



EXERGY TECHNOLOGIES CORPORATION

ME DATA COLLECTION FORM

COMPANY INFO

Name: _____ Phone: _____

Title: _____ Fax: _____

Company: _____ E-Mail: _____

Address: _____ Date: _____

FACILITY INFORMATION

_____ # of employees at your facility

What are your production hours?

_____ Hrs/ Day _____ Shifts/ Day _____ Days/ Wk _____ Wks/ Year

FUTURE NEEDS

Do you see your requirements changing in the next 3 months? Yes____ No____

6 months? Yes____ No____ 1 year? Yes____ No____

PROCESS BATHS

How many tanks _____

Process Bath # ____, tank number: _____

CHEMICAL MAKE UP OF PROCESS BATH

Bath Size in gallons: _____ Operating Temperature: _____

If there is more than 1 bath for this acid, is the concentration the same or different in each bath?

Same _____ Different _____

If it is different, what are the different concentrations? _____

Main Metal Salt (Avg.): _____ % or oz/gal

Sulfuric Acid (Avg.): _____ oz/gal

Other: _____ oz/gal

CONTAMINATION

Please give reason for dumping of this bath _____

What is the quality requirement of this bath?

What are the contaminants that require you to dump the bath, and what is the concentration?

Nickel _____ Copper _____ Zinc _____ Other _____

Which contaminants most often cause you to dump? _____

(Rate of Contaminant build-up) _____

How frequently do you dump/ replace the bath?

3 months _____ 6 months _____ 1 year _____ Other _____

How much do you dump (gal/time)? _____

Please copy this page as needed

COST EVALUATION

Cost of bath _____ (\$ / gal) Cost to haul spent bath off site (\$ / gal) _____

Sludge cost (treatment/disposal) (\$) _____ Cyanide treatment (\$ / gal) _____

Energy cost (\$/kWh) _____

Labor cost (plant, maintenance, waste treatment) (\$/hour) _____

Volume of bath hauled off site per year (gal) _____

Last years disposal cost _____

Last years costs of bath replacement _____

Last years costs of bath treatment _____

REFERENCE INFORMATION

How does your company make decisions about capital acquisition and purchases? _____

Who are the decision makers? _____

Do you lease equipment? _____

ADDITIONAL INFORMATION OR COMMENTS

Please include:

- Process layout with name and type of machines
- MSDS on all stations

ADDITIONAL INFORMATION OR COMMENTS (continued):



EXERGY TECHNOLOGIES CORPORATION
25 Mauchly, Suite 316
Irvine, CA 92618
Phone: (949) 757-2690 Fax: (949) 757-2715



EXERGY TECHNOLOGIES CORPORATION
BRIGHT CHROME DATA COLLECTION FORM

COMPANY INFO

Name: _____ Phone: _____
 Title: _____ Fax: _____
 Company: _____ E-Mail: _____
 Address: _____ Date: _____

FACILITY INFORMATION

_____ # of employees at your facility
 What are your production hours?
 _____ Hrs/ Day _____ Shifts/ Day _____ Days/ Wk _____ Wks/ Year

FEED WATER INFORMATION

Do you pretreat your incoming water ? Yes _____ No _____

a) If yes, please specify and provide the quality standards below:

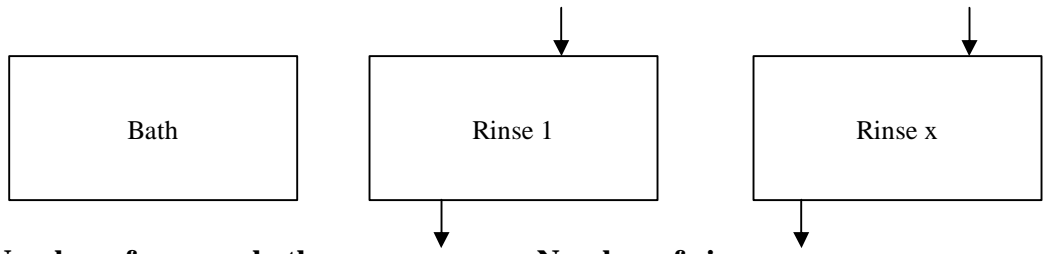
_____ RO _____ IX _____ both _____ other
 Conductivity _____ ? S/cm TDS _____
 TSS _____ pH _____
 Temperature _____ Other Specific Components _____

b) If no, what is the source of your incoming water ?

_____ City _____ Well _____ Other

Please provide the water quality data specified in a)

PROCESS INFORMATION



Number of process baths _____

Number of rinses _____

PROCESS BATHS

Process Bath # ____, tank number: _____, tank volume: _____

Dumping schedule, if applicable

_____ yearly
_____ monthly
_____ weekly

Please give reason for dumping _____

Copper Sulfate _____ g/l (oz/gal) Sulfuric Acid _____ g/l (oz/gal)

Brightner _____ g/l (oz/gal) pH _____ SU

pH adjustment with: _____ How much? _____

Process Bath # ____, tank number: _____

Dumping schedule, if applicable

_____ yearly
_____ monthly
_____ weekly

Please give reason for dumping _____

Copper Sulfate _____ g/l (oz/gal) Sulfuric Acid _____ g/l (oz/gal)

Brightner _____ g/l (oz/gal) pH _____ SU

pH adjustment with: _____ How much? _____

RINSES

Rinse #____, **tank number:**____, **tank volume:**_____

Flowrate_____gpm Tank size_____

Conductivity _____? S/cm TDS _____ppm

TSS _____ pH_____

Temperature _____

Other specific components _____

Rinse #____, **tank number:**____, **tank volume:**_____

Flowrate_____gpm Tank size_____

Conductivity _____? S/cm TDS _____ppm

TSS _____ pH_____

Temperature _____

Other specific components _____

Rinse #____, **tank number:**____, **tank volume:**_____

Flowrate_____gpm Tank size_____

Conductivity _____? S/cm TDS _____ppm

TSS _____ pH_____

Temperature _____

Other specific components _____

FUTURE NEEDS

Do you see your requirements changing in the next 3 months? Yes____ No____

6 months? Yes____ No____ 1 year? Yes____ No____

COST EVALUATION

Cost of bright chrome bath (\$/gal)_____ Cost to haul chrome bath off site (\$/gal)_____

Bath hauled off site per year (gal)_____ Sludge cost (treatment/disposal) (\$)_____

Energy cost (\$/kWh)_____

Labor cost (plant, maintenance, waste treatment) (\$/hour) _____ -

REFERENCE INFORMATION

How does your company make decisions about capital acquisition and purchases? _____

Who are the decision makers? _____

Do you lease equipment? _____

ADDITIONAL INFORMATION OR COMMENTS

Please include:

- Process layout with name and type of machines
- MSDS on all stations

ADDITIONAL INFORMATION OR COMMENTS (continued):



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EXERGY TECHNOLOGIES CORPORATION

ME DATA COLLECTION FORM FOR CHROME PLATING

COMPANY INFO

Name: _____ Phone: _____

Title: _____ Fax: _____

Company: _____ E-Mail: _____

Address: _____ Date: _____

FACILITY INFORMATION

_____ # of employees at your facility

What are your production hours?

_____ Hrs/ Day _____ Shifts/ Day _____ Days/ Wk _____ Wks/ Year

FEED WATER INFORMATION

Do you pretreat your incoming water ? Yes _____ No _____

a) If yes, please specify and provide the quality standards below:

_____ RO _____ IX _____ both _____ other

Conductivity _____ ? S/cm TDS _____

TSS _____ pH _____

Temperature _____ Other Specific Components _____

b) If no, what is the source of your incoming water ?

_____ City _____ Well _____ Other

Please provide the water quality data specified in a)

Number of process baths _____ **Number of rinses** _____

PROCESS BATHS

Process Bath # ____, tank number: _____

Please give reason for dumping _____

CHEMICAL MAKE UP OF PROCESS BATH

Bath Size in gallons: _____ Operating Temperature: _____

If there is more than 1 bath for this acid, is the concentration the same or different in each bath?

Same _____ Different _____

If it is different, what are the different concentrations? _____

Chromic Acid Concentration (Avg.): _____ % or oz/gal

Sulfuric Acid (Avg.): _____ oz/gal

Other: _____ oz/gal

CONTAMINATION

What is the quality requirement of this bath? (Rate of Contaminant build-up) _____

What are the contaminants that require you to dump the bath, and what is the concentration?

Nickel _____ Copper _____ Zinc _____ Other _____

Which contaminants most often cause you to dump? _____

How frequently do you dump/ replace the bath?

3 months _____ 6 months _____ 1 year _____ Other _____

How much do you dump (gal/time)? _____

Please copy this page as needed

RINSES

Rinse # ____, tank number: _____, tank volume: _____

Flowrate _____ gpm Tank size _____
Conductivity _____ ? S/cm TDS _____ ppm
TSS _____ pH _____
Temperature _____ Copper _____ ppm

Other specific components

Rinse # ____, tank number: _____, tank volume: _____

Please copy this page as needed

Flowrate _____ gpm Tank size _____
Conductivity _____ ? S/cm TDS _____ ppm
TSS _____ pH _____
Temperature _____ Copper _____ ppm

Other specific components

Please copy this page as needed

FUTURE NEEDS

Do you see your requirements changing in the next 3 months? Yes ___ No ___

6 months? Yes ___ No ___ 1 year? Yes ___ No ___

COST EVALUATION

Cost of bath _____ Cost to haul spent Zinc bath off site (\$ / gal) _____

Sludge cost (treatment/disposal) (\$) _____ Cyanide treatment (\$ / gal) _____

Energy cost (\$/kWh) _____

Labor cost (plant, maintenance, waste treatment) (\$/hour) _____

Volume of Zinc bath hauled off site per year (gal) _____

REFERENCE INFORMATION

How does your company make decisions about capital acquisition and purchases? _____

Who are the decision makers? _____

Do you lease equipment? _____

ADDITIONAL INFORMATION OR COMMENTS

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