



Engineering, Inc.

Phone 323 560 9783 \* Fax 323 771 7789 \* email: sales@myersmixer.com

DATE:

**BASKET MILL APPLICATION CHECK LIST**

COMPANY NAME:

ADDRESS:

ADDRESS:

CITY, STATE:

ZIP:

PHONE:

FAX:

EMAIL:

**APPLICATION DETAILS**

**Type of Product (name and general description):**

---

---

---

**Current method of milling:**

---

---

---

**Process Information:**

How many gallons/liters to the batch size \_\_\_\_\_

Time required to achieve results: \_\_\_\_\_

What is percent of solids in the batch? \_\_\_\_\_

Measurement of results of milling process: Hegman Grind \_\_\_\_\_ Other \_\_\_\_\_

Type of media used during current process \_\_\_\_\_

**Product Details:**

Viscosity of Premix \_\_\_\_\_

Particle size prior to milling \_\_\_\_\_ Particle Size desired after milling \_\_\_\_\_

Pigments Used \_\_\_\_\_

Solvent based - specify \_\_\_\_\_  Resins used - specify \_\_\_\_\_

Are Resins held out? How much by % of total volume? \_\_\_\_\_

Temp. sensitive? What is the maximum temperature that can be allowed? \_\_\_\_\_

Note any details regarding the product or process of importance for successful operation:

---

---

---