

**QUESTIONARY**

Tel.: +49 (0)7641 95 95 70-0



**RECTIFICATION**

Fax: +49 (0)7641 95 95 70-1

Email: info@schulzpartner.com

Carl-Zeiss-Str. 11, D-79331 Teningen

www.schulzpartner.com

Company: _____	Date: _____
Contact person: _____	Phone: _____
Project: _____	Fax: _____
	Email: _____

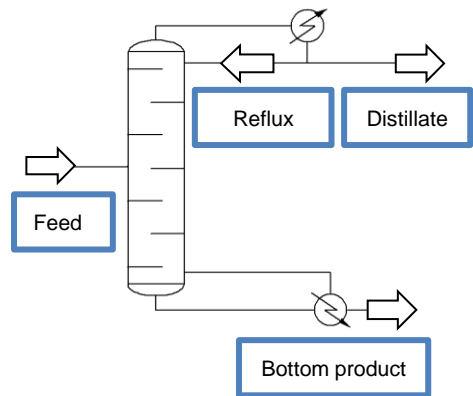
Process description:  
 \_\_\_\_\_  
 \_\_\_\_\_

**1 Process Data \*1)**

Composition [mass %]	Feed	Distillate	Bottom product
Solids in solution			
Solids suspended			
Capacity nom. (100%) [kg/h]			
min/max [%] =			
Temperature [°C]			
Pressure [mbar (a)]			
Density [kg/m³]			
Dyn. viscosity [mPa s]			
Heat conductivity [W/mK]			
Specific heat [kJ/kgK]			
Evaporation heat [kJ/kg]			
Molecular weight			

Tendency for foaming of the bottom product?  yes  no

Heating medium:	
Temp. in/out [°C]	
Pressure in/out [bar (g)]	
Aggregate state	<input type="checkbox"/> liquid <input type="checkbox"/> vaporous
Coolant:	
Temp. in/out [°C]	
Pressure in/out [bar (g)]	



\*1): In case you have got a detailed analysis, please attach them to your email.

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**RECTIFICATION****2 Apparatus data**

Column type	<input type="checkbox"/> Tray-column	<input type="checkbox"/> Packing-column	
	<input type="checkbox"/> Structured packing-column		
Installation site	<input type="checkbox"/> indoor	<input type="checkbox"/> outdoor	<input type="checkbox"/> in structure
	<input type="checkbox"/> self-supporting	available floor space (l x w x h) [m]: .....	
Dimensions/	column- $\phi$	.....	
Specifications	number of agitated chambers	.....	
	reflux-rate	.....	
Design data	design pressure	.....	bar (g)
	design temperature	.....	°C
Materials	jacket	.....	internals
	gaskets	.....	bolts and nuts
Design code	<input type="checkbox"/> AD-Merkblätter	<input type="checkbox"/> ASME	<input type="checkbox"/> other: .....
Operating mode	<input type="checkbox"/> batch	<input type="checkbox"/> continuously	operating time [h/d] .....
Electric data	..... -phase	..... V	..... Hz <input type="checkbox"/> neutral
Design according to	<input type="checkbox"/> GMP	<input type="checkbox"/> CIP	<input type="checkbox"/> SIP
	<input type="checkbox"/> ATEX: EEx-type:	safety-zone: .....	temp.-class: .....
	<input type="checkbox"/> FM	other	.....

**3 Scope of Quotation**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> column + internals   | <input type="checkbox"/> erection          | <input type="checkbox"/> piping                     |
| <input type="checkbox"/> supporting structure   | <input type="checkbox"/> fittings          | <input type="checkbox"/> basic / detail engineering |
| <input type="checkbox"/> pumps  | <input type="checkbox"/> installation only |   |
| <input type="checkbox"/> turn-key installation  | <input type="checkbox"/> other: .....      |   |
| <input type="checkbox"/> technical assistance for process design / installation / commissioning / ..... |  |   |

**4 Annotations**

Space for your annotations, wishes or questions:

Try to answer this questionnaire as precise as possible so that we can provide a suitable offer to you. In case you have any questions or problems, do not hesitate to contact us. We discuss you with pleasure!