

Save completed form and email to Sales@ControlConceptsUSA.com

Please answer all applicable questions.

Company Name _____

Contact Name and Title _____

Address _____

City _____ State _____ Zip or Postal Code _____

Country _____ Phone _____ Fax _____

Email _____

1. Description of Application / Problem:

2. Description of Material in Vessel:

(A) Moisture content _____ % Min. _____ % Max.

(B) Range of particle size: Min. _____ Inches or _____ Mesh

Max. _____ Inches or _____ Mesh

% Under 60 Mesh _____ % / Under 200 Mesh _____ %

(C) Temperature (Max): _____ Please check one: °F or °C

(D) Density: _____ Lbs./Ft.³

(E) Special characteristics:

(F) Size of vessel before slope: (Diameter or H x W x D) _____

(G) Type of gate: _____

(H) Number of vessels like this one: _____

Mesh	Micron	Inches
4	4760	.185
6	3360	.131
8	2380	.093
12	1680	.065
16	1190	.046
20	840	.0328
30	590	.0232
40	420	.0164
50	297	.0116
60	250	.0097
70	210	.0082
80	177	.0069
100	149	.0058
140	105	.0041
200	74	.0029
230	62	.0023
270	53	.0021
325	44	.0017
400	37	.0015
625	20	.0008
1250	10	.0004
2500	5	.0002

3. Description of Vessel (Please submit a drawing)

(A) Vessel construction: Carbon Steel SS 304 SS 316 Concrete Other _____

(B) Capacity: _____ Tons or _____ Cubic Ft.

(C) Wall thickness: _____

(D) Slope of wall: _____ ° from Horizontal

(E) Size of discharge opening: _____

Continued on the next page.

4. Flow of Material:

(A) Level of material is typically _____ to _____ feet above bottom discharge.

(B) Vessel is filled by Conveyor Feeder Bucket Other _____**AND**Discharges onto Conveyor Feeder Truck Other _____(C) Required flow from vessel is: Continuous Intermittent(D) Current discharge is: Air Gravity

(E) Required rate of flow is _____ Tons / Hour

5. System Control(A) Is stand-alone control required? Yes No(B) Will manual override be needed? Yes No(C) Voltage requirement: 110 220 24 Other _____

(D) Please specify any special features required for system control:

6. Air Supply

(A) Air supply available at vessel: _____ PSI and _____ CFM

(B) Air supply pipe size: _____ Diameter

7. Please indicate any other flow aids that have been tried with this application:

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*Engineering drawings or a sketch with dimensions can be emailed to Sales@ControlConceptsUSA.com.
Please include your company information on drawing. Most CAD file formats are acceptable.*

