

SILO FLUIDIZER INSTALLATION QUESTIONNAIRE



Company Name _____

Your Name _____

Address _____

Telephone Number _____

Fax Number _____

DESCRIPTION OF MATERIAL IN BIN

Name of Material _____

Moisture / Fat Content _____ % Min. _____ % Max.

Hydroscopic Yes No

Range of Particle Size

Minimum _____ or _____ Mesh

Maximum _____ or _____ Mesh

Percent under 50 Mesh _____ Under 200 Mesh _____

Material Temperature _____ [°F / °C]

Settled Bulk Density _____ [lb/ft³] / [Tons/m³]

Special Characteristics _____

DESCRIPTION OF BIN

Bin Wall Material _____

Shape of Hopper Conical / Square / Rectangle / Other (please describe) _____

Size (diameter / square) of Hopper _____

Slope of Bin Wall _____ From Horizontal

Bin is Discharged through airlock / Screw / Valve / Other (please describe) _____

General Comments _____
