

Questionnaire – Wine Fermentation

Please provide the following information to assist us in preparing our proposal for you:

Company: _____

Name: _____ Position: _____

Address: _____

Telephone: _____ Telefax: _____ E-Mail: _____

A. FERMENTATION SCHEDULE

1. Net volume into each closed fermenter: _____

2. Average number of fermentations per day: _____

3. Average number of fermentations per week: _____

4. Number of days operating per week: _____

5. Number of weeks operating per year: _____

B. FERMENTATION CYCLE

1. If fermentation is started in open fermenters, then transferred to closed fermenters, or if some procedure other than complete fermentation in closed fermenters is employed, what is the procedure? Please describe in detail, indicating lengths of time in each vessel and gravity in and out.

2. Operating pressure: _____

3. Total length of fermentation cycle: _____

4. Temperature of fermentation: _____

5. Gravity when yeast added: _____

6. Gravity at end of fermentation: _____

7. Weight of sugar in grams/liter remaining at end of fermentation: _____

8. Typical gravity vs. time curve (attach): _____

