

# Nitrogen Generation System Project Configuration Questionnaire



## CONTRACTOR INFORMATION

Contractor Name:	Company Name:
City, Country:	Primary Phone:
Email Address:	

## FIRE PROTECTION SYSTEM SPECIFICATIONS

Project Name:
Type of Facility: Check One: <input type="checkbox"/> New System / <input type="checkbox"/> Existing

Zone #	Dry/Preaction (check one)	Supervisory Pressure (BAR)	Capacity (Liters)	Leak Rate (BAR/Hour)
1	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
2	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
3	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
4	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
5	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
6	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
7	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
8	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
9	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
10	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
11	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/
12	<input type="checkbox"/> Dry OR <input type="checkbox"/> Preaction			/

## REQUIRED ACCESSORIES

N <sub>2</sub> Blast® – Auto-purge System (one required per zone): #
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## OPTIONAL ACCESSORIES / SERVICES (Leak detection systems and air bypass alarm standard)

BlastOff III – Early Warning System (one required per N <sub>2</sub> Blast FPS):			
BlastOff IV – Onboard Purity Alarm (one required per N <sub>2</sub> Blast FPS):			
Quick-Check – Purity Manifold (input quantity per model below):			
1 Zone:	6 Zone:	10 Zone:	20 Zone:
Manufacturer Startup Required? <input type="checkbox"/> Yes <input type="checkbox"/> No		Project Location (required):	

## DISTRIBUTOR INFORMATION

Contact:
Company:
Phone:
Email Address:

Please email the completed  
questionnaire to:  
**concordsales@nationalfire.com**