

Name: _____

Date: _____

Owners' Address: _____

American Perc-Rite ^R Drip Startup Log			USER LOG			
Line No.	As-Built Value	Number of Zones: _____ Description	Date	Date	Date	Date
1		BEDROOMS				
2		GALLONS PER DAY				
3		TEXTURE GROUP				
4		GPD/FT2 DESIGN SOIL LOADING RATE				
5		TOTAL LINEAR FEET TUBING				
6		GPD/LF FT DESIGN TUBING LOADING RATE				
7		METER READING				
8		ZONE 1 LINEAR FEET OF TUBING				
9		ZONE 1 NUMBER OF FIELD FLUSH CONNECTIONS				
10		ZONE 1 GPM DOSING FLOW RATE				
11		ZONE 1 GPM TOTAL FLUSHING FLOW RATE				
12		ZONE 1 RUN TIME				
13		ZONE 2 LINEAR FEET OF TUBING				
14		ZONE 2 NUMBER OF FIELD FLUSH CONNECTIONS				
15		ZONE 2 GPM DOSING FLOW RATE				
16		ZONE 2 GPM TOTAL FLUSHING FLOW RATE				
17		ZONE 2 RUN TIME				
18		ZONE 3 LINEAR FEET OF TUBING				
19		ZONE 3 NUMBER OF FIELD FLUSH CONNECTIONS				
20		ZONE 3 GPM DOSING FLOW RATE				
21		ZONE 3 GPM TOTAL FLUSHING FLOW				
22		ZONE 3 RUN TIME				
23		ZONE 4 LINEAR FEET OF TUBING				
24		ZONE 4 NUMBER OF FIELD FLUSH CONNECTIONS				
25		ZONE 4 GPM DOSING FLOW RATE				
26		ZONE 4 GPM TOTAL FLUSHING FLOW				
27		ZONE 4 RUN TIME				
28		PEAK ENABLE CYCLE COUNTER				
29		HIGH LEVEL CYCLE COUNTER				
30	CONTRACTOR STARTUP REPRESENTATIVE:					
31	STARTUP DATE:					

CONTRACTORS NAME & PHONE: _____

Note to Owner: Any changes to pump run timer should be recorded in manual on this page.

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**PLEASE RETURN TO PETERSEN, PO BOX 340, FREDONIA, WI 53021
FAX 800-669-1232**