

HEADWORKS INC

MECHANICAL SCREEN APPLICATION SHEET



To request a quote, please complete this form with all relevant information and submit via phone, fax, or email to the attention of **Headworks Quotes**:

TELEPHONE
1.713.647-6667

FAX
1.713.647.0999

EMAIL
quotes@headworksintl.com

Project Name (if available): _____

Category (check one): Municipal Industrial

Headworks Representative (if applicable): _____

Design Engineer (if applicable): _____

Project Location (City, State, Country) _____

Contact Person: _____

Company Name: _____

Tel: _____ Fax: _____ Email: _____

Type of Screen required (check one):

Mahr Bar Screen

Perforator

Eliminator

Spiralman

Turbodrum IF

Turbodrum IH

Turbodrum IN

Measurement Units (check one): Imperial

Metric

Number of screens required:

Channel Depth:

Channel Width:

Discharge Level :

Water depth:

Maximum flow per screen:

expressed in (check one): L/S

MGD

GPM

Screen opening size required:

Material of fabrication (check one) SS 304

SS 316

Explain special circumstances (example: heavy debris in your channel)

Conveying Equipment required: Yes

No

Length:

Compacting Equipment require Yes

No

Washing system required Yes

No

Any other information we should know in order to prepare this proposal: