

DRUM ATTACHMENT QUESTIONNAIRE







REQUESTOR INFORMATION:

Name : Company :	Tel <u>:</u> Fax :
A) WHAT IS THE APPLICATION OF THE DRUM ATTACHMI	ENT?
B) WHERE WILL THE DRUM ATTACHMENT BE USED? (EC	G. WAREHOUSE, OUTDOORS)
C) HOW MANY DRUMS ARE TO BE HANDLED AT A TIME?	
D) ARE YOU LOOKING FOR A DRUM ATTACHMENT THAT	IS STAND ALONE, OR FORKLIFT MOUNTED?
E) COULD YOU PLEASE BRIEFLY LIST THE CONTENTS C	OF THE DRUMS?
F) DO YOU NEED TO DO ANY DUMPING, REVOLVING OR	SIDESIDESHIFTING OF DRUMS?
VERTICAL HORIZONTAL BOTH	R HORIZONTAL POSITION?
H) WHAT TYPE OF DRUMS DO YOU HANDLE?	
STEEL PLASTIC FIBRE	
I) ARE THEY OPEN, OR CLOSED TOP DRUMS? OPEN TOP CLOSED TOP	
	INIED STUEFINGS
J) WILL THE DRUM ATTACHMENT BE USED FOR CONTA YES NO	INER STUFFING!
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MINIMUM WEIGHT : MAXIMUM W	
L) FORKLIFT DETAILS (FOR FORKLIFT MOUNTED UNITS)	
FORKLIFT BRAND : FORKLIFT MODEL : FORKLIFT CAPACITY : LIFTING HEIGHT :	,
Thank you for your enquiry! Please	return fax to (065) 6863 1368