MARTIN® Flow-Aids Application Data Form

Form No. L3718-5/06

APPLICATION DATA

Plant Name: _____ Contact Person: _____

Address: _____ Telephone: _____ FAX: _____

City: _____ Province: _____ Postal Code: _____ Date: _____

Material Conditions

Type of Material: _____

Weight: per Cubic Foot: _____ or kg per Cubic Meter: _____

Moisture Content: ❒ Dry ❒ Wet Moisture _____%

Temperature of Material: ❒ Ambient ❒ High _____degrees ❒ F ❒ C

Condition: ❒ Coarse ❒ Granular ❒ Fine ❒ Powder ❒ Sticky

Particle Size: _____ **Compaction Level of Material:** ❒ Hard ❒ Soft

Vessel Information

Shape of the Vessel: ❒ Square/Rectangular ❒ Round ❒ Chute

Vessel Material: ❒ Steel ❒ Stainless ❒ Concrete ❒ Wood ❒ Other _____

Wall Thickness: _____ ❒ in ❒ mm Vessel Lined? ❒ Yes ❒ No

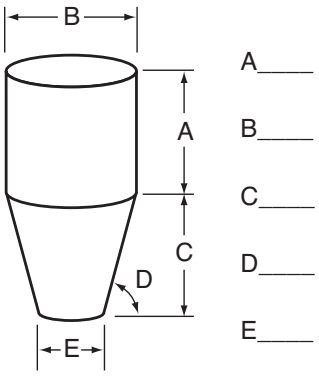
Vessel Lining Material: _____ **Lining Thickness:** _____ ❒ in ❒ mm

Vibrating Bottom Currently in Use? ❒ Yes ❒ No

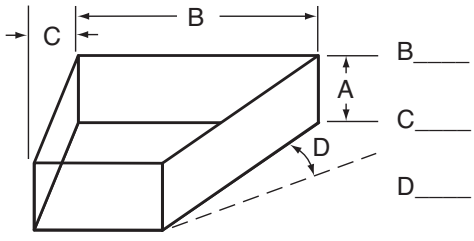
Discharge Frequency: ❒ Continuous ❒ Intermittent

Method of Discharge: ❒ Belt ❒ Screw ❒ Hopper ❒ Other _____

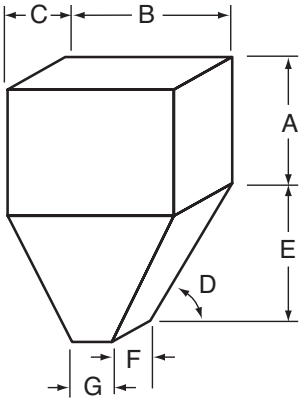
COMPLETE DIMENSIONAL INFORMATION OR SUPPLY DRAWINGS



A____
B____
C____
D____
E____



A____
B____
C____
D____



A____ F____
B____ G____
C____
D____
E____

Type of Problem

Flow Problem: ❒ Bridging ❒ Rat-holing ❒ Packing ❒ Clinging to Sides

Length of time material sits at rest in vessel: _____

Problem more likely to occur... ❒ after sitting overnight ❒ every time discharged
❒ continuously ❒ other _____

Material presently built-up? ❒ Yes ❒ No

Thickness of material build-up: _____ ❒ in ❒ mm

Volume of material build-up: _____ ❒ lbs ❒ ton

Length of time build-up has been present: _____

Current Solution

Current method being used: *(ie. hitting with hammer, poking)* _____

Flow aids presently being used or used previously: _____

How often and duration current method used in a 24-hour period: _____

Effect current method has on the material/problem: _____

Power Availability

Power Preference: ❒ Electric ❒ Pneumatic ❒ Hydraulic

Pneumatic: Pressure Available: _____ ❒ psi or ❒ bar

Volume Available _____ ❒ CFM or ❒ cm^3/min

Filter and/or Dryer on Air Line? ❒ Yes ❒ No

Electric: Frequency ❒ 50 Hz ❒ 60 Hz

Phase Power ❒ Single-Phase ❒ Three-Phase

Voltage: _____

Method of Control: ❒ Timer ❒ PLC ❒ Solenoid ❒ Manual

Type of cycle used: ❒ Manual ❒ Timed Intervals ❒ Automatically During Discharge
❒ Automatically Under No-Flow Conditions ❒ Other _____

_____

Note: Please attach drawings and/or digital photographs if available. Indicate flow problem area on drawing or describe.

Please fax completed form to 905-564-5277
Attention: Flow-Aids Technical Support

ISO-9001 DNV CERTIFIED QUALITY SYSTEM

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