

AIRLOCK / FEEDER QUESTIONNAIRE

Please complete the following questionnaire for us to serve you better in selecting the product most suitable to your intended application. If the information is unknown, please indicate as not available.

Company :	Operation :
Contact :	Phone :
Designation :	Fax :
Address :	Email :

Technical Specifications:

Material* :	Duty* :
Bulk Density: kg/m ³	Capacity* : kg/h
Temperature : °C	Angle of Repose : °
Moisture Content: %	Pressure/Vaccum at Inlet of Valve : kpa
Pressure/Vaccum at Outlet of Valve : kpa	Equipment above the valve:
Location of the valve: Indoor/Outdoor	

Valve Construction:

Body Material : CI/SS304/SS316L	Rotor Material : CI/SS304/SS316L
Rotor Tips (if Required): Rubber/Stainless steel/Ceramic	Electrical Supply : v ph hz
Rotor RPM: rpm	

Application / Location: (Please fill Y or N):

<input type="checkbox"/>	Container	<input type="checkbox"/>	Weigh Hopper	<input type="checkbox"/>	Screw Conveyor
<input type="checkbox"/>	Blender	<input type="checkbox"/>	Cyclone/Bag Filter	<input type="checkbox"/>	Bulk Truck
<input type="checkbox"/>	Silo/hopper	<input type="checkbox"/>	Others (if any):		

Material Characteristics: (Please fill Y or N):

<input type="checkbox"/>	Toxic	<input type="checkbox"/>	Acid	<input type="checkbox"/>	Abrasive
<input type="checkbox"/>	Neutral	<input type="checkbox"/>	Alkali	<input type="checkbox"/>	Sharp corners
<input type="checkbox"/>	Corrosive	<input type="checkbox"/>	Organic solvents	<input type="checkbox"/>	Bleaching solvents
<input type="checkbox"/>	Hygroscopic	<input type="checkbox"/>	Static electricity	<input type="checkbox"/>	Others

Flange & Attachment Requirement:

Other Information if any:

Thanks for your valuable input and time.