



India

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Date			
Company			
Address			
City	State	Zip	
Contact 1	Contact 2		
Phone	Phone		
Fax	Fax		
Email	Email		

Location of Installation: _____

Quotation deadline: _____ Installation target date: _____

Project status: ☐ Budgetary ☐ Funded ☐ Approved for purchase

MATERIAL

Common Name _____ Trade Name _____

Bulk Density _____ ☐ kg/cubic meter ☐ g/cc Particle Size _____

Temperature _____ Moisture Content _____

Composition

☐ Powder ☐ Granule ☐ Fiber ☐ Prill ☐ Pellet ☐ Flake
☐ Other _____

Characteristics (Check all that apply)

<input type="checkbox"/> Corrosive	<input type="checkbox"/> Agglomerates	<input type="checkbox"/> Segregates	<input type="checkbox"/> Aerates
<input type="checkbox"/> Explosive	<input type="checkbox"/> Hygroscopic	<input type="checkbox"/> Adhesive	<input type="checkbox"/> Degrades
<input type="checkbox"/> Packs or smears	<input type="checkbox"/> Friable	<input type="checkbox"/> Cohesive	<input type="checkbox"/> Toxic

Abrasiveness: ☐ Non-abrasive ☐ Mildly abrasive ☐ Highly abrasive

Flowability: ☐ Very free flowing ☐ Free flowing ☐ Sluggish

ENVIROMENT

Atmospheric conditions (Check all that apply)

☐ Indoor ☐ Outdoor ☐ Corrosive ☐ Explosive ☐ High temp ☐ Humid ☐ Dirty

CONVEYING

Duty cycle: _____ hours per day _____ days per week
Rate: ☐ Continuous _____ kg per ☐ Hour ☐ Minute
☐ Intermittent / Refill _____ Lbs. every _____
☐ Batch Batch amount: _____
Time to deliver batch: _____

Discharge height: _____ Horizontal distance: _____

Conveyor is fed by: _____

Conveyor is feeding: _____

CONVEYOR CONSTRUCTION

Contact Surfaces: ☐ Carbon steel ☐ #304 Stainless steel ☐ #316L Stainless steel

Non-contact surfaces: ☐ Carbon steel ☐ #304 Stainless steel ☐ #316L Stainless steel

Internal Finish: ☐ Standard (primary mill finish) ☐ Food Grade (to 120 grit) ☐ Sanitary (to 150 grit) ☐ Dairy

Conveyor casing: ☐ Flexible polyethylene ☐ Carbon steel ☐ Stainless steel

Motor specifications: _____ Volt/3 Phase/ _____ Hertz

☐ TEFC ☐ Washdown Duty ☐ Inverter Duty

☐ Explosion Proof: Class: _____ Group: _____ Division: _____

HOPPER / INLET OPTIONS

(check all that apply)

☐ .08 M³ Hopper ☐ .22 M³ Hopper ☐ .34 M³ Hopper ☐ Flanged inlet

☐ Vibrator ☐ Agitator ☐ Level sensors ☐ Air pads

☐ Mobile base ☐ Mobile hopper ☐ Other: _____

CONVEYOR CONTROLS

☐ Fixed speed reversing ☐ Variable speed reversing ☐ Other: _____

NEMA rating: _____

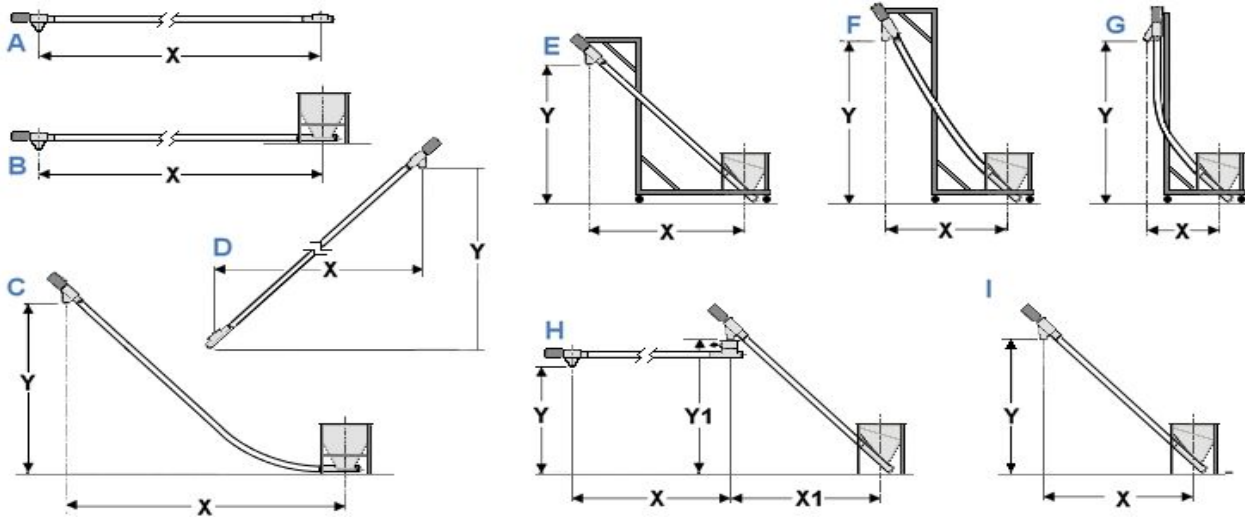
HOPPER MOUNTED DUST COLLECTION HOOD

☐ Self contained dust collection hood ☐ Dust hood only ☐ None

CONFIGURATION

Select from chart: _____ X= _____ Y= _____

If H: X1= _____ If H: Y1= _____



Sketch installation on a separate page. Show plan and/or side elevation with dimensions. Indicate preferred conveyor path with all possible alternatives. Indicate clearances and obstructions so we can select the most practical solution should this differ from your sketch.

DESCRIBE YOUR PROCESS: