

FILTER PRESS QUESTIONNAIRE/PROCESS DATA SHEET

COMPANY:		DATE:	
STREET:			
CITY/STATE/ZIP:			
CONTACT:		POSITION:	
EMAIL:		PHONE:	

SLURRY	APPLICATION/SLURRY:			
	COMPOSITION OF SOLIDS & LIQUIDS:			
	SOLIDS SG/DENSITY:		SUSP. SOLIDS (% BY WEIGHT):	
	LIQUID SG/DENSITY:		TEMPERATURE MIN/AVG/MAX:	
	SLURRY SG/DENSITY:		PARTICLE SIZE:	
	pH: (IF <6 OR >8 PLEASE DESCRIBE):			
	NOTES:			

PROCESS	PROCESS:	<input type="checkbox"/> EXISTING	<input type="checkbox"/> NEW	<input type="checkbox"/> BATCH	<input type="checkbox"/> CONTINUOUS
	CAKE:	<input type="checkbox"/> PRODUCT	<input type="checkbox"/> RECYCLE	<input type="checkbox"/> LANDFILL	<input type="checkbox"/> OTHER:
	FILTRATE:	<input type="checkbox"/> PRODUCT	<input type="checkbox"/> RECYCLE	<input type="checkbox"/> DISCHARGE TO DRAIN	<input type="checkbox"/> OTHER:
	NOTES:				

CAPACITY & CAKE	VOLUME PER:	<input type="checkbox"/> BATCH	<input type="checkbox"/> HOUR	<input type="checkbox"/> DAY:	FLOW RATE:
	DRY SOLIDS PER:	<input type="checkbox"/> BATCH	<input type="checkbox"/> HOUR	<input type="checkbox"/> DAY:	OPERATING HOURS PER DAY:
	CAKE PER:	<input type="checkbox"/> BATCH	<input type="checkbox"/> HOUR	<input type="checkbox"/> DAY:	TIME TO COMPLETE A BATCH:
	CAKE MOISTURE: %	CAKE THICKNESS:			CAKE WET BULK DENSITY:

Please specify units if applicable (kg or lbs, gallons or L, °C or °F, etc.)

	CYCLE STEPS	TIME	PRESSURE	FLOW	NOTES
EXISTING FILTER PRESS OPERATION (IF APPLICABLE)	FEED?				
	CAKE WASH?				
	CAKE BLOW?				
	CORE BLOW?				
	SQUEEZE?				
	OPEN/CLOSE?				
	SHIFTING?				
	CLOTH WASH?				
	OTHER?				

EXISTING EQUIPMENT (IF APPLICABLE)	MANUFACTURER:		MODEL:	
	HYDRAULICS:		CONTROLS:	
	PLATE SIZE/TYPE:		NO. OF CHAMBERS:	
	SHIFTER?		DRIP TRAYS?	
	OTHER OPTIONS?			
	NOTES:			