PLANT SECTOR PNEUMATIC EQUIPMENT SURVEY

PLANT NAME: _____ DATE:_____
AREA: _____
COMPLETED BY: _____ PHONE #:_____

Please complete this survey by listing specific machines or family of like machines. Put the number of the corresponding problem(s) in the appropriate place. Use as many numbers as necessary. Please rank the machines based on those most sensitive to compressed air system changes. Your comments are earnestly solicited with respect to any and all problems you have found with air pressure or air quality problems at any time. Feel free to make those comments on the back of this sheet.

MACHINE NAME/#	DESIGN PRESSURE	AIR PROBLEM SEEN

INSERT APPROPRIATE NUMBER(S)
1= Air Pressure
2= Air Flow
3= Water In Air Stream
4=Oil/Particulates in Air Stream
5=Other (Place in comments section on reverse of form)

PNEUMATIC EQUIPMENT INVENTORY

Please list the pneumatic equipment in your area. Groups of like equipment can be tabulated as a single category as long as their compressed air consumption is equal.

Equipment Make and Model	CFM Required	Pressure Required	Quantity of Units