



Date _____

Please complete this questionnaire to enable our engineers to make a proper analysis on this size, model and type of vibrating table best suited to satisfy your packaging, settling or testing application.

Company Name _____ Your Name _____
Address _____ City _____ State _____ Zip _____
Phone Number _____ Fax Number _____ E-mail _____
Your B.E.S.T. Rep. (if known) _____ Rep's Address _____

1. OPERATION:

Type of container (steel drum, carton, etc.): _____
Gross weight to be vibrated: _____ lbs.
Net weight to be vibrated: _____ lbs.
Approximate percentage increase in density required: _____ %
Density before: _____ Density after: _____
Amplitude required: _____ Frequency required: _____
Unusual operating conditions (high temp. zone, dirty atmosphere, explosive proof.)
Specify: _____
Duty Cycle: [] Continuous _____ hrs. [] Intermittent: On Time _____ Off Time _____

2. PRODUCT:

Material to be handled: _____
Test samples being furnished? (1 cu. ft. req'd - send prepaid): [] Yes [] No [] Return [] Destroy (Phone factory to request test sample file number)
Weight per cu. ft.: _____ lbs. Angle of Repose: _____
Material Characteristics: [] Dry [] Flaky [] Abrasive [] Granular [] Corrosive [] Wet
[] Sticky [] Powdery [] Hygroscopic [] Explosive [] Toxic [] Fluffy
[] Other (specify) _____
Particle Size: Max _____ Min _____ Moisture Content _____ % Material temperature _____ °F
Other Comments: _____

3. CONSTRUCTION:

Materials of Construction: [] Mild Steel [] 304 Stainless [] 316 Stainless [] Other _____
[] Frame Paint Finish (specify): _____
Deck size requirements, if any: Width _____ X Length: _____ X Height: _____
Minimum height required: [] Yes _____" [] No
Isolation medium preferred: [] Coil springs [] Air mounts
Type of vibration deck: [] Flat [] Other _____
Roller deck desired: [] Yes [] No [] Gravity [] Powered
Special construction features required: (explosive proof, clamping arrangement, etc.)
Specify: _____
Weigh feature required? [] Yes [] No

4. POWER SUPPLY:

[] Pneumatic P.S.I.: _____ C.F.M. Available: _____ [] Electric Voltage: _____ Phase: _____ Cycle: _____
Controls to be NEMA _____ rated. [] Dust Tight [] Water Tight [] Explosion Proof
If hazardous area, specify: Class: _____ Group: _____ Div.: _____