

DATE: _____

Company Name:			
Address:			
Email:			
Site Contacts Name, phone And Position.			

Describe the purpose for which the moisture analysis will be used:
Composition of Material to be analysed:

Description of the material holding moisture:

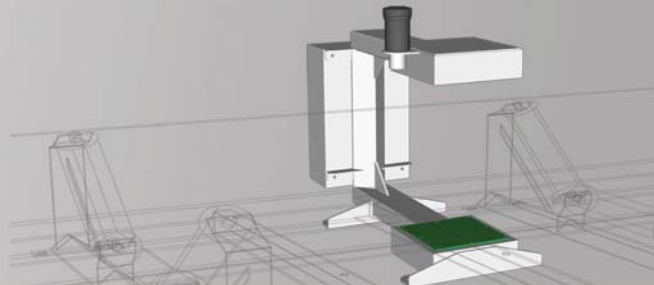
Material Sizing Details:

Does the bulk density vary significantly? Yes <input type="checkbox"/> No <input type="checkbox"/>
Extent: bulk density varies from _____

Moisture Measurement Range %							
Normal Range:%		Extreme Range:%		Average Value:%		Accuracy Required%	

Tonnage Flow rate	
Typical Value:	Range:

Bed Depth (Op = operational range)	
Typical Op Range: mm	Extreme Op Range: mm



Temperature of the Product		Mean Ambient Temperature	
Typical Operating Range: °C		Extreme Operating Range: °C	

Conveyor Belt /Hopper Details	
Construction Material:	
Belt Width/Hopper Width:	
Belt Thickness:	
Belt Length:	
Belt Speed:	
Type of cords – (ie: nylon/none/steel)	
Is the Conveyor Rated As Anti Static?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Analysis Update Time Required		
1 Minute: <input type="checkbox"/>	2 Minutes: <input type="checkbox"/>	5 Minutes: <input type="checkbox"/>

Existing or Previous Moisture Meter (if applicable) NIR, Capacitance etc.
Our current/previous moisture meter is/was: _____
Details of your current physical sampling procedure:
Please provide any other information you consider may assist us in assessing the suitability of the microwave moisture measurement for your potential application (eg: significant surging of material, possibility of segregation etc) A photograph of the site placement is also recommended.
Other Comments: