DUSTEX SOLUTIONS
Creating Dust Free Workplaces

Centralized Vacuum System

FORM FOR CENTRALIZED VACUUM SYSTEM

Date: __/__/__ Ref. system: _____

Company:			
Address:			
Phone:			
Fax:			
E-mail & web:			
Contact:			
Project Name:		**Requested details:**	
Product Name:			
Features:	□ Toxic	Horizontal distance max:	
	□ abrasive	Height max:	
	□ flammable	Piping:	□ Zinc Coated
	□ corrosive		□ stainless steel piping
	□ hygroscopic	Total outlets	Working at a time
	□ other :	Flex hose (in mtr):	
Spec. Weight:	Kg/dm	Accessories Ø :	
Qty of Product :	Kg/h or day	Bracketing:	□ Collars
Granulometry:	Minimum:		□ Wall bracket
	Maximum:		□ Ceiling bracket
Humidity:	%		□ Other:
Temperature :	°C	Product unload :	□ Automatic □ Manual □ Clapet
Flow ability:	□ Few		□ Butterfly valve
	□ Middle		□ Slide valve
	□ Good		□ Rotary valve
		Filter cleaning:	□ Automatic □ Manual
		Room temperature:	°C
		Available space:	mm
		Working Time:	□ Continuous
			□ Discontinuous
		Volt :	Hz:
		Micro on the outlets:	□ Yes □ No
		Electrical protection	□ IP 54 □ IP 55 □ ATEX
			□ EEXD (flame proof)

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