



Vibratory Feeder, Feeder Machine & Conveyor Inquiry Sheet

To assure correct recommendations on your feeding or conveying application, please fill in the answers to the following questions and return to the Fabricated Products Division of The Cleveland Vibrator Company, Inc.

Product:

Material to be handled (not trade name) _____

Test sample being furnished? (1 cu. ft. req'd) Yes No Return Destroy

Weight per cubic foot _____ lbs. Angle of repose _____

Material characteristics:

Dry Flaky Granular Corrosive Other (specify) _____

Wet Sticky Abrasive Explosive _____

Powdery Fluffy Toxic Hygroscopic _____

Moisture content _____ % Material temperature _____ °F

Particle size: Maximum _____ Minimum _____

Note: use reverse side of this sheet for sketch if necessary

Operation:

Maximum feed rate _____ T. P. H.

Normal feed rate _____ T. P. H.

Minimum feed rate _____ T. P. H.

Duty cycle: Continuous Hours per day _____

Variation allowed at constant feed rate _____ %

Method of supplying material to feeder _____

Feeder discharges into _____

Unusual operating conditions (high temp. zone, dirty atmosphere, etc.)

Specify _____

Possible slope of feeder _____ degrees down

Construction:

Type of trough preferred: Flat Curved Tube other (provide sketch or drawing)

Size trough desired: Width or diameter _____ Length _____

Trough material: Mild steel Stainless steel Aluminum Other _____

Special construction features required: (covers, dust seals, special inlets or discharges, mountings, etc.)

Hopper required? Yes No If Yes, Capacity in cubic feet _____

Vibrator drive position: Standard below deck Above deck Side Mount

Type of mounting: Suspension Base mounted Include Base Support Structure

Power Supply:

Pneumatic P.S.I. _____ C.F.M. available _____ Supply Controls

Electric Voltage _____ Phase _____ Cycle _____ Supply Controls → STD or Variable Frequency

Have you handled this material in Cleveland Vibratory Feeders previously?

If so, please give comparison of present application with your new requirement.

Company name _____

Address _____ City _____ State _____ Zip _____

Name _____ Title _____

Phone _____ fax _____ email _____

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