

REQUEST NEEDS ASSESSMENT

Your Company Name*

Contact Person Name*

Contact Person Title*

Email*

Mobile*

Company Ph. No.

Company Full Address *

Facility Full Address *

Additional Facilities
Locations Addresses

Refinery production in
Barrels Per Day:

Select utilities already
available at Facility
location:

Power/Electric

Water

Steam

Natural Gas

What Type of
feedstock?

Do you have feedstock specs or assay? *

Yes

No

If Yes, please Email Your specs or Assay at info@AdvancedODS.com

What is the capacity (throughput) needed?

What sulfur limit do you need to achieve?

Is your input stream coming from an existing system or a tank?

What is your timeline for installation?

Any other helpful facts?

