

# BELT FEEDER/WEIGHER APPLICATION DATA SHEET

Customer Information			
Company: _____	Contact: _____		
Address: _____	Phone: _____		
	Fax: _____		
City: _____	State: _____	Zip: _____	E-mail: _____
Customer Reference: _____			

Material Information			
Material Name: _____	* Bulk Density: _____	<input type="checkbox"/> lb/ft <sup>3</sup>	<input type="checkbox"/> kg/m <sup>3</sup> <input type="checkbox"/> g/cm <sup>3</sup>
* Form: <input type="checkbox"/> Powder	<input type="checkbox"/> Granule	<input type="checkbox"/> Pellet	<input type="checkbox"/> Other: _____
Temperature: _____	<input type="checkbox"/> °F <input type="checkbox"/> °C	* Particle Size: _____	Moisture Content: _____ %
Characteristics: <input type="checkbox"/> Free Flowing <input type="checkbox"/> Abrasive <input type="checkbox"/> Other: _____			

Process Information (Please attach sketch of process, if possible.)			
<input type="checkbox"/> Weighing Only	<input type="checkbox"/> Feedrate Control	<input type="checkbox"/> Batching	
Max Feedrate: _____	Max Feedrate: _____	Max Batch: _____	
Min Feedrate: _____	Min Feedrate: _____	Min Batch: _____	
		Batch Time: _____	
Source of Material: _____		Desired Accuracy (%): ± _____	
Feeder Discharges Into: _____			

Feeder Specifications	
C/L Infeed to C/L Discharge: <input type="checkbox"/> Standard	<input type="checkbox"/> Other (please specify): _____
Enclosure: <input type="checkbox"/> Standard (Enclosed no bottom) <input type="checkbox"/> Enclosed with bottom <input type="checkbox"/> Open, No Enclosure	
Materials of Construction: <input type="checkbox"/> Carbon Steel <input type="checkbox"/> 304 Stainless Steel <input type="checkbox"/> Other: _____	

Electrical Specifications (if known)			
Process Controller Enclosure: <input type="checkbox"/> Panel Mount	<input type="checkbox"/> Wall Mount	<input type="checkbox"/> NEMA _____	<input type="checkbox"/> Other: _____
Motor Drive Mounted: <input type="checkbox"/> Standard	<input type="checkbox"/> On Feeder	<input type="checkbox"/> In Panel	<input type="checkbox"/> Other: _____
Power Available: <input type="checkbox"/> 115/1/60	<input type="checkbox"/> 230/1/60	<input type="checkbox"/> 460/3/60	<input type="checkbox"/> Other: _____
Hazardous Area: Class: _____		Division: _____	Group: _____ <input type="checkbox"/> None

Notes
Proposal Due Date: _____
Send Proposal To: <input type="checkbox"/> Customer <input type="checkbox"/> Merrick Representative <input type="checkbox"/> Other: _____

Form Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

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**Please complete as much information on this form as possible. In order for Merrick to generate a proposal, in addition to the Feedrate and/or Batch Weight values, items marked with \*(asterisks) are required.**

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**MERRICK**  
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