

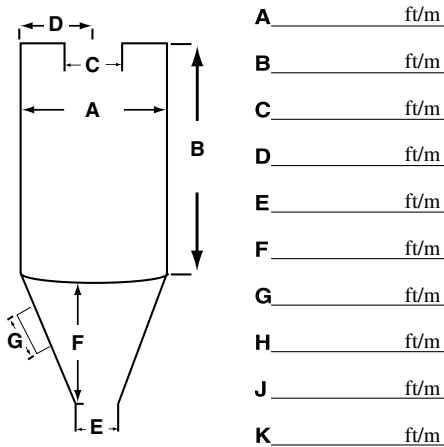
Plant Name: _____ Contact Person: _____

Address: _____ Telephone: _____ FAX: _____

City: _____ State: _____ Zip Code: _____ Date: _____

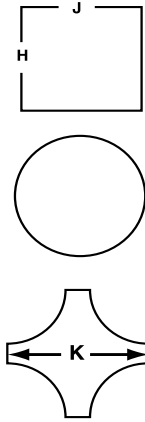
Silo/Bunker name: _____

(If prints are available, disregard)



- A _____ ft/m
- B _____ ft/m
- C _____ ft/m
- D _____ ft/m
- E _____ ft/m
- F _____ ft/m
- G _____ ft/m
- H _____ ft/m
- J _____ ft/m
- K _____ ft/m

Roof Openings



Number of discharge feeders: _____

Number of clogged feeders: _____

Discharge type: Slide Gate Rotary Valve

Vibratory Other

Feed rate: _____ TONS PER HOUR

Roof Opening(s):

Square Round Rectangle

Height of lip on manhole: _____ Thickness of roof: _____
 _____ ft. _____ in. _____ ft. _____ in.

Is there an elevator to the top of container? Yes No

Air Slides or other fluidizing equipment? Yes No

Are there inverted cones or baffles? Yes No
 Describe _____

Is there a working dust collecting system? Yes No

Confined space? Yes No

Are there instruments or structural supports inside of container? Yes No

Any liner or coatings inside container? Yes No

Obstructions? Vertical _____ Horizontal _____ Yes No
 (within 5' any direction inside or outside of roof opening)?

Type of Outlet: 110V 220V 440V

Type of Bottom: Flat Cone Sloped Other

Air supply available: P.S.I. _____ C.F.M. _____

Type of Vessel: Silo Bin Bunker Rail Car
 Interstice Tank

How long can container be available for cleaning? _____

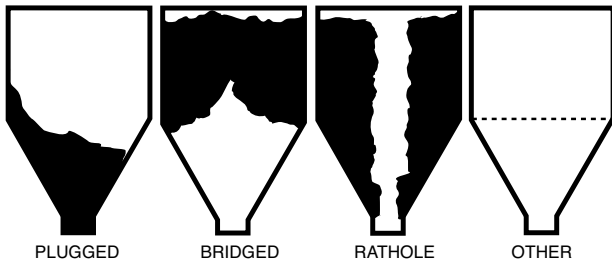
Top of Silo: Indoors Outdoors

Is roof sloped? Yes No

If so, what is the pitch/angle? _____

What is the load rating of the roof? _____

(PLEASE CIRCLE OR CLICK ON TYPE OF PROBLEM)



Name of material: _____

Estimate amount of non-flowing material: _____ TONS

Planned Storage Capacity: _____ TONS

Condition of non-flowing material: Wet Dry

Temperature of Material (Degrees): _____

Compaction level: Hard Soft

% Moisture: _____

Last time cleaned: _____

Method used: _____

Any plant specific safety requirements? Yes No

If so, what? _____

METHOD FOR REMOVAL OF DISLODGED MATERIAL (explain):



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