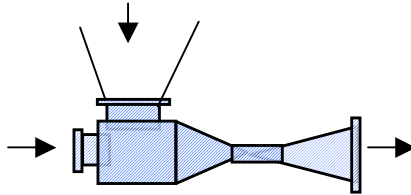


**SOLIDS HANDLING EDUCTOR SPECIFICATION SHEET**

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



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

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

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