ENQUIRY FORM FOR LIQUID NITROGEN DOSING

CSM Liquid Nitrogen Dosing System
info@CSM-cryogenic.com

Company Name : _____
Contact Name : _____
Designation : _____
Contact No. : _____
E-mail : _____

1. Product

- ☐ Mineral Water / Drinking Water
- ☐ Peanut / Snack
- ☐ Juice / Tea / Herbal Tea
- ☐ Cooking Oil
- ☐ Others (Please Specify) : _____

2. Applications

- ☐ **Pressurization** – to enhance container rigidity
- ☐ **Inerting** – to eliminate oxygen from the headspace

3. Type of Packaging

- ☐ Steel Cans
- ☐ PET Bottles
- ☐ Aluminum Cans
- ☐ Glass Bottles
- ☐ If more than 1 type / size available

**Please fill in the information for each packaging in the table below (Section 4: Packaging Information)*

4. Packaging Information*

Packaging Type	**1**	**2**	**3**
Packaging Capacity (mL)			
Packaging Head Space (mm)			
Diameter of Neck Opening (mm)			
Diameter of Packaging (mm)			
Height of Packaging (mm)			

5. Packaging Processes

Production Speed : _____ Per Minute
Filling Temperature : _____ ^{o}C
Distance – Container to Container : _____ mm
Distance – Filling to Capping Machine : _____ m
Targeted Pressurization Level (After Dosing) : _____ psi

6. Filler & Capper / Seamer Information

Manufacturer / Brand : _____
Model : _____
Year of Manufacturing : _____
Signal Exchange (select if available) : Speed signal / Timing signal / Bottle signal
Equipment picture (If available) : *customer to provide*
Production video (If available) : *customer to provide*