



**Explosion Protection System
Information Worksheet**
Version 1.9

Completed by: _____
 Company: _____
 Date: _____
 Tel No.: _____
 E-mail: _____
 Proposal Due Date: _____

DUST COLLECTOR - RECTANGULAR

Proposal to be sent to:

Contact: _____	Title: _____
Company Name: _____	Telephone: _____
Address: _____	Fax: _____
	E-mail: _____

PROJECT NUMBER/REF: _____

Please provide end-user information if different than above:

Contact: _____	Telephone: _____
Company Name: _____	Fax: _____
Address: _____	E-mail: _____

Explosion Protection Options (click box for options)

Explosion Relief Venting	<input type="checkbox"/>
Flameless Venting	<input type="checkbox"/>
Vent Pstat (if applicable)	<input type="checkbox"/>
Explosion suppression	<input type="checkbox"/>
Explosion Isolation	<input type="checkbox"/>
Type of Isolation	<input type="checkbox"/>
Exhaust air recirculates back to building?	<input type="checkbox"/>

Combustible Material Information:

Material: **Dust**
 K_{st} or K_g: _____ bar-m/sec
 Ignition Temperature, T_c: _____ °C
 Material Name: _____
 P_{max}: _____ bar g
 MIE: _____ mJ

Would you like to receive information on dust testing ?

Process Operating Conditions:

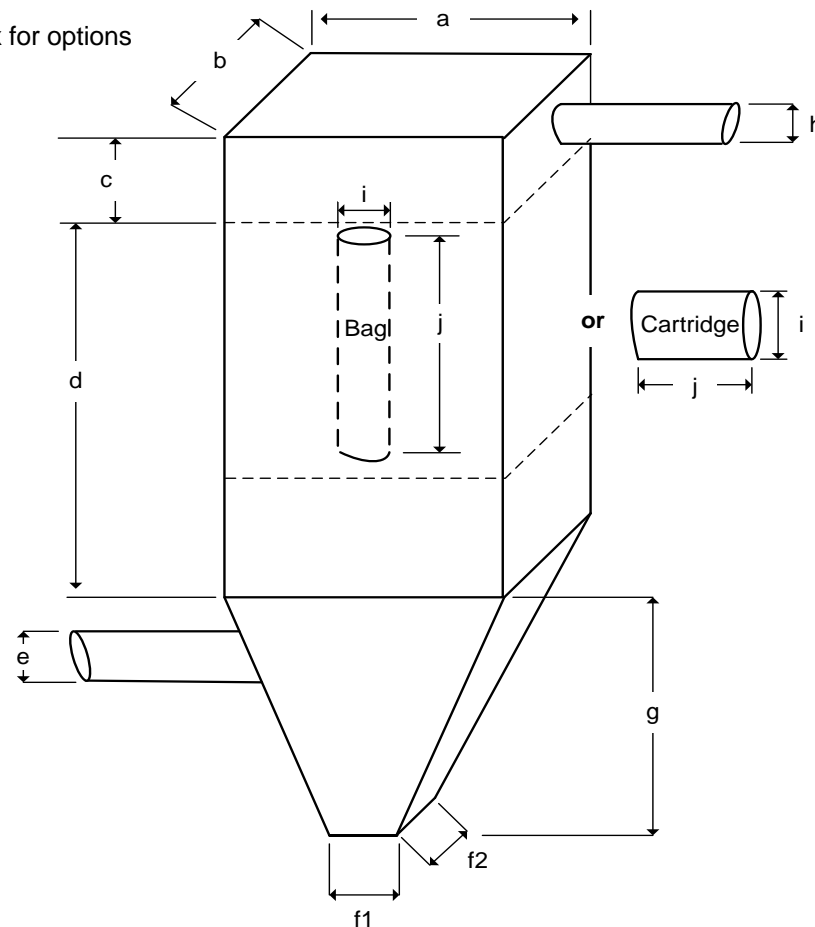
Max. positive pressure: _____	Click box for options	Airflow: _____	Click box for options
Max. vacuum: _____		Reduced Exp. Pres. (P _{RED}): _____	
Max. Temperature: _____		Collector Location: _____	
Min. Temperature: _____		Distance to exterior wall: _____	
Ambient Temperature: _____			

Process Description:

Process Equipment:

Manufacturer: _____
 Model: _____
 Dust Collector Type: _____ Click box for options

Width	a	ft
Length	b	ft
Clean-air plenum height	c	ft
Dirty-air plenum height	d	ft
Inlet diameter	e	in
Hopper discharge width (or Diameter)	f1	in
Hopper discharge length	f2	in
Hopper height	g	ft
Exhaust Dia.	h	in
Bag/Cartridge Dia.	i	in
Bag/Cartridge Height	j	in
No. of Bags/Cartridges		



IEP Technologies NOTES:
