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AIV120102024

FLOW-AID
APPLICATION DATA SHEET

PRINT SUBMIT

I. CUSTOMER INFORMATION

Company: _____ **Date:** _____

Contact: _____ **Ph:** _____

Title: _____ **Ext:** _____

Address: _____ **E-m:** _____

City, St, Zip: _____

II. DESCRIPTION OF MATERIAL AND TYPE OF PROBLEM

1. Material (Trade/Scientific): _____ **Weight:** _____ **Lbs-Cu Ft**

2. Characteristics

- ☐ Very Fine
- ☐ Fine
- ☐ Granular/Coarse
- ☐ Stringy
- ☐ Sticky
- ☐ Absorbs Moisture
- ☐ Corrosive
- ☐ Explosive
- ☐ Free Flowing
- ☐ Average Flowing
- ☐ Sluggish

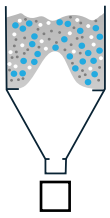
3. Compaction Level: ☐ Soft (shovel) ☐ Medium (pick) ☐ Hard (jackhammer)

4. Range of Particle Size: Min: _____ ' or _____ Mesh % Max: _____ ' or _____ Mesh %

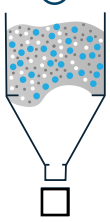
5. Material Temp: _____ °F **6. Moisture Content:** ☐ Dry ☐ Wet Moisture: _____ %

"☑" Type of problem; If other, indicate on ⑨

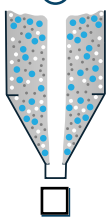
① ☐ ARCHED



② ☐ BRIDGED

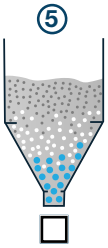


③ ☐ RATHOLED

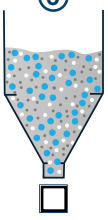


④ ☐ FUNNELED

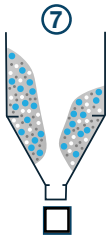
⑤ ☐ SEGREGATED



⑥ ☐ COMPACTED

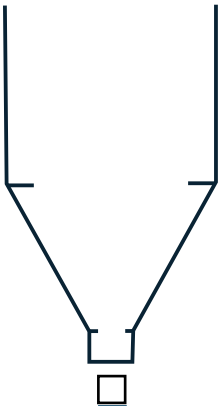


⑦ ☐ CAKED



⑧ ☐ SCALED

⑨



(SKETCH) _____

8. Material Presently Built-Up? ☐ Yes ☐ No **9. Thickness of Material Build-Up:** _____" or _____ '

10. Measure of Material Build-Up: _____ lbs (approx) **11. Build-Up has Existed:** _____months or _____years

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III. DESCRIPTION OF VESSEL

1. Vessel Material: ☐ Steel ☐ Stainless ☐ Concrete ☐ Wood **2. Capacity:** _____ Tons **or** _____ Cu Ft

3. Wall Thickness: _____" **4. Vessel in Use:** ☐ Yes ☐ No **5. Vessel Lined:** ☐ Yes ☐ No

6. Lining Material: _____ **7. Lining Thickness:** _____" **8. Vibrating Bottom:** ☐ Yes ☐ No

9. Vessel Filled By:
☐ Conveyor ☐ Bucket ☐ Feeder
☐ Other: _____

10. Discharged Onto:
☐ Conveyor ☐ Truck ☐ Feeder
☐ Other: _____

11. Required Flow: ☐ Continuous ☐ Intermittent **12. Rate:** _____ TPH **or** _____

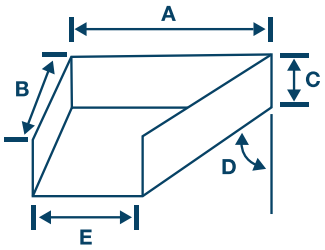
13. Current Solution: ☐ Hammer ☐ Poke ☐ Vibrate Using (make/type): _____

14. Frequency and duration Current Solution used in 24-hours: _____

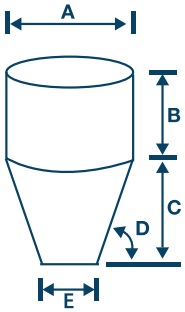
15. Effect of Current Solution: ☐ None ☐ Insufficient ☐ Other: _____

"☑" Vessel Design; Provide Dimensions of "☑" Vessel (or Supply Dwg)

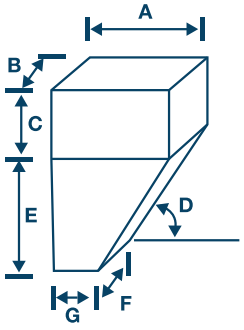
☐ **CHUTE**



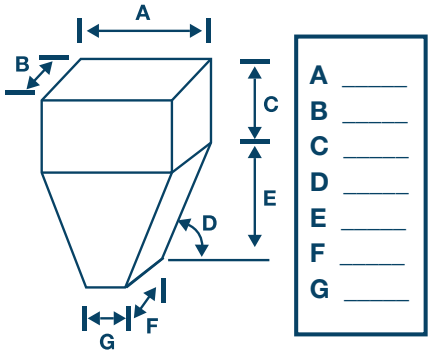
☐ **CONE**



☐ **WEDGE**



☐ **PYRAMID**



16. Chute Mount:
☐ Rigid ☐ Isolated

Notes: _____

IV. POWER / CONTROL AVAILABILITY

1. Power Preference: ☐ Air ☐ Electric

2. Air Supply: _____ PSI _____ CFM **3. Pipe Dia:** _____ " **4. Filtered Air:** ☐ Yes ☐ No

5. Electric Supply: _____ V / Ph / Hz **6. Explosion Proof Equipment Needed:** ☐ Yes ☐ No

7. Method of Control: ☐ Timer ☐ VFD ☐ Solenoid ☐ Manual

8. Type of Cycle Used: ☐ Manual ☐ Timed Interval ☐ PLC ☐ Auto During Discharge ☐ Auto Under No-Flow

Comments: _____

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