



DEFLUIDIZING APPLICATION SHEET

Date: _____

By: _____

FAX To: 952-492-3100

Customer	Site Visit	
Address	Phone Call	
City		
State		
Contact	Other	
Phone #		
Fax #	Email:	

APPLICATION
New
Replacement

Equipment Drawings/ Sketch	
Plant Drawings / Sketch	

Type of Material
Feathers
Chicken
Turkey
Manure
Paunch
Fish
Other

Press is to be fed by	
Belt Conveyor	
Screw Conveyor	
Other:	

Feed Rate Will Be:	
Constant	
Sporadic	

Capacity
Lbs. Per [] Minute []
Lbs. Per [] Hour
Density
Lbs. Per Cubic Foot
Moisture Content
Raw
Desired Discharge
Product pH

Waste Water Treatment	
Facility On Site	
Primary Only	
Secondary:	
DAF	
Lagoon	

Transported By
Flume
Truck
Other:

Utilities:	
Gas Cost per Therm	
Oil Cost per Therm	
Electrical Cost / Kilowatt Hr	

Does Customer Transport Raw Material ? _____If so, what distance _____
Estimated cost per mile _____**Notes / Comments:** _____
