

Questionnaire Static Mixer



Company

Name

P.O. Box

City

Tel: Fax:

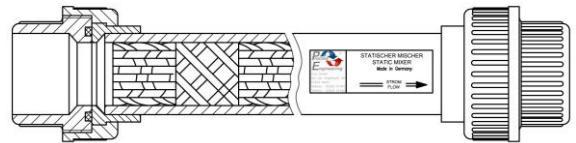
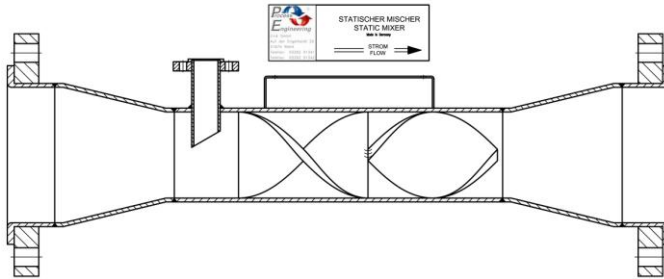
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+49 (0) 2262-91341

+49 (0) 2262-91342

info@uape.de

www.uape.de



Component	1	2	3	Mix
Medium ¹⁾				
Gas / liquid				
Capacity [m ³ /h]	min.			
	norm.			
	max.			
Viscosity [mPas] ²⁾				
Density [kg/m ³] ²⁾				

¹⁾ Specify the case of suspension / dust particle size.

²⁾ In operations.

Mixed results		
Are the components together	<input type="checkbox"/> soluble <input type="checkbox"/> insoluble	
For soluble components	Desired quality of mixing	
For insoluble components	Interfacial tension	
	Desired droplet / bubble size	

Operating conditions		
Pressure:	Temperature:	Maximum allowable pressure drop:

Design	
Planned pipe diameter:	Are other diameters possible? <input type="checkbox"/> yes, <input type="checkbox"/> no
Planned length:	Are other length possible? <input type="checkbox"/> yes, <input type="checkbox"/> no
Material:	
Mixing elements:	<input type="checkbox"/> permanently installed <input type="checkbox"/> removable
<input type="checkbox"/> With welding ends	<input type="checkbox"/> With Flanges Typ:
<input type="checkbox"/> With jacket	<input type="checkbox"/>
<input type="checkbox"/> With dosing socket DN	Connection