

## Breathing Air Compressor Design Questionnaire

Customer Name and Application:

Customer:

Phone:

E-mail:

Fax:

Address:

Fire Department \_\_\_\_\_ Other \_\_\_\_\_

### Compressor:

1. Compressor Type Requested:

AIR-KAT  FIRE-KAT  FIRE-KAT SILENT  MINI-KAT   
INTEGRA  SPORT  HORIZONTAL  DIVE-LINE  TRAILER   
Other: \_\_\_\_\_

2. What power system is desired for the compressor system? Gasoline  Diesel   
Electric: 220V/1P  230V/3P  460V/3P  575V/3P  Other \_\_\_\_\_

Frequency: 50 Hz  60Hz

3. Type of cylinders being refilled SCBA/SCUBA:

2216 PSIG  3200 PSIG  4500 PSIG

4. Size of cylinder: 30 min  45 min  60 min

5. Number per month: 30 min  45 min  60 min

6. Other cylinders being filled:

Size \_\_\_\_\_ Type \_\_\_\_\_ Pressure \_\_\_\_\_ PSIG Qty/week \_\_\_\_\_

7. Final Pressure: 4500 PSIG  5000 PSIG  6000 PSIG  7000 PSIG

8. Desired SCFM flow-rate: \_\_\_\_\_

9. Is the SECURUS filter monitoring system required? Yes  No

10. Is an upgraded, higher capacity, filtration system required? Yes  No

11. Filter capacity required in hours of operation \_\_\_\_\_

12. Is an B-KOOL dryer for the filtration system required? Yes  No
13. Is an inlet AERO-GUARD Co2 scrubber system required? Yes  No
14. Do you wish to monitor continuously for carbon monoxide (CO) Yes  No
15. Do you want auto compressor shutdown on high CO alarm? Yes  No
16. Will the compressor be stationary  or mobile ?
17. If mobile, where will the unit be mounted? Truck  Trailer  Other \_\_\_\_\_

**Air Storage:**

1. Is an air storage system to be employed? Yes  No
2. Size storage cylinders: 5000 PSIG ASME  7000 PSIG ASME   
4500 PSIG TC  5000 PSIG TC  6000 PSIG TC
3. Number of Storage cylinders required: \_\_\_\_\_
4. Do you desire vertical  or horizontal  cylinders?
5. Is a free standing rack required for the cylinders? Yes  No
6. Is a manifold system required for the cylinders? Yes  No
7. Is a cascade valve system with gauges required? Yes  No
8. Manual or automatic cascade refilling system:  
Manual Yes  No   
Automatic Yes  No
9. Is a cascade decanting system required? Yes  No

**Fill Station:**

1. As per NFPA 1901, 1999 Edition, a fragmentation station is recommended for safe filling operations of SCBA cylinders.
- How many SCBA cylinders need to be filled at one time? \_\_\_\_\_
- Do you need a bulk fill control panel , cascade fill panel , or single fill whip ?
2. What is the final SCBA cylinder air pressure desired?  
2216 psig  3000 psig  4500 psig  5500 psig  6000 psig

3. What is the total the number of cylinders to be filled simultaneously? \_\_\_\_\_  
How often will this fill cycle occur? \_\_\_\_\_  
Is a cylinder decanting system required to 200 PSIG? Yes  No
4. Will the SCBA cylinder storage system be stationary  or mobile ?
5. Will the system be permanently located indoors  or outdoors ?

**Low Pressure Fill Panel:**

1. Is an LP air panel required for tools and testing? Yes  No
2. What pressure is the regulator and safety setting? \_\_\_\_\_ PSIG

**Additional document Request:**

1. Product brochures Yes  No
2. Installation information Yes  No
3. RFQ/RFP Specification for bidding Yes  No
4. CRN component certification Yes  No

**System Location and design for installation:**

1. Will the compressor, air storage, and fill station be in the same room? Yes  No
2. Are separate components required or a modular system? Separate  Modular

The above questions pertain to installation. Is the system to be a field install of each item of the system or is a preassembled module of the compressors, air storage, and fill station preferred?

**System design additional items:**

Are there any special environment conditions that may exist where the system is located?  
Example: excessive rain, snow, extreme temperatures, chemical contaminants, manufacturing vapours, extreme dust, etc.

If the system will be placed on an open tendering process do you require a detailed technical specification to assist in the tendering RFP or RFQ?

Please provide any requests for additional information in the Notes section below.

Notes: \_\_\_\_\_  
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