, empty rectangular box with a black border, intended for an installation sketch.