



1306 Mill St. Rock Island, IL 61201

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## Dust Collection Application Worksheet

1. Customer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Contact \_\_\_\_\_
2. Shop type (job shop, hi-production, etc.) \_\_\_\_\_
3. Base material(s) processed (steel, aluminum, wood, plastic, etc.) \_\_\_\_\_  
\_\_\_\_\_
4. Special dust characteristics, if any (toxic, hygroscopic, corrosive, etc.) \_\_\_\_\_  
\_\_\_\_\_
5. Describe operation \_\_\_\_\_  
\_\_\_\_\_
6. Is MSDS available? If so, please review and/or submit.
7. Machine list (type, size, mfr., etc.)
  - a. \_\_\_\_\_ e. \_\_\_\_\_
  - b. \_\_\_\_\_ f. \_\_\_\_\_
  - c. \_\_\_\_\_ g. \_\_\_\_\_
  - d. \_\_\_\_\_ h. \_\_\_\_\_
8. Air Volume (CFM) \_\_\_\_\_
9. Percentage system? \_\_\_\_\_%
10. Collection system's static pressure requirement (inches of w.c.)
  - a. Entry \_\_\_\_\_ d. Filter \_\_\_\_\_
  - b. Ductwork \_\_\_\_\_ e. Other \_\_\_\_\_
  - c. Collector \_\_\_\_\_ Total \_\_\_\_\_



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11. Operating temperature (°F) \_\_\_\_\_

12. Elevation \_\_\_\_\_ (in feet above sea level)

13. Hours/days of operation \_\_\_\_\_

14. Recirculate exhaust air?            Yes            No

15. Are special return air filters (HEPA) required?            Yes            No

16. Dust volume: Density (lbs./cu.ft.) \_\_\_\_\_ Volume (cu.ft./hour,day,week) \_\_\_\_\_

17. Is the dust recyclable?            Yes            No

18. Collector's proposed location:            indoors            outdoors

19. Clearance available: length \_\_\_\_\_ width \_\_\_\_\_ height \_\_\_\_\_

21. Proposed dust storage under collectors:

- |                                      |   |
|--------------------------------------|---|
| One (1) 55 gal. drum (7.3 cu.ft.)    | Two (2) 55 gal. drums (14.6 cu.ft.)                                 |
| Four (4) 55 gal. drums (29.2 cu.ft.) | 1RC can (4.7 cu.ft.)  |
| RCS can (2.7 cu.ft.)                 | Dust bin  |
| Rollaway bin                         | Rotary airlock set-up (discharge into dumpster, tote bin, or other) |

22. Special paint requirement (if any) \_\_\_\_\_

23. Electrical power supply:

	<u>60 hz</u>	<u>50 hz</u>	<u>Phase</u>
	115	110	1
	208	220	3
	230	230	
	460	240	
	575	380	
		400	
		415	
		440	
	Other _____		



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24. Existing collector \_\_\_\_\_ Brand \_\_\_\_\_

Model # \_\_\_\_\_ Condition \_\_\_\_\_

Performance \_\_\_\_\_

25. Plans for future expansion \_\_\_\_\_

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26. Other pertinent information \_\_\_\_\_

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27. Please sketch below a proposed layout or include a drawing along with this worksheet: