



Pioneer Pump, Inc.

Quote # _____
Cust # _____
SO # _____

310 S. Sequoia Pkwy. Canby, OR 97013 Ph. 503-266-4115 Fax 503-266-4116

CUSTOMER INFORMATION

Name: _____ Company: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Email: _____

APPLICATION INFORMATION

Market: Agricultural Construction / Dewatering Industrial Municipal Rental
Date Requested: _____ Required Date: _____ Bid Date: _____
Description of Application: _____

OPERATING CONDITIONS

Design Conditions: Flow (GPM) _____ TDH (ft.) _____
Suction Condition: _____ Lift / Flooded Self Priming Required: Yes No
Discharge Head: _____ NPSHA: _____ Elevation Above Sea Level: _____

LIQUID

Liquid Pumped: _____ Solid Size: _____ Temp: _____
Viscosity: _____ Specific Gravity: _____ Concentration: _____ pH: _____

CONFIGURATION

Pump Type: PP SC P PE PT HS WP Model: _____
Pump End Configuration: Horizontal Frame Vertical Frame SAE Mount
Frame Type: Grease Lube Frame Oil Lube Frame Paint: _____
Discharge Position: TH TV BH BV Other (_____)

DRIVER / PACKAGE CONFIGURATION

Electric Driven:	Diesel Driven:
Pump/Motor Configuration:	Engine Details:
<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	Make / Model: _____
Drive Configuration:	Engine HP Required: _____
<input type="checkbox"/> Base, Coupling, & Guard	<input type="checkbox"/> Air Cooled <input type="checkbox"/> Liquid Cooled
<input type="checkbox"/> Side by Side Belt Drive	Drive Configuration
<input type="checkbox"/> Overhead Belt Drive	<input type="checkbox"/> Skid Mounted
<input type="checkbox"/> Horizontal Closed Coupled	<input type="checkbox"/> Trailer Mounted <input type="checkbox"/> DOT Option
<input type="checkbox"/> Vertical Coupled	<input type="checkbox"/> Other (_____)
<input type="checkbox"/> Vertical Mounted	Hitch
<input type="checkbox"/> Other (_____)	<input type="checkbox"/> Pintle
Motor Details	<input type="checkbox"/> Ball (Size _____)
HP: _____ RPM: _____ Volts: _____	<input type="checkbox"/> Other (_____)
Ph: _____ Hz: _____	Panel
Motor Enclosure:	<input type="checkbox"/> Auto Start/Stop Capable
<input type="checkbox"/> TEFC <input type="checkbox"/> ODP <input type="checkbox"/> Other (_____)	<input type="checkbox"/> Standard Non-Programmable
<input type="checkbox"/> Washdown Duty	<input type="checkbox"/> Other (_____)
<input type="checkbox"/> Explosion Proof (Class/ Div _____)	Brakes
Efficiency:	<input type="checkbox"/> No Brakes
<input type="checkbox"/> Standard Eff.	<input type="checkbox"/> Electric Brakes
<input type="checkbox"/> Premium Eff.	<input type="checkbox"/> Surge Brakes
<input type="checkbox"/> Inverter Ready	Other Options Requested: _____
<input type="checkbox"/> Inverter Duty	_____
<input type="checkbox"/> Other (_____)	_____