

When to use this form?

- If you want Pro Products to test your water for you and provide a dosage recommendation.
- If you self-test using the kit, you may input your results directly into the calculator at ProProducts.com/calculator to determine your proper dosage.

Please provide the information requested. It is vital that we have as much information as possible so that we can make a proper analysis and recommendation.

| SUBMITTED BY: | SUBMITTED FOR: (Fill in if you are a 3rd party submitting on behalf of a custumer) | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|--|--|
| *Name: | *Name: | | | |
| *Street Address | *Street Address | | | |
| *City*State* | *City*State | | | |
| *Email | *Email | | | |
| Phone Number | Phone Number | | | |
| *Required for expedited service. We will email your results and dosage recomm | nendations | | | |
| Collection Instructions: 1. Let your sprinkler system run for several minutes before of draw the sample from a sprinkler head. 2. Fill the included larger vial full of water, snap the cap sect 3. Place this completed form and the sample vial in the included A & L Great Lakes Laboratories C/O Pro Products #03404 3505 Conestoga Drive Fort Wayne, IN 46808 This sample will be analyzed for one or more of the following parameters | urely shut and seal with tape such as electrical or duct tape. uded bubble envelope and mail to: | | | |
| Do you currently have a Rid-O-Rust System? | | | | |
| Yes Fill in section <i>A</i> and <i>B</i> No Fill in section A only | | | | |
| If "No", do you want us to recommenda <i>Rid-O-Rust System</i> for you? Yes No | | | | |
| Will your new system be installed: Inside or Outside | | | | |
| A. Irrigation System Data: | | | | |
| 1. What is your water source? Deep Well Shallow Well Pond/Lake | | | | |
| 2. What type of pump do you have? Above-Ground Pump Submersible Pump | | | | |
| 3. What is the horsepower of your pump? | | | | |
| 4. What is the maximum flow rate of your sprinkle | er system in GPM (gallons per minute)? | | | |
| 5. How many zones do you have? How many heads on the largest zone? | | | | |
| 6. What is the total run time of all your zones in minutes? | | | | |



| 1. What type of system do y | ou have? <i>check one</i> | | | |
|-------------------------------------------------------------------------------------|-------------------------------------------|------------------|-------------------------------------------|--|
| Siphoning System | | Injection System | n 🗌 | |
| | What is the size of the tank? check one | | What is the size of the tank? check one | |
| | 30 gallon 18" diameter 32" height | | 30 gallon 18" diameter 36" height | |
| | 15 gallon 14" diameter 24.5" height | | 15 gallon 14" diameter 24.5" height | |
| | Other | | Other | |
| 2. If you have an injectionsyst What is the model numbe | em, please look at the data | | e chemical feed pump | |
| | tput of the pump in GPH (| | | |
| Is your injector pump | adjustable? Yes 🔲 N | o 🗌 | | |
| 3. Which prevention Formu | la are you currently using | | | |
| How much formula do yo | ou put into the tank currer | ntly? | | |
| We will email the results of the water analysis along with a dosage recommendation. | | | | |

| Additional comments on your system's performance: | |
|---------------------------------------------------|--|
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