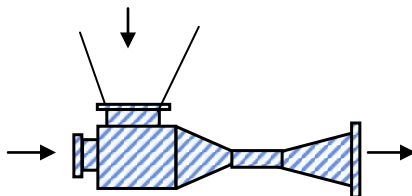


SOLIDS HANDLING EDUCTOR SPECIFICATION SHEET

Please provide the requested information and fax to Schutte & Koerting at 215-639-1597 or email to sales@s-k.com

| | |
|----------------------|-------------------------------|
| COMPANY NAME: | CONTACT: |
| ADDRESS: | CITY, STATE, ZIP CODE: |
| PHONE NUMBER: | FAX NUMBER: |
| EMAIL: | |

| Motive Conditions | |
|--------------------------------|--|
| Air Source: | <input type="checkbox"/> Required <input type="checkbox"/> Existing |
| Available Air Pressure: | psig |
| Available Volume: | scfm |



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

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

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