



QUESTIONNAIRE DCS DRUM CONTAINMENT SYSTEM

The following questions are designed to gain specific basic information related to your product and application. Your information will enable us to specify the correct size, material of construction and configuration of the DCS which best suits your product and process requirements.

First name:	
Name:	
Email address:	
Company:	
Company address:	
City:	
Country:	
Tel:	
Cell:	

PRODUCT CHARACTERISTICS & DESCRIPTION

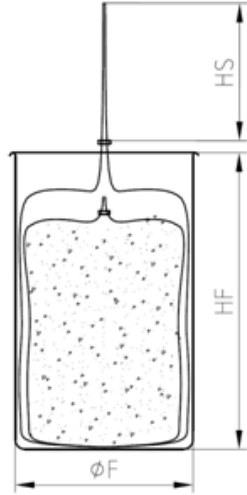
Product name	
Consistency	
Humidity [%]	
Particle size [mm]	
Bulk density [Kg/dm³]	
Toxicity [OEB]	
EMI [mJ]	
Properties	<input type="checkbox"/> Granules <input type="checkbox"/> Flakes <input type="checkbox"/> Needles <input type="checkbox"/> Fibers <input type="checkbox"/> Cohesive <input type="checkbox"/> Dusty (fine) <input type="checkbox"/> Sticky <input type="checkbox"/> Compact <input type="checkbox"/> Aerated <input type="checkbox"/> Abrasive <input type="checkbox"/> Corrosive <input type="checkbox"/> Hygroscopic <input type="checkbox"/> Crumbly <input type="checkbox"/> Explosive (MIE) <input type="checkbox"/> Flammable <input type="checkbox"/> Toxic (OEL) <input type="checkbox"/> Lumpy <input type="checkbox"/> Electrostatic charge <input type="checkbox"/> Builds bridges or cavities <input type="checkbox"/> Reacts with water/air <input type="checkbox"/> Other :

TYPE OF TRANSFER

Product	<input type="checkbox"/> Powder <input type="checkbox"/> Liquids
Transfer	<input type="checkbox"/> Filling <input type="checkbox"/> Emptying
Inert gas	<input type="checkbox"/> Nitrogen

PROCESS REQUIREMENTS

Partial Emptying	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dosing	<input type="checkbox"/> Yes <input type="checkbox"/> No Accuracy : +/- g or +/- %
Containment Level (µg/m³)	
Cleaning	<input type="checkbox"/> Yes <input type="checkbox"/> No Cleaning agent (solvent) :
Existing extraction	<input type="checkbox"/> Yes <input type="checkbox"/> No Extraction capacity : Δp: mbar
ATEX area	

Container		
Type of drums	<input type="checkbox"/> Board <input type="checkbox"/> Synthetic <input type="checkbox"/> Other :	
Dimension of drums	ØF : mm Height HF : mm Volume : l	
Dimension of liners	Height : mm Length : mm <input type="checkbox"/> 1 liner <input type="checkbox"/> double liner Length HS : mm	
EXECUTION		
Material	<input type="checkbox"/> Stainless steel AISI 316 L <input type="checkbox"/> Hastelloy C 22 <input type="checkbox"/> Stainless steel with coating (<input type="checkbox"/> Halar <input type="checkbox"/> PTFE <input type="checkbox"/>) <input type="checkbox"/> Other:	
CIP requirement	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Please draw below or enclose a diagram of the installation you intend to modify or install.

Date:

Signature: