



Customer Questionnaire

Company Information

Company Name: _____

Company Address: _____

Company Website: _____

Contact Name & Title: _____

Contact Email: _____

Contact Phone Number: _____

General Questions

Are you currently using extruders? _____

If yes, please send us a description. _____

What should be our exact scope of our offer? _____

Budget offer? _____

Including preparation? _____

Confidential agreement required? _____

Product Data

Type of products: _____

Dimensions (LxWxH) mm: _____

All dimensions of all products, if necessary add drawings

% of perforation: _____

Weight of the green product (kg): _____

Weight of the dry product (kg): _____

Weight of the fired product (kg): _____

Output Data

Output data for the different products

Output/year (pieces): _____

Output/day (pieces): _____

Working days/year: _____

Working hours/day: _____

Materials Data

If available provide laboratory reports regarding mineralogy, grain size distribution, plasticity etc.

Type of material: _____

Dry shrinkage: _____

Firing shrinkage: _____

Major additives: _____

Abrasive additives: _____

Corrosive additives (*pH---value if available*): _____

Electrical data: _____

Voltage (V): _____

Frequency (Hz): _____

This Customer Questionnaire will help to assist us in determining your company's needs. With over 90 collective years of extrusion engineering experience, our team takes a personalized, hands-on approach to every solution we provide.