Plant Name: ___________________________ Contact Person: ___________________________

Address: ___________________________ Telephone: __________ FAX: _______________________

City: ___________________________ State: ______ Zip Code: __________ Date: ____________

Email: ________________________________

**Material Conditions**

Type of Material: _______________________  

Weight: lb 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  
- [ ] Other ______________

Vessel Material:  
- [ ] Steel  
- [ ] Stainless  
- [ ] Concrete  
- [ ] Wood  
- [ ] Other ______________

Wall Thickness: ________________  
- [ ] in.  
- [ ] mm  
Vessel Lined?:  
- [ ] Yes  
- [ ] No

Vessel Lining Material: ________________  
Lining Thickness: ________________  
- [ ] in.  
- [ ] mm

Vibrating Bottom Installed:  
- [ ] Yes  
- [ ] No

Currently In Use:  
- [ ] Yes  
- [ ] No

Discharge Frequency:  
- [ ] Continuous  
- [ ] Intermittent

Method of Discharge:  
- [ ] Belt  
- [ ] Screw  
- [ ] Hopper  
- [ ] Other ______________

**COMPLETE DIMENSIONAL INFORMATION OR SUPPLY DRAWINGS**

Standard of Measurement:  
- [ ] Inches/Feet  
- [ ] Millimeters/Meters
Type of Problem
Flow Problem: □ Bridging  □ Rat-holing  □ Packing  □ Clinging to Sides
Describe the problem: 

Where does it occur: 

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: (i.e. 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  □ bar
Volume Available: ____________ □ CFM³  □ cm/min
Filter and/or Dryer on Air Line?  □ Yes  □ No
Distance from existing air supply to application: ____________ □ in  □ mm
Electric: Frequency  □ 50 Hz  □ 60 Hz
Phase Power  □ Single-Phase  □ Three-Phase
Voltage: __________________________

Explosion Proof Equipment needed: □ Yes  □ No
Method of Control: □ Timer  □ PLC  □ Solenoid  □ Manual
Type of cycle used: □ Manual  □ Timed Intervals  □ Automatically During Discharge
□ Automatically Under No-Flow Conditions

Desired outcome/expectations of the Flow-Aid System:

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