

Application Questionnaire for Blender

www.primasonics.com www.sonic-horns.com

Contact Details		
Company Name:		
Contact Person:		
Contact Tel. No:		
Email Address:		
Skype Address:		
Plant Location/Code:		
Application Details		
Additional Equipment mounted on Blender: <i>(Dust Collection etc)</i>		
Material Blended or Mixed:		
Material Temperature:		
Material Particle Size Range:		
Moisture Content of Material: (%)		
Blockage Description, Hang Up: <i>(uniform along length, only at inlet etc)</i>		
Blender Material of Construction:		
Housing Shape: <i>(u-through or cylindrical)</i>		
Inlet Dimensions:		
Dimensions: <i>(attach drawing/sketch where possible)</i>		
Outlet Dimensions:		
Type of Blender/Mixer Brand: <i>(Ribbon Screw, Ploughshare etc)</i>		
Any Available Inspection Flanges/Hatches: <i>(if Yes, please give dimensions/position)</i>		
Compressed Air Available:	Pressure:	
	Volume:	
Any Additional Notes		
Other Information		
Would you like a site visit?		
Would you be willing to do a case study for us if the order is successful?		
Where did you hear about Primasonics?		

Thank you for taking the time to complete our questionnaire, we will now process your enquiry & contact you soon