



CMT Inc.

DATA SHEET – SILO

Phone: 704-846-3737 Fax: 704-846-3761

Date: _____ **From:** Scott Dahlgren/Kenny Cabaniss/Ben Weiss
Company: _____ **Name:** _____
Installation Site (required): _____

(NOTE: if information is unknown or unavailable, please indicate with a "'?")

QUANTITY: _____ **DESIRED SILO:** Welded Bolted **Supports:** Skirted Leg Vendor Recommend
Outlet to be fitted with: _____

MATERIAL DATA

Product: _____ **Bulk Density:** _____ #/ft³
Moisture Content: _____ % **Fat Content:** _____ % **Product Temperature:** _____ °F
Particle Size Distribution: _____ **Flowability 1 to 4 (1 Easy, 4 Difficult):** _____
 Cohesive Adhesive Hygroscopic Abrasive Corrosive Electrostatic Toxic Food Quality: _____

DESIGN INFORMATION

Silo Capacity - Usable: _____
Design Pressure Differential: Pressure System: 1 psi (std) Other, specify: _____
 Vacuum System: 0.5 psi (std) Other, specify: _____
Wind Load: 100 mph (std) Other, specify: _____
Design Code: Standard ASME API Other: _____
Fabrication: Shop Welded Field Welded o Field Assembled, if bolted Vendor to specify
Welding: Welds continuous, exterior only (Std) Welds continuous, interior & exterior
 100% Code – Per Code _____
Grinding: Standard Other – Grind to a _____ grit finish
Additional Specifications or Related Standards: _____
Height Restrictions, if any: _____ **Ground to Outlet of Silo:** _____
Hopper Slope: 60° (Std) Other _____
Materials of Construction: Carbon Steel 304 SS Al
Exterior Finish: Enamel (Std) None Primed
Interior Finish: None (Std) Primer Epoxy: FDA Non-FDA
Special Finish Specifications: _____

ACCESSORIES & OPTIONS

Guardrail w/ Toeboard: Galvanized (Std) Carbon Steel, painted Al
 Caged Ladder (mtls to match guardrail) Crosswalk (mtls to match guardrail): **Span:** _____ **Qty:** _____
 Pneumatic Fill Line w/ standoff brackets External (Std) Internal Size/Material: _____
 Elbows: **Qty:** _____ **90°** _____ **45°** _____ **Target Box w/ inlet stub** **Material:** _____
 Non-Skid Roof Deck Finish
 Engineering: Design Calculations P.E. Stamp – State: _____

<u>Qty</u>	<u>Size</u>	<u>Type</u>
_____	_____	Half Couplings for Point Level Controls
_____	_____	6" Plate Flange for Bob Type Level Controls
_____	_____	PVR Valve - <input type="checkbox"/> Pressure _____ oz. <input type="checkbox"/> Vacuum _____ oz.
_____	_____	Manhole on Deck: <input type="checkbox"/> Sealed <input type="checkbox"/> Vented
_____	_____	Manway in Hopper/Cylinder
_____	_____	Bin Vent Flange. Weight of Bin vent: _____ lbs
_____	_____	Interlock on pipe inlet and cap to start bin vent filter
_____	_____	Double Door on Skirted Silo in lieu of Std. Single Door
_____	_____	Door Drip Guard
_____	_____	Light - Mounted, wiring by customer
_____	_____	Heater - Mounted, wiring by customer
_____	_____	Skirt Penetrations: _____

By: _____ (Customer)

Please return via fax to: 704-846-3761 or email to: scott@cmtnc.com