

Company: _____

Contact: _____

City/Province: _____

Phone: _____

E-mail: _____

Date: _____

Application: _____

Industry: _____

Which information are you looking for?

☐ Torque Values

☐ Products

☐ Safety Data

☐ Other: _____

General Service & Conditions

Temperature (°F/°C):

Continuous Operating: _____

Minimum Design: _____

Maximum Design: _____

Pressure (psig/bar):

Operating: _____

Minimum Design: _____

Maximum Design: _____

Thermal Cycling: ☐ Yes ☐ No _____ cycles/24hrs

Vibration: ☐ Yes ☐ No

Pressure Cycling : ☐ Gradual ☐ Intermittent

+ _____ Fluctuation Range (psig/bar)

Media Data

Media: _____

pH: _____

Concentration: _____

State: ☐ Liquid ☐ Gas ☐ Mixed

Specific Gravity: _____

Suspended Particulates: ☐ Yes ☐ No Size: _____

Connection Information

STANDARD FLANGE

Standard: ☐ ASME ☐ AWWA ☐ API

☐ DIN ☐ Other: _____

Material: _____

Size: _____ Pressure Rating: _____

NON-STANDARD FLANGE

Material: _____

Contact Area: ID _____ OD _____

Flange Thickness: _____

Bolt Circle Diameter: _____

Bolt Grade: _____

Bolt Diameter: _____

Number of Bolts: _____

Washer Used? ☐ Yes ☐ No

Isolation Requirements?: ☐ Yes ☐ No

Previous Product Used: _____

Facing: ☐ Raised ☐ Flat

☐ Tongue & Groove ☐ Other: _____

Surface Finish (RMS): _____

Certificate Requirements (specify): _____

Installation: ☐ New ☐ Existing

Comments/Special Requirements