

## **Bucket Elevator Project Worksheet**

## Date:

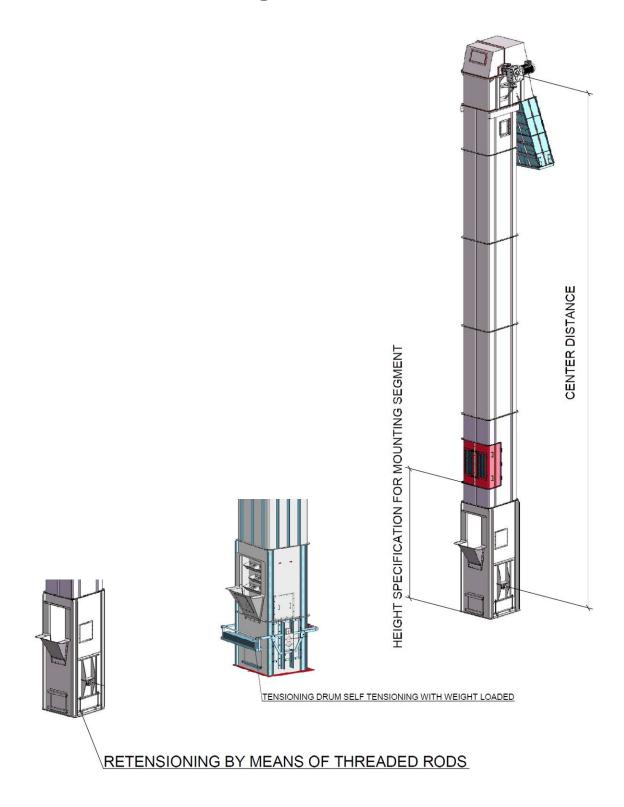
Customer	Information			
Customer Name:				
Company Contac	:t:	Title:		
Address:				
	City:	State:	Zip:	
	Country:			
Phone:		Email:		
Place of Installati	ion:			
Conveying	Medium			
Transported Mate	erial:	Flow	<i>r</i> Rate:	
Flow Rate Consta	ant: ☐ Yes ☐ No?			
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Moisture:				
Grain Size:		Bulk Density:		
Product Tempera	iture:			
Product Feature:	☐ Good Free Flowing ☐ Abra	asive 🗆 Sticky		
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Desired delivery	date:			
Special requireme	ents:			

## **RETURN TO: Simpson Technologies**

2135 City Gate Lane Suite 500, Naperville, IL 60563 Or email: sales.us@simpsongroup.com or your local representative



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