

# Viridian Pump Return Pre-Authorization Form

Date: \_\_\_\_\_

Job Name: \_\_\_\_\_

Purchased From: \_\_\_\_\_

Location: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Pump Model #: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Reason for Return: \_\_\_\_\_

Installation Date: \_\_\_\_\_

Service Call Date: \_\_\_\_\_

Project Scope:

New Install	Retrofit

Pump Control:

Stand Alone	0-10V	BMS

Operating Mode:

AUTO	Proportional	Constant Pressure	Constant Speed

Application:

Heating	Chilled Water	DHW	Closed Loop	Open Loop

Boiler Type:


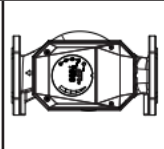
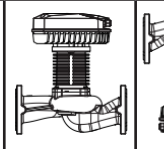
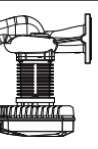
Condensing	Non-condensing

Fluid Type:

Water	Prop Glycol %	Ethel Glycol %	Other %

Fluid Treatment/Additives: \_\_\_\_\_

Circulator Mounting Position:

System Temp: \_\_\_\_\_

System Pressure: \_\_\_\_\_

Voltage/Phase: \_\_\_\_\_

Circulator Amps: \_\_\_\_\_



Return completed form to:  
B.J. Terroni Company Returns Department  
returns@bjterroni.com