

SLIDE GATE APPLICATION DATA SHEET



Company _____	Date _____
Contact _____	Salesperson _____
Phone No. _____	Fax No. _____
Job Reference _____	

294-G-001

GATE TYPE	MATERIAL CHARACTERISTICS
<input type="checkbox"/> RACK & PINION <input type="checkbox"/> HAND WHEEL <input type="checkbox"/> CHAIN WHEEL <input type="checkbox"/> AIR OPERATED <input type="checkbox"/> LIMIT SWITCHES REQUIRED <input type="checkbox"/> ELECTRIC OPERATED	COMMON NAME: _____ CHEMICAL FORMULA: _____ BULK DENSITY, AERATED: _____ Lbs./Cu.Ft. BULK DENSITY, SETTLED: _____ Lbs./Cu.Ft. MAXIMUM PARTICLE SIZE: _____ PARTICLE TYPE/SHAPE IS: <input type="checkbox"/> PELLET <input type="checkbox"/> POWDER <input type="checkbox"/> CHIP <input type="checkbox"/> LUMP <input type="checkbox"/> GRANULAR <input type="checkbox"/> FLAKE <input type="checkbox"/> CURL <input type="checkbox"/> FIBROUS MESH SIZE-ANGLE OF REPOSE IS: _____ ° _____%THRU 1/2" _____%THRU 1/4" _____%THRU 1/8" _____%THRU 1/16" _____%THRU 25 _____%THRU 50 _____%THRU 100 _____%THRU 200 _____%THRU 400 FLOWABILITY: <input type="checkbox"/> GOOD <input type="checkbox"/> POOR <input type="checkbox"/> PACKS <input type="checkbox"/> BRIDGES MOISTURE CONTENT OF MATERIAL IS: _____ % TEMPERATURE OF MATERIAL IS: _____ °F
CONDITIONS ABOVE CLOSED GATE	SPECIAL CHARACTERISTICS: <input type="checkbox"/> HYGROSCOPIC <input type="checkbox"/> CORROSIVE-REACTIVE <input type="checkbox"/> EXPLOSIVE <input type="checkbox"/> TOXIC-EMITS FUMES <input type="checkbox"/> STICKY-SMEARS <input type="checkbox"/> HEAT SENSITIVE <input type="checkbox"/> FOOD GRADE <input type="checkbox"/> AERATES-DUSTY <input type="checkbox"/> PHARMACEUTICAL <input type="checkbox"/> TENDS TO PACK <input type="checkbox"/> OTHER: _____ ABRASIVENESS: <input type="checkbox"/> EXTREME <input type="checkbox"/> MODERATE <input type="checkbox"/> MILD COMMENTS: _____ _____ _____
GATE IS INSTALLED BENEATH: <input type="checkbox"/> HOPPER <input type="checkbox"/> SILO <input type="checkbox"/> BAGHOUSE <input type="checkbox"/> CYCLONE <input type="checkbox"/> FILTER RECEIVER <input type="checkbox"/> SCREW <input type="checkbox"/> SHREDDER <input type="checkbox"/> DRYER <input type="checkbox"/> MIXER <input type="checkbox"/> OTHER: _____ PRESSURE ABOVE GATE IS: <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> ATMOSPHERIC _____ PSI _____ "Hg _____ "H ₂ O TEMPERATURE ABOVE GATE IS: _____ °F HUMIDITY IS: <input type="checkbox"/> HIGH <input type="checkbox"/> AVERAGE <input type="checkbox"/> LOW IS GATE CHOKE-FED? <input type="checkbox"/> YES <input type="checkbox"/> NO HEAD OF MATERIAL ABOVE GATE? <input type="checkbox"/> YES <input type="checkbox"/> NO COLUMN HEIGHT OF HEAD: _____ Ft.	
CONDITIONS BELOW CLOSED GATE	OPERATING CONDITIONS
GATE IS INSTALLED ABOVE: <input type="checkbox"/> HOPPER <input type="checkbox"/> SCREW <input type="checkbox"/> AIRSLIDE <input type="checkbox"/> BELT <input type="checkbox"/> CHUTE <input type="checkbox"/> MIXER <input type="checkbox"/> TANK <input type="checkbox"/> ROTARY VALVE <input type="checkbox"/> SCREENER <input type="checkbox"/> OTHER: _____ PRESSURE BENEATH GATE IS: <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> ATMOSPHERIC _____ PSI _____ "Hg _____ "H ₂ O TEMPERATURE BENEATH GATE IS: _____ °F HUMIDITY IS: <input type="checkbox"/> HIGH <input type="checkbox"/> AVERAGE <input type="checkbox"/> LOW	RATE OF FLOW PER HOUR: _____ Tons _____ Lbs. _____ Cu.Ft. DUTY CYCLE: <input type="checkbox"/> PERIODIC <input type="checkbox"/> INTERMITTENT OPEN/CLOSE CYCLE: _____ ELECTRIC UTILITIES _____ VAC/ _____ Ph/ _____ Hz COMPRESSED AIR PRESSURE: _____ PSI

SLIDE GATE AIR CYLINDERS										
	Bulk Density - Lbs/CuFt									
Size	30	40	50	60	70	80	90	100	110	120
6X6	1.50	1.50	1.50	1.50	1.50	1.50	1.50	1.50	1.50	1.50
8X8	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00
10X10	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50
12X12	3.25	3.25	3.25	3.25	3.25	3.25	3.25	3.25	3.25	3.25
14X14	2.50	2.50	2.50	4.00	4.00	4.00	4.00	4.00	4.00	4.00
16X16	3.25	3.25	3.25	3.25	3.25	3.25	5.00	5.00	5.00	5.00
18X18	3.25	3.25	3.25	5.00	5.00	5.00	5.00	5.00	5.00	5.00
20X20	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	6.00	6.00
22X22	5.00	5.00	5.00	5.00	5.00	5.00	6.00	6.00	6.00	6.00
24X24	5.00	5.00	5.00	5.00	6.00	6.00	8.00	8.00	8.00	8.00
26X26	5.00	5.00	5.00	6.00	6.00	8.00	8.00	8.00	8.00	8.00
30X30	8.00	8.00	8.00	8.00	8.00	8.00	10.00	10.00	10.00	10.00

SIZE SELECTION GUIDE

CAPACITIES	
SIZE	CFM
6X6	12
8X8	29
10X10	56
12X12	94
14X14	143
16X16	210
18X18	293
20X20	383
22X22	498
24X24	630
26X26	769
30X30	1125
36X36	1800

1) $\frac{\text{_____}}{60}$ Lbs./Hour = (_____) Lbs./Minute

2) $\frac{\text{_____}}{\text{_____}}$ Lbs./Minute = (_____) CFM
 (_____) Lbs./Cu. Ft.

3) $\frac{\text{_____}}{\text{_____}}$ CFM₁ = (_____) CFM₂
 (_____) *FF

*FILL FACTOR

RECOMMENDATION: _____

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