

Material

Typical product designation: _____

Infeed material

Nominal capacity	[m ³ /h]	_____	[t/h]	_____
Max. grain size	[mm]	_____		
Powder density	[t/m ³]	_____		
Material temperature	[C°]	_____		
Moisture	[%]	_____		

Classification and labeling of the test material by the customer

- according to hazardous goods class ADR/RID
(accident data sheet must be included for transport)
- according to Ordinance on Hazardous Substances (GefStoffV)
(safety data sheet or certificate of harmlessness according to Regulation (EC) No. 1907/2006 must be enclosed)
- according to storage class
(enclose info about storage class and products with which your material must not be stored)
- according to German Medicines Law
(active substances; in addition to the safety data sheet also enclose info about the pharmacological effect on organisms)

Material properties

- | | | |
|---|--|--|
| <input type="checkbox"/> sticky | <input type="checkbox"/> sensitive to pressure | <input type="checkbox"/> triggers allergic reactions |
| <input type="checkbox"/> adhesive | <input type="checkbox"/> greasy/oily/waxy | <input type="checkbox"/> harmful to the environment /
bodies of water |
| <input type="checkbox"/> bridging | <input type="checkbox"/> fluffy/fibrous | <input type="checkbox"/> irritant |
| <input type="checkbox"/> shooting | <input type="checkbox"/> abrasive | <input type="checkbox"/> caustic |
| <input type="checkbox"/> electrostatic | <input type="checkbox"/> corrosive | <input type="checkbox"/> toxic |
| <input type="checkbox"/> perishable | <input type="checkbox"/> carcinogenic | <input type="checkbox"/> flammable |
| <input type="checkbox"/> gaseous | <input type="checkbox"/> endangers reproduction | <input type="checkbox"/> explosive |
| <input type="checkbox"/> hygroscopic | <input type="checkbox"/> alters genetic material | <input type="checkbox"/> oxidizing |
| <input type="checkbox"/> compressing | <input type="checkbox"/> harmful to health | <input type="checkbox"/> infectious |
| <input type="checkbox"/> sensitive to temperature | | <input type="checkbox"/> putrid |

Is any particular personal protective equipment necessary to ensure safe processing?

- yes no

if yes:

- Protective gloves Class _____
 Protective breathing mask Class _____

Contact data

Company _____

Name _____

Address _____

Project _____

Date _____