# LIME SLAKING SYSTEM QUESTIONNAIRE

**Westpro Machinery Inc.**
3317 30th Avenue, Suite 202
Vernon , BC, Canada, V1T 2C9
Tel: (250) 549-6710
Fax: (250) 549-6735
Email: sales@westpromachinery.com
www.westpromachinery.com

| CUSTOMER CONTACT INFORMATION | |
|---|---|
| Company Name | |
| Address | |
| Contact Person | |
| Phone Number | |
| Email Address | |
| Customer Reference Number | |

| QUESTIONNAIRE | | | | | |
|---|---|---|---|---|---|
| **Process Data** | | | | | |
| Type of Lime | | | | | |
| Lime Quality | | | | | % CaO |
| Lime Delivery/Packaging:<br>(ex., pneumatic tanker truck, bulk bags) | | | | | |
| Lime Bulk Density | | | | | kg/m³ |
| Lime Feed Size, $D_{80}$ | | | | | mm |
| Feed Rate, Nominal/Design | | | | | Metric t/h |
| Feed Rate, Nominal/Design | | | | | Metric t/h |
| Slaked Lime Slurry Density | | | | | % wt. solids |
| Slaker Type | ☐ | Detention | ☐ | Ball Mill | |
| Automatic Control? | ☐ | Yes | ☐ | No | |
| Storage Silo?<br>(For pneumatic tanker truck delivery) | ☐ | Yes | ☐ | No | |
| Storage Hopper?<br>(For bulk bags delivery) | ☐ | Yes | ☐ | No | |
| Size/Capacity of Storage Silo or Hopper | | | | | |

| | | | | |
|---|---|---|---|---|
| Silo Fill Blower? | ☐ | Yes | ☐ | No |
| Slaker Feed System (from silo/hopper?) | ☐ | Yes | ☐ | No |
| Degrit System? | ☐ | Yes | ☐ | No |
| Lime Slurry Storage Tank? | ☐ | Yes | ☐ | No |
| Storage Tank Size | | | | $m^3$ |
| Storage Tank Capacity | | | | hours |
| Distribution Pump(s)? | ☐ | Yes | ☐ | No |
| Distribution Pump Design Flowrate | | | | $m^3/h$ |
| Distribution Pump Total Head | | | | m |

**Site Data**

| | |
|---|---|
| Site Location | |
| Site Elevation | |
| Seismic Data | |
| Plant Electrical Power | |
| Hourly Wind (1/10) | |
| Winter Design Temp | |
| Summer Design Temp | |
| Material of Construction | |
| Outdoors or Indoors | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Stage of Project | ☐ | Preliminary | ☐ | Pre-Feasibility | ☐ | Feasibility | ☐ | Construction |

| | | | | |
|---|---|---|---|---|
| Budget | ☐ | Yes | ☐ | No |
| Financial Received? | ☐ | Yes | ☐ | No |
| Scheduled Purchase Date | | | | |
| Date Required On-Site | | | | |
| Transportation Quote Required | ☐ | Yes | ☐ | No |
| Port Name or Final Destination | | | | |
| Additional Comments | | | | |