

System TIVAR[®] Engineering Linings Questionnaire



The following information are needed as a basis for the calculation of a lining solution. Please fill out the form as best as possible. The more detailed the project is known to us, the more accurately and quickly we can calculate:

Plant/Component:

Hopper Silo Bunker Chute
 Tipper body Wheel loader bucket Wagon
 Other _____

Construction material:

Steel Concrete Aluminium
 Other _____

Wall thickness (mm): _____

Existing lining: yes no

Type: _____

Thickness: _____

Location Inside Outside

Ambient temperature (°C):

max. _____

min. _____

Direct sunlight: yes no

Filling:

continuously discontinuously
 centered decentered

Material clashes (temporarily) directly onto the wall surface?

Impact wear: yes no

Continuous material buffer in the plant?

Yes No, with intermissions _____

Drop height (m): _____

Throughput (t/h): _____

Operating time (h/day): _____

Other remarks:

Bulk material:

Bulk material: _____

Particle size (mm): max. _____ min. _____

Particle form: round sharp-edged lignitic

Density (%): _____

Moisture content (%): _____

Bulk material temperature (°C): max. _____ min. _____

Other remarks:

Problem description:

Impact wear : yes no

Risk of explosion : yes no

Malfunction due to:

Sticking Bridging Freezing
 Corrosion Segregation
 Other _____

Affected area:

Hopper/slanted walls vertical walls
 Other _____

Resulting problems:

We would like to understand how a System TIVAR Engineering solution needs to perform in order to be successful from your perspective. Please describe the current effects of the material flow disturbances you are experiencing (e.g. safety hazards; damage; quality problems; process limitation/interruptions; loss of production/downtime; scrap; costs due to unplanned repair and maintenance, cleaning, spare parts; emissions/environmental risks; or similar):

Installation options:

Lift/Crane available on site: yes no

Accessibility for assembly:

inspection opening manhole inlet/outlet

Other _____

Special regulations: yes _____ no

Your contact details:

Company: _____

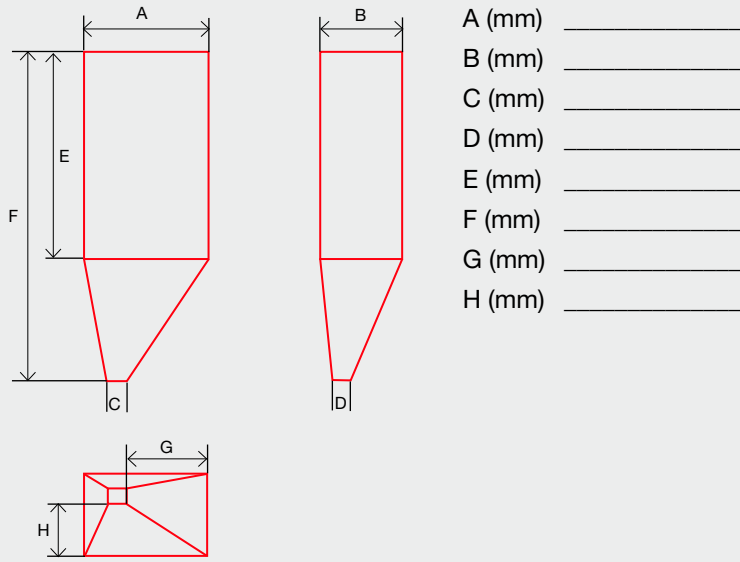
Contact: _____

Email: _____

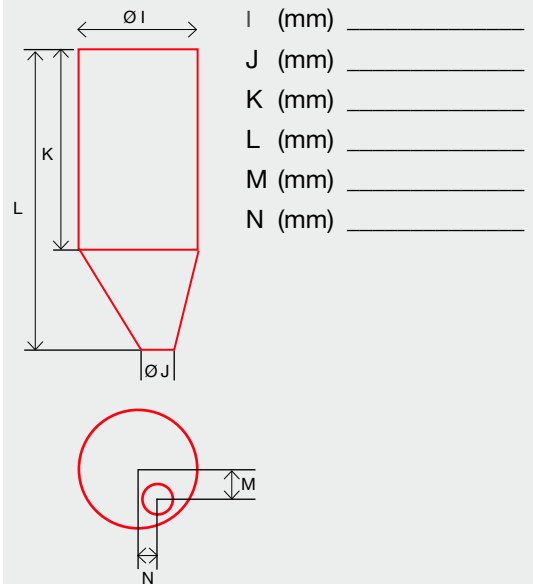
Phone/ Mobile: _____

If drawings or sketches are not available please enter the dimensions in the following overview:

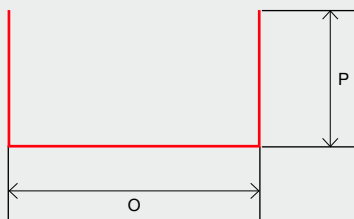
Bunker/ Silo Rectangular/square



Bunker/ Silo Cylindric

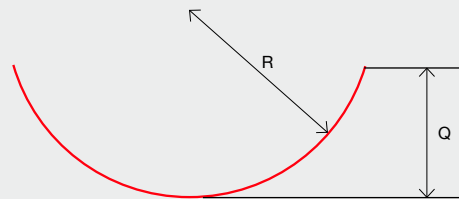


Throughs – Chutes Rectangular square



O (mm) _____
P (mm) _____
Length _____
Slope _____

Throughs – Chutes Round



Q (mm) _____
R (mm) _____
Length _____
Slope _____