IEP TECHNOLOGIES
INDUSTRIAL EXPLOSION PROTECTION

Explosion Protection System Information Worksheet
Version 1.9

CYCLONE

Completed by:	
Company:	
Date:	
Tel No.:	
E-mail:	
Proposal Due Date:	

Proposal to be sent to:

Contact:		Title:	
Company Name:		Telephone:	
Address:		Fax:	
		E-mail:	
PROJECT NUMBER/REF:			

Please provide end-user information if different than above:

Contact:		Title:	
Company Name:		Telephone:	
Address:		Fax:	
		E-mail:	

Explosion Protection Options (click boxes for desired options)

Explosion Relief Venting			
Flameless Venting	Yes		
Vent Pstat (if applicable)			
Explosion suppression			
Explosion Isolation			
Type of Isolation			
Exhaust air recirculates back to building?			

Combustible Material:

Material:		
K_{st} or K_g :		**bar-m/sec**
Ignition Temperature, T_c :		**°C**
Material Name:		
P_{max} :		**bar g**
MIE:		**mJ**

Would you like to receive information on dust testing ?

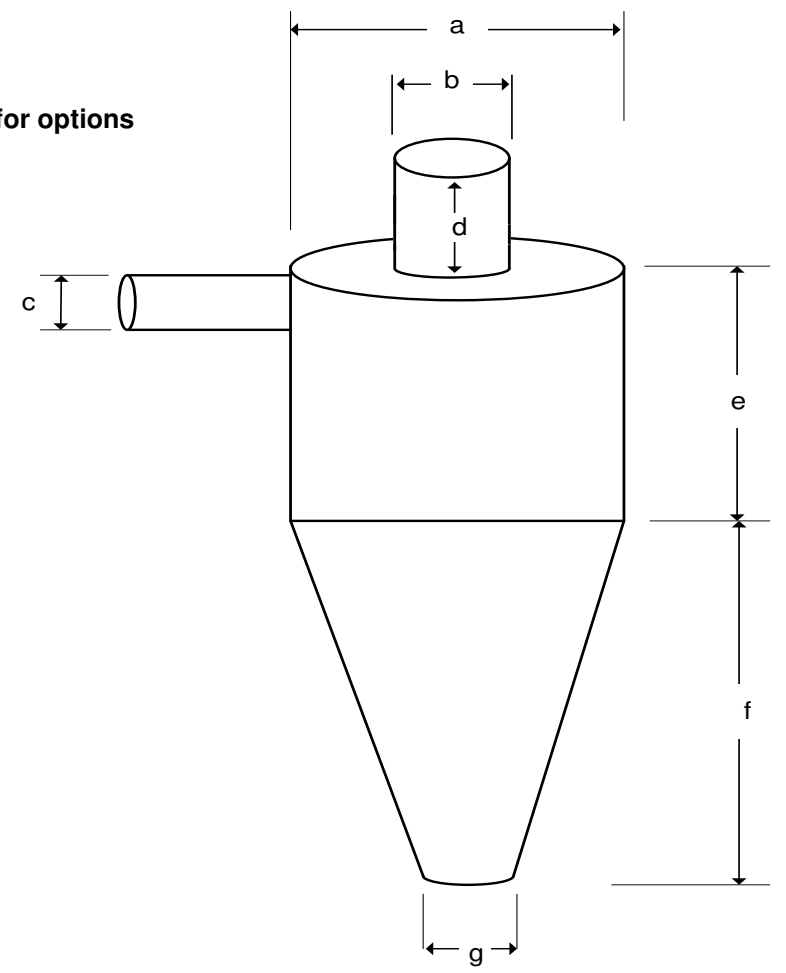
Process Operating Conditions: **Click box for options**

Max. positive pressure:			Airflow:	SCFM
Max. vacuum:			Reduced Exp. Pres. (P_{RED}):	bar
Max. Temperature:			Cyclone Location:	
Min. Temperature:			Distance to exterior wall:	ft
Ambient Temperature:				

Process Description:

Process Equipment:

Manufacturer:			
Model:			
Cyclone inlet type			**Click box for options**
Cyclone outlet type			
Cyclone diameter	**a**		
Exhaust diameter	**b**		
Inlet diameter	**c**		
Outlet plenum height	**d**		
Cylinder section height	**e**		
Hopper height	**f**		
Hopper discharge dia.	**g**		



IEP Technologies NOTES:

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