

LINN HIGH THERM GMBH

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QUESTIONNAIRE FOR RESISTANCE HEATING UNITS

CUSTOMER : Company: _____
 Contact: _____
 Department: _____
 Street: _____
 City: _____
 Country: _____
 phone.: _____ fax: _____
 www. _____ e-mail: _____

A) BURNING GOOD Material: _____
 Dimensions: _____
 Weight: _____
 Bulk weight: _____
 Development of gases : no _____
 Burning aids: no _____

B) TYPE OF FURNACE Muffle F. Chamber F. Convection F.
 Shuttle Kiln Bottomloader Box Annealing F.
 Tubular F. Crucible F. Shaft Furnace
 Continuous F. (Belt-, Roller- or Gravity-Discharge F.)
 Chest Furnace _____

1. Temperature

Max. furnace temperature for app. 15 min: _____
 Furnace temperature continuous operation: _____ hours
 Temperature uniformity in empty chamber: \pm _____ K

Description of required temperature - time program

Temp.:						
Time:						

2. Dimensions:

Chamber inner dimensions : width _____ height _____ depth _____
 Max. outer dimensions: width _____ height _____ depth _____

3. Heating

lateral
 bottom

rear
 ceiling

door

4. Ventilation _____

C) TEMPERATURE CONTROL:

1-zone controlled
 without program

multi zone controlled
 with storeable programs
number of programs: _____
max. number of ramps: _____
max. number of dwellings: _____

Safety Controller
Switch Clock

yes no
 yes no

D) AVAILABLE INSTALLATION AT CUSTOMER'S

mains 230 V, 1 phase, N, PE
mains 400 V, 3 phase, N, PE
mains 220 V, 3 phase, N, PE

other voltage, if yes which _____

fluctuations in the mains voltage increasing _____ decreasing _____

E) Optionen

z. B. Lifting door movable bottom
 Protective gas: gas type _____ concentration _____
 Vacuum: mbar: _____ cold mbar: _____ warm

F) REMARKS:

Date:

Signature: