

1. APPLICATION: _____
-
2. OPERATING CONDITIONS AT POINT OF INSTALLATION:
- A. PRODUCT: _____ B. SPECIFIC GRAVITY: _____ @ _____ °F
- C. FLOW RATE: _____ GPM D. TEMPERATURE: _____ °F E. PRESSURE: _____ PSIG
- F. VISCOSITY: _____ SSU CS CP @ _____ °F and _____ SSU CS CP @ _____ °F
- G. INTERFACIAL TENSION: _____ DYNES PER CENTIMETER: _____
- H. CONTAMINANTS: LIQUID: _____ % volume SOLIDS: _____ (% WT.) (% VOL.)
- I. DESCRIPTION OF LIQUID: _____
- J. pH OF LIQUID: _____ TYPE AND CONCENTRATION: _____
- K. DESCRIPTION OF SOLIDS: _____
- L. PREVAILING PARTICLE SIZE RANGE: _____
- M. TYPE AND CONCENTRATION OF CORROSION INHIBITORS, IF ANY: _____
3. REQUIRED PERFORMANCE EFFICIENCY:
- A. ALLOWABLE ENTRAINMENT IN EFFLUENT: _____
- B. DESIRED PARTICLE RETENTION (MICRONS): _____ C. MAXIMUM ALLOWABLE INITIAL PRESSURE DROP: _____ PSID
4. MECHANICAL DESIGN CONDITIONS:
- A. DESIGN PRESSURE: _____ PSIG B. DESIGN TEMPERATURE: _____ °F C. CORROSION ALLOWANCE: _____
- D. CODE OR SPECIFICATION: ASME? _____ ASME STAMP? _____ COMM. STD.? _____ OTHER? _____
- E. FLOW RATE: _____ GPM F. MATERIALS OF CONSTRUCTION: _____
- G. INLET AND OUTLET CONNECTIONS: SIZE: _____ FLANGED MALE NPT FEMALE NPT GROOVED OTHER
- H. OTHER CONNECTIONS ON VESSEL:
- | CONNECTION FOR | SIZE | FLANGED | THREADED | CONNECTION FOR | SIZE | FLANGED | THREADED |
|----------------|-------|--------------------------|--------------------------|----------------|-------|--------------------------|--------------------------|
| PRESSURE GAUGE | _____ | <input type="checkbox"/> | <input type="checkbox"/> | DRAINS | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| RELIEF | _____ | <input type="checkbox"/> | <input type="checkbox"/> | LEVEL GAUGE | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| VENT | _____ | <input type="checkbox"/> | <input type="checkbox"/> | LEVEL CONTROL | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
- I. SPECIAL DESIGN FEATURES: _____
-
5. ACCESSORY ITEMS:
- A. DIFFERENTIAL PRESSURE GAUGE? _____ DIRECT READING? _____ WITH DEAD HAND? _____ NON-DIRECT READING? _____
- B. MANUAL VENT VALVE? _____ C. PRESSURE RELIEF VALVE? _____
- D. LEVEL GAUGE? _____ TUBULAR? _____ REFLEX? _____ TRANSPARENT? _____
- E. MANUAL DRAIN VALVE? _____ F. LEVEL CONTROL (DUAL GRAVITY)? _____
- G. SLUG & DRAIN VALVE ASSEMBLY? _____ RATE OF FLOW CONTROL? _____ FLOAT TESTER? _____
- MATERIALS FOR SLUG VALVE: _____ CAST STEEL _____ CAST IRON _____ OTHER _____
- H. IMMERSION HEATER _____ SUMP _____ DRAIN _____ VOLTAGE: _____ INSULATION? _____

Due to our continuing program of improvement, specifications are subject to change without notice.

5. ACCESSORY ITEMS (Continued):

- I. STEEL SUPPORT STAND (FOR HORIZONTAL VESSELS ONLY) _____
- J. INTERNAL EPOXY COATING? _____ K. AIR ELIMINATOR? _____
- L. HEAD OPENING DEVICE: _____

6. BECAUSE OF COMPATIBILITY OR OTHER REASONS, DO YOU HAVE ANY PREFERENCE FOR THE FOLLOWING:

HOUSING:	GASKET:	CARTRIDGE:
<input type="checkbox"/> CARBON STEEL	<input type="checkbox"/> BUNA-N	<input type="checkbox"/> PAPER
<input type="checkbox"/> ALUMINUM	<input type="checkbox"/> VITON A	<input type="checkbox"/> SCREEN
<input type="checkbox"/> STAINLESS	<input type="checkbox"/> TEFLON®	<input type="checkbox"/> GLASS FIBER
<input type="checkbox"/> OTHER _____	<input type="checkbox"/> OTHER _____	<input type="checkbox"/> OTHER _____
_____	_____	_____
_____	_____	_____

7. REMARKS: _____

8. INSTRUCTIONS: SUBMIT QUOTATION TO: CUSTOMER DISTRIBUTOR REGIONAL OFFICE
 ORIGINAL & _____ COPIES REQUIRED

CUSTOMER	DISTRIBUTOR
_____	_____
_____	_____
_____	_____
_____	_____

Please attach a system schematic, if possible. In cases where any data is unknown or not available, indicate accordingly. Facet will contact you if further details are needed.

SUBMITTED BY:	FOR:
_____	_____
_____	_____
_____	_____
_____	_____

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