

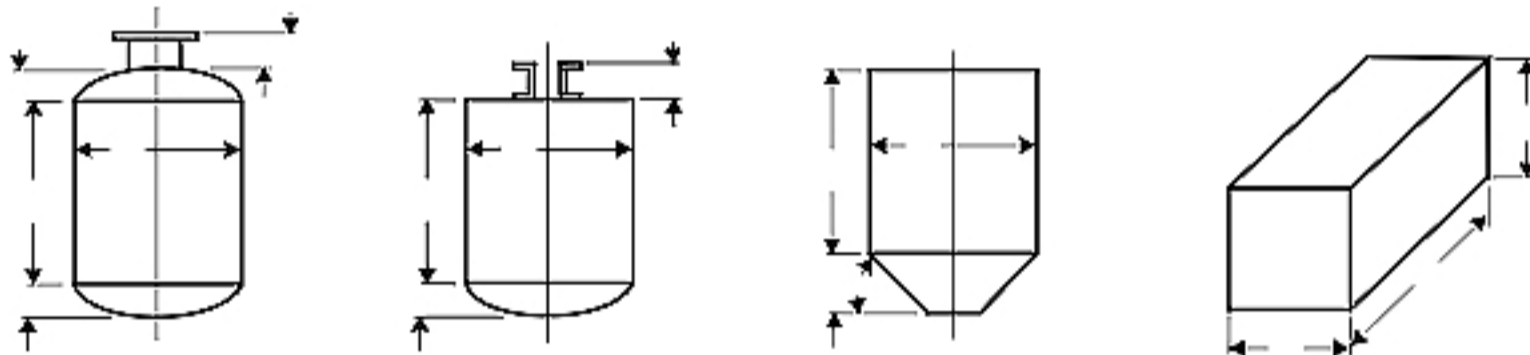
Inquiry Data Sheet

Please print this page, fill it out and fax it to our office.

Our fax number is 323-660-5677.

Customer: _____ Rep: _____
Address: _____ Date: _____
City/State/Zip: _____
Phone: _____ Fax: _____ Email: _____
Contact: _____ Item#: _____ Quantity: _____
___ User ___ O.E.M./ Resale Reference: _____

TANK



Normal liquid level/Volume: _____" / _____ Ga. Max.: _____" / _____ Ga. Min: _____" / _____ Ga.
Tank Volume: _____ Baffles: _____ Angle/ Offset: _____

PROCESS DATA

Description of application:

Degree of agitation required: ___Mild ___Moderate ___Vigorous ___Violent Mix Scale: _____

1) Product: _____ Product: _____ Final: _____
Visc.: _____ Visc.: _____ Visc.: _____
Sp.Gr.: _____ Sp. Gr.: _____ Sp. Gr.: _____
2) Solids Present: ___No ___Yes Degree of suspension: _____
Sp. Gr.: _____ of solids Percent: _____ of solids ___ By Vol. ___ By Wgt.
Particle size: _____ Settling Rate: _____
3) Blend time: _____ 4) Operating temp.: _____ Pressure: _____
5) Mixing cycle: ___Batch ___Continuous Rate of flow: _____

MECHANICAL DATA

Mixer type: ___Clamp ___Fixed mount top entering ___Baseplate ___Angleriser ___Flange
___Side ent. ___Turbine ___Other: _____
Motor Data: Enclosure: _____ Phase: _____ Hertz: _____ Volts: _____

Shaft seal data: Type: _____
Design pressure: _____ Design Temperature: _____
Material of wetted parts: _____

Notes: _____