

SOLIDS HANDLING EDUCTOR SPECIFICATION SHEET

Please provide the requested information and fax to Schutte & Koerting at 215-639-1597

COMPANY NAME:

CONTACT:

ADDRESS:

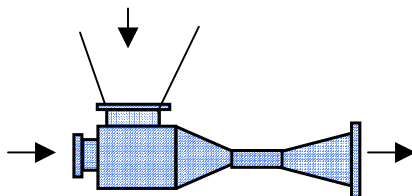
CITY, STATE, ZIP CODE:

PHONE NUMBER:

FAX NUMBER:

EMAIL:

Motive Conditions		
Air Source:	<input type="checkbox"/> Required <input type="checkbox"/> Existing	
Available Air Pressure:		psig
Available Volume:		scfm



Discharge Conditions		
Distance Material To Be Conveyed:		
Horizontal:		ft
Vertical:		ft
Number of Elbows:	90° _____ 45° _____	
Other:	_____	
Line Size Conveying:		in.

Suction Conditions		
Bulk Density:		lb/ft ³
Particle Size:		microns/diameter
Abrasive Characteristics:	<input type="checkbox"/> None <input type="checkbox"/> Slightly <input type="checkbox"/> Very	
Required Solids Flow Rate:	Nominal: _____ lb/hr or ft ³ /min. Maximum: _____ lb/hr or ft ³ /min.	
Gravity Feed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, how?

Construction Requirements	
Type Connections:	<input type="checkbox"/> NPT <input type="checkbox"/> _____ lb. flanged <input type="checkbox"/> Other _____
Construction Material:	<input type="checkbox"/> 316 Stainless Steel <input type="checkbox"/> Ductile Iron <input type="checkbox"/> Bronze <input type="checkbox"/> Other _____
Comments:	