



Questionnaire

Plant

Name:

Address:

Phone number:

Email:

Contact Person

Name:

Address:

Phone number:

Email:

System specification

Bioboiler (manufacturer)	Type (warmwater, steam,...)	Year (MM.YYYY)	Power (kW)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Additional components

(Select appropriate)

- | | | |
|---|---|-------------------------------------|
| <input type="checkbox"/> E-Filter | <input type="checkbox"/> Smoke gas condensation | <input type="checkbox"/> Turbine |
| <input type="checkbox"/> Net hydraulics | <input type="checkbox"/> External materialtransport | <input type="checkbox"/> Pelleting |
| <input type="checkbox"/> Oel/gasboiler | <input type="checkbox"/> Steammanagement | <input type="checkbox"/> Belt dryer |

Please return end no later than 12/15/2014.

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