

## QUESTIONNAIRE

Auger Filling Machines and Options

**Date:** \_\_\_\_\_ **Referred by:** \_\_\_\_\_

**Company:** \_\_\_\_\_ **Customer Contact:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_

**Industry:** \_\_\_\_\_ **Website:** \_\_\_\_\_

Before mailing, please check to be sure that all pertinent data has been supplied. Getting correct, complete information initially will help to expedite preparation of proper proposal and prevent added expense of phone calls and/or correspondence, which will result in unnecessary delays.

**MSDS (MATERIAL SAFETY DATA SHEET) MUST ACCOMPANY ALL PRODUCT SAMPLES SENT TO PER-FIL® BEFORE TESTING CAN START.**

SEND COMPLETED QUESTIONNAIRE AND SAMPLES TO:

**PER-FIL® INDUSTRIES, INC.**  
407 Adams Street, P.O. Box #9  
Riverside, NJ 08075  
Attn: Sales Department

### GENERAL SPECIFICATIONS

(1) Product	(2)Qty. or Wt. Per Package	(3)Req. Wt. Accuracy	(4)Container Specifications	(5)Container Dimensions Dia. Height	(6)Neck Opening	(7)Req'd Speed/Min.	(8) Comments

(Check applicable blocks and fill in data where required. If space insufficient, use separate page.)

**Plant Conditions:**

Max.-Min. Temp: \_\_\_\_\_

Max.-Min. Humidity: \_\_\_\_\_

Min. Ceiling Height: \_\_\_\_\_

Min. Entry Width: \_\_\_\_\_

**Color:**

- Standard (Steel-it)
- Other \_\_\_\_\_

Min. Entry Height: \_\_\_\_\_

No. Shifts/Day: \_\_\_\_

Present Equip: \_\_\_\_\_

Floor Space \_\_\_\_\_

Other \_\_\_\_\_

**Electrical Requirements**

- 230 V, 3 Phase, 60 Hertz
- Other

**Bulk Feed system:**

Type: \_\_\_\_\_

Customer Supplied: \_\_\_\_\_

**Filler Integrated with:**

\_\_\_\_\_

Customer supplied: \_\_\_\_\_

Primary Objectives		Responses
<b>Needs</b>	Improve	_____
	Reduce	_____
	Eliminate	_____
<b>Funds</b>	Budgeted	_____
	Amount	_____
	Alternatives	_____
	Cost Justified	_____
<b>Decision Makers</b>	1.	_____
	2.	_____
	3.	_____
<b>Payback</b>	Logic & Rationale	_____
	Payback Period	_____

<b>Competition</b>	Who	_____
	Why	_____
	What Hold	_____
	Protection	_____
<b>Alternatives</b>	Other Ideas	_____
	Budgeted	_____
	Competitors	_____
	Confidence	_____
	Experience	_____
<b>Order time frame</b>		_____
<b>Install date</b>		_____

Decision making process: \_\_\_\_\_

Current Supplier, likes: \_\_\_\_\_

\_\_\_\_\_

Current Supplier, dislikes: \_\_\_\_\_

\_\_\_\_\_

Criteria used when selecting Supplier: \_\_\_\_\_

\_\_\_\_\_

Criteria used when selecting Equipment: \_\_\_\_\_

\_\_\_\_\_