

PRODUCT		CONTAINER			EXPERIMENTAL CONDITIONS			
NAME	CONCENTRATION (%)	INSTRUMENTATION (beaker, slide, crystallizer, etc.)	¿CLOSED OR NOT during manipulation?	TEST TYPE (distillation, transfer, recrystallization, etc.)	QUANTITY of product used (g / mL / L)	TEMPERATURE of the product (C°)	DURATION of the manipulation	FREQUENCY of manipulation Day/Week/Month
			CLOSED NOT CLOSED					DAY WEEK MONTH
			CLOSED NOT CLOSED					DAY WEEK MONTH
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			CLOSED NOT CLOSED					DAY WEEK MONTH
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			CLOSED NOT CLOSED					DAY WEEK MONTH
			CLOSED NOT CLOSED					DAY WEEK MONTH

To determine the fume hood and the type of filter that best meet your needs please fill in the attached form and return it by email or fax to our Customer Care Dept:
export@cruma.es / +34 933 797 351

ADDITIONAL COMMENTARIES

COMPANY

Company	Address
Mr./Mrs.	
email	City
Phone	Postal Code