

## ABATEMENT REQUIREMENTS FORM

*Information contained will be treated as confidential*

|                   |        |
|-------------------|--------|
| Company Name:     | Date:  |
| Street Address:   |        |
| City, State, Zip: |        |
| Contact:          | Phone: |
| Pager:            | Fax:   |

|                     |        |
|---------------------|--------|
| Prepared by:        | Title: |
| Phone:              | Fax:   |
| Sales Rep:          |        |
| Process:            |        |
| Tool Manufacturer:  | Model: |
| Number of Chambers: |        |
| Pump Manufacturer:  | Model: |
| Purge (slpm):       |        |

Chamber Number:

|     | Process Gases: | Clean Gases: | Conc. (%) | Flow Rate (slpm) | Running Time (min) | Operation Time (hrs/wk) |
|-----|----------------|--------------|-----------|------------------|--------------------|-------------------------|
| 1.  |                |              |           |                  |                    |                         |
| 2.  |                |              |           |                  |                    |                         |
| 3.  |                |              |           |                  |                    |                         |
| 4.  |                |              |           |                  |                    |                         |
| 5.  |                |              |           |                  |                    |                         |
| 6.  |                |              |           |                  |                    |                         |
| 7.  |                |              |           |                  |                    |                         |
| 8.  |                |              |           |                  |                    |                         |
| 9.  |                |              |           |                  |                    |                         |
| 10. |                |              |           |                  |                    |                         |

Chamber Number:

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|-----|----------------|--------------|-----------|------------------|--------------------|-------------------------|
| 1.  |                |              |           |                  |                    |                         |
| 2.  |                |              |           |                  |                    |                         |
| 3.  |                |              |           |                  |                    |                         |
| 4.  |                |              |           |                  |                    |                         |
| 5.  |                |              |           |                  |                    |                         |
| 6.  |                |              |           |                  |                    |                         |
| 7.  |                |              |           |                  |                    |                         |
| 8.  |                |              |           |                  |                    |                         |
| 9.  |                |              |           |                  |                    |                         |
| 10. |                |              |           |                  |                    |                         |

**Notes:**

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