

Well Water Checklist



Name of the Client: _____

Date: _____

What don't you like about your water? (This question is a road map to making the customer happy)!

Answer: _____

Do you have a water test report?

Answer: _____

How big is the house?

Answer: _____

How many people live there?

Answer: _____

How many bathrooms?

Answer: _____

Any larger water use areas? (Such as multiple showerheads, extra appliances, instant hot water

heaters? Irrigation attached to the treatment system?)

Answer: _____

Do you have any large gatherings or extended family stays during holidays? (Nobody wants water to

turn bad when their mother-in-law is staying for Christmas).

Answer: _____

Will irrigation be attached to the treatment system?

Answer: _____

Is there any current water filtration?

| Answer: |
|--|
| If taking water samples, the samples must be taken before any water filtration/treatment or with the |
| water treatment equipment on bypass and filters removed. |
| Answer: |
| Do you plan to keep any treatment equipment? |
| Answer: |
| Is there any smell in the water? If yes, is it in the hot and the cold? |
| Answer: |
| Is there any staining (please provide color): |
| Answer: |
| Is there any mineral build-up? |
| Answer: |
| What is the flow rate of your well? GPM? |
| Answer: |
| How deep is your well? How old is your well? |
| Answer: |
| What year was the house built? |
| Answer: |
| What kind of pipe do you have? |
| Answer: |
| Has your well ever run out of water? |
| Answer: |

Do you ever ration water through the year?

Answer: _____

Do you have any pressure issues?

Answer: _____

Note: Getting the chemistry correct and sizing the system properly are both important. They will help minimize

service issues.

System selection

