

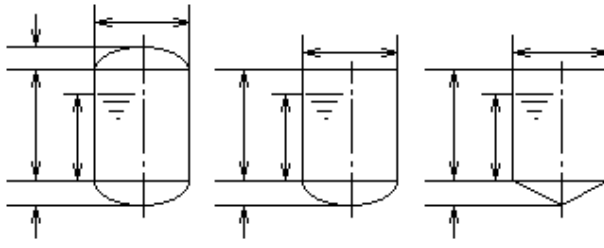
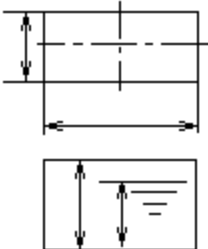
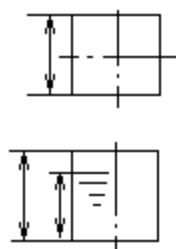
## Liquid Mixing Devices Technical Details

Company: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

<input type="checkbox"/> O-shape Groove			<input type="checkbox"/> Rectangle			<input type="checkbox"/> Square		
								
Container Size								
Container Parameters	Max Liquid Quality		_____m <sup>3</sup>		Min Liquid Quality		_____m <sup>3</sup>	
	Highest Liquid Level		_____mm		Lowest Liquid Level		_____mm	
	Jacket : <input type="checkbox"/> Yes <input type="checkbox"/> No		Coil: <input type="checkbox"/> Yes <input type="checkbox"/> No		Baffle: <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Manhole: <input type="checkbox"/> Yes <input type="checkbox"/> No		Idling: <input type="checkbox"/> Yes <input type="checkbox"/> No		Design / Production Temperature		_____°C	
Operation Condition	Component	Particle Size	Density (kg/ m <sup>3</sup> )	Viscosity (cp)	Operation Temperature (°C)	Gravity proportion %	Volume proportion%	Pressure (MPa)
								Operati



	Bottom Bearing: <input type="checkbox"/> Yes <input type="checkbox"/> No		Middle Bearing: <input type="checkbox"/> Yes <input type="checkbox"/> No		Stable Ring: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Dia of Mixing Shaft (mm)		Length of Mixing Shaft (mm)			
	location		Turbine Type		Distance away from bottom groove(mm)	
	Top Layer					
	Up Layer					
	Middle Layer					
	Bottom Layer					
	Lowest Layer					
Shaft Seal	<input type="checkbox"/> Mechanical Seal:		<input type="checkbox"/> Water Seal:			
	<input type="checkbox"/> Packing Seal:		<input type="checkbox"/> None			
Material	Agitator		Packing Box		Packing	
	Mixing Shaft		Groove			
	Bottom Bearing		Middle Bearing			
	Bottom cover		Flange			
	Mechanical Seal		Others			
Motor (speed control):	<input type="checkbox"/> Chinese Brand		<input type="checkbox"/> International Brand		<input type="checkbox"/> Customized Brand	
	Speed Control Method: <input type="checkbox"/> Variator		<input type="checkbox"/> Frequency Converter		<input type="checkbox"/> DC Speed Control	
	<input type="checkbox"/> Others					
Motor Parameters	Power Supply: (V) Phase		Power: kW		Protection Level:	
	Frequency(Hz)					
	Housing Type: <input type="checkbox"/> Common Type <input type="checkbox"/> Ex-proof Type				<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	
	Ex-proof Level: _____					
Anti-pollution Requirement	<input type="checkbox"/> Sanitary		<input type="checkbox"/> Industry			
Others	Other details please feel free to let us know.					

Previous questions are only used to choose proper machinery, any special requirements please write here: \_\_\_

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Technical Purchaser's Signature

Date : \_\_\_\_\_

Please kindly send the filled files to us, sales engineer will contact you as soon as possible!

Best regards with many thanks

Fax: +86-21-52912822

Email: siehe@siehechina.com