

QUESTIONNAIRE PNEUMATIC CONVEYING

Form to complete and return by mail to contact@palamatic.fr

To make sure your data is taken into account, please save the document on your desktop before filling it in.

Company		Date					
Contact name		Project ref.					line in
Function		Phone					(n)
Address		E-mail				HEPIC	VEX.L
City							
Country							
Sector of activity	Food & Fee	ed Chemical ind	ustry Fi	ine chemical in	ndustry		
	Building industr	y Water treatm	ent O	ther			
PRODU	ICTS CHARACTER	RISTICS			71		
System i	mplementation	Indoor	Outdoor	,65			
	g temperature	-20°/+40°	Other				
Height av	ailable in mm.						
Required	flow rate			Opera	ating time - h./we	ek	
Continuo	us operation		Batch operation				
Number o	of inputs	N	lumber of outputs				
Conveyir	ng distance - m.	Horizontal	Vertical				
Bends	90° X	(qty)	45° X (q	ıty)		Others X (qty)	
If possible	e, send us a process d	liagram of the envisaged pipe	eline				
How is th	ne system fed ?						
Hopper	Big bag	Sack dumping	g unit	Suction pipe			
Other							
What equ	ipment is installed at t	he output of the pneumatic co	onveying?				

Headroom height available Headroom height available Weighed batch mode								
*If yes, size of the batch		Precision req	uired on the batch					
Preference of conveying	Vacuum	Pressure	Dense phase	·				
MANUFACTURING								
Parts in contact with the product Mild steel AISI 304L AISI 316L Other								
Other parts Mild steel	AISI 304L AISI	316L Other						
Atex yes*	no	Tempera	ture					
Zone 20 21 22 0 1 2 2 *If Atex zone, please send the corresponding questionnaire.								
ADDITIONAL INFORMATION								

PRODUCTS CHARACTERISTICS

	Product 1		Product 2		Product 3		Product 4	
Designation								
Apparent density kg/m³								
True density kg/m³								
Maximum granulometry μm								
Main granulometry μm								^
Angle of repose °								
Moisture content %								/
Product temperature °C								
Abrasive	yes no		yes	no	yes	no	yes	no
Toxic	yes no		yes	no	yes	no	yes	no
Arching	yes no		yes	no	yes	no	yes	no
Sticky	yes no		yes	no	yes	no	yes	no
Food product	yes no		yes	no	yes	no	yes	no
Special characteristics*	yes no		yes	no	yes	no	yes	no

^{*} If yes, please forward us the Material Safety Data Sheet.

It is very important to give us the maximum information on the products to be treated; please send us the MSDS or inform us of the danger level/toxicity of the product

Note: This data is important data for the validation of the adapted system.

