



PRODUCT SELECTION GUIDE

To help you make sure that you select the correct product & size.

SURVEY FLOOD MITIGATION NEEDS

Company _____ Building _____ Date _____

Location _____ Page # _____

Name _____

Email _____ Phone _____

Please fill in the last column for each area of flood concern throughout the property & match selection to corresponding product options.

	Flood Bag	Flood Barrier	Water Curb	Flood Gate	Water-Gate	Wick Up Mat	Wick Up Berm	Your Needs
FREQUENCY OF FLOODING								
< 3/year (Disposable)	X	X	X	X		X	X	
< 20/year (Reusable upto 6mo)	X	X	X	X				
2+ /year (Reusable)			X	X	X			
Unknown	X	X	X	X	X	X	X	

Notes:

	Flood Bag	Flood Barrier	Water Curb	Flood Gate	Water-Gate	Wick Up Mat	Wick Up Berm	Your Needs
TYPE OF FLOOD WATER								
Fresh	X	X	X	X	X	X	X	
Salt/Brackish			X	X	X			
Unknown	X	X	X	X	X	X	X	

Notes:

	Flood Bag	Flood Barrier	Water Curb	Flood Gate	Water-Gate	Wick Up Mat	Wick Up Berm	Your Needs
LOCATION OF CONCERN								
Indoors	X	X		X		X	X	
Outdoors	X	X	X	X	X			
Doorway	X	X	X	X	X		X	

Notes:

	Flood Bag	Flood Barrier	Water Curb	Flood Gate	Water-Gate	Wick Up Mat	Wick Up Berm	Your Needs
LEVEL OF FLOOD CONCERN								
< 3in	X	X		X		X	X	
< 10in	X	X	X	X	X			
< 25in	X	X		X	X			
< 60in					X			
Desired Height								

Notes:

	Flood Bag	Flood Barrier	Water Curb	Flood Gate	Water-Gate	Wick Up Mat	Wick Up Berm	Your Needs
OPENING: WIDTH								
up to 50in	X	X	X	X		X	X	
< 20'	X	X	X	X*				
> 30'	X	X			X			
Actual Opening Width								

Notes:

* will require use of Stanchions.

	Flood Bag	Flood Barrier	Water Curb	Flood Gate	Water-Gate	Wick Up Mat	Wick Up Berm	Your Needs
DESIRED STORAGE AREA								
Wall Mount	X	X	X			X	X	
Closet / Truck	X	X	X	X	X	X	X	
Pallet	X			X	X			
Container	X				X			
Other_____	X	X	X	X	X	X	X	
NA	X	X	X	X	X	X	X	

Notes:

If you would like us to help you make your product selections, please fax this to: Fax # 401-722-1160 or email to: info@quickdams.com



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