

Customer :

Project :

Contact person :

Date :

Version :

Questionary for high pressure units

Technical details :

	Water	Chemical	Oil	Gas
Media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pressure	Bar / Psi		
Flow	Liters per. min		
Outlet temperature (High pressure side)	Celcius degree		
Inlet temperature (Low pressure side)	Celcius degree		
Voltage	Volt		
Hertz	Hz		
Maximum power consumption	kW		
Ex. Zone (Please specify ex. zone and temperature zone)	Yes / No			
Wheels / mobile unit	Yes / No			
Fixed installation	Yes / No			
Offshore use	Yes / No			
Offshore painting	Yes / No			
Heating of media before / after the pump	Yes / No			
Lifting eye or other handling options	Yes / No			
Maximum size	H x L x D			
Number of pumps	1	2	3	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Notes :

Type of gas or type of chemicals:

Please circle the answer

Please specify

Short description of usage and other conditions which must be taken into account :