

WHRU Request for Proposal Form



*Minimum information required for budget quote.

INQUIRER*

Name: _____
 Company: _____
 Address: _____

 City: _____
 State/Province: _____ ZIP: _____
 Email: _____
 Phone: _____
 Required Proposal Date: _____

Budget Firm Replacement

END USER*

Name: _____
 Company: _____
 Address: _____

 City: _____
 State/Province: _____ ZIP: _____
 Required Delivery Date: _____
 Anticipated Date of Purchase: _____
 Qty: _____

(Year / Model No. / Job No.) _____

GENERAL INFORMATION: Unfired

Supplemental Fired FA Fired

GAS SIDE:

Turbine / Engine Model: * _____
 Primary Fuel: * _____
 Secondary Fuel: * _____
 Exhaust Flowrate: * _____ lb/hr
 Exhaust Temperature: * _____ °F
 Allowable Draft Loss: _____ inH₂O
 Exhaust Location: _____
 Outlet Flange Dimension: _____ in
 Exhaust Emissions: *
 NOx: _____ ppm_vd @ 15% O₂
 CO: _____ ppm_vd @ 15% O₂
 UHC: _____ ppm_vd @ 15% O₂
 VOC: _____ ppm_vd @ 15% O₂
 SOx: _____ ppm_vd @ 15% O₂
 Exhaust Composition: *
 N₂: _____ % vol.
 Ar: _____ % vol.
 O₂: _____ % vol.
 CO₂: _____ % vol.
 H₂O: _____ % vol.

FLUID SIDE:

Fluid Type: * Water Other
 Fluid Name (if Other): * _____
 Fluid Flowrate: * _____ lb/hr

<u>Fluid Properties:</u> *	Supply	Return
Fluid Temperature: (°F)	_____	_____
Oper. Pressure: (Psig)	_____	_____
Specific Heat: (Btu/lb•°F) ¹	_____	_____
Viscosity: (lb/ft•h) ¹	_____	_____
Thermal Cond.: (Btu/h•ft•°F) ¹	_____	_____
Density: (lb/ft ³) ¹	_____	_____
Maximum Film Temp.: (°F) ¹	_____	_____

Duct Burner: *
 Primary Fuel: _____
 Secondary Fuel: _____

¹ - Information required for fluids other than water.

SITE CONDITIONS

Installed Location: _____
Elevation: _____ ft
Space Restrictions: _____
Noise Limits: _____ dBa
Ship / Delivery Date: _____
Shipping Terms: _____

Electric Requirements:

_____ Volts / 60 or 50 Hz / 3 or 1 Phase

Required Stack Emissions:*

NOx: _____ ppm_vd @ 15% O₂
CO: _____ ppm_vd @ 15% O₂
UHC: _____ ppm_vd @ 15% O₂
VOC: _____ ppm_vd @ 15% O₂
SOx: _____ ppm_vd @ 15% O₂

Insurance Requirements:

FM: _____ IRI: _____ NFPA: _____
Other: _____

SCOPE OF SUPPLY

	YES	NO	COMMENTS:
Base WHRU:			_____
Sootblower(s):			_____
Duct Burner:			_____
Fresh Air Fired:			_____
Bypass System:			
Diverter:			_____
Silencer:			_____
Support Steel:			_____
Bypass Stack:			Total Elevation from Grade: _____ ft
Ductwork:			_____
Main Stack:			Total Elevation from Grade: _____ ft
Platforms:			_____
HRSG Control:			_____
SCR System:			Reagent _____
CO Catalyst:			_____

CUSTOMER*

Name: _____
Company: _____
Address: _____

City: _____
State/Province: _____ ZIP: _____
Country: _____

PROJECT LOCATION*

Name: _____
Company: _____
Address: _____

City: _____
State/Province: _____ ZIP: _____
Country: _____

COMMENTS:

