



Palamatic Handling USA Inc.
A World of Handling Solutions

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BAG & PRODUCT SPECIFICATION SHEET

ISSUED ON BEHALF OF PALAMATIC BY _____ DATE _____
CUSTOMER _____ CONTACT _____ JOB NUMBER _____
MACHINE TYPE _____ THROUGHPUT _____ BAGS/MIN _____



IMPORTANT

The following information is essential in order to provide a system that is compatible to the materials being handled. Please provide the information at the earliest possible time or this could lead to delays within the project. Failure to respond accurately to this request may result in on site costs being incurred in the event of modifications having to be carried out, which will be at the customers cost.

1) ANALYSIS OF BAG TYPES

PRODUCT	BAG CONSTRUCTION (& LINER IF APP)	GLUED	STITCHED	VALVE	WEIGHT	LUMPY	FREE FLOWING	COMPACTED	MAX OVERALL SIZE L X W X H

2) If lumpy please state nature and size of the lumps for all products – note: - the standard machine is usually capable of handling lumps up to 50 mm

PRODUCT	COMMENTS

3) If compacted please state nature of compaction for all products- (please consider particularly bags at the bottom of the pallet).
 E.g. is the product compacted in bag and/or compacted when the bag is cut open.
 Is it friable or difficult to break? Etc.

PRODUCT	COMMENTS

4) If abrasive please give details

PRODUCT	COMMENTS

5) Are you aware of any materials of construction that should be avoided?

PRODUCT	IS INCOMPATIBLE WITH

6) Please provide any other relevant information. E.G. material is hygroscopic, material bridges, material compacts under vibration etc.

PRODUCT	COMMENTS

7) Please provide MSDS and product data sheets for all products

THE ABOVE INFORMATION IS COMPLETE AND COVERS THE REQUIREMENTS OF THE MACHINE TO BE PURCHASED

SIGNED _____ ON BEHALF OF _____

TITLE _____ DATE _____

PLEASE COMPLETE THIS FORM AND RETURN TO PALAMATIC HANDLING USA, Inc. at FAX 610-701-6354, or E-Mail to tcarney@chesco.com. Thank you.

PALAMATIC USE ONLY	
REVIEW COMPLETED	