



PROCESS CONTROL & AUTOMATION

Process Control • Fluid Power • Motion Control & Automation

Filter Cartridge & Housing Selection

Customer: _____ Today's Date: _____ Required Date: _____

Contact: _____ Phone: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip: _____

APPLICATION INFORMATION (Please complete ALL application information): *MUST COMPLETE

*Material to be Filtered: _____ Liquid Gas

Molecular Weight (if gas): _____ Solids Load (%: PPM): _____ Contaminant Type: _____

*Pressure Drop Required: PSI (kPa): Clean: _____ Dirty: _____ *Micron Retention Required: _____

*Flow Rate: Specify GPM (L/min), SCFM (L/min), #/HR (kg/hr), ACFM (L/min), Design: _____ Actual: _____

*Viscosity @ Temperature: _____ *Specific Gravity @ Temperature: _____

*System Pressure & Temperature: _____ System Material: _____

FILTER CARTRIDGE INFORMATION:

Current Filter Part Number (if known): _____ Manufacturer (if known): _____

VESSEL INFORMATION:

Housing Material: _____ Coating/Lining: _____ Gasket/O'ring: _____

*ASME Code: Yes No

*Lethal Service: Yes No

Required Connection - Size & Type:

Inlet: _____ Outlet: _____ Vent: _____

Drain: _____ Gauge: _____ Optional: _____

Describe Special Requirements:

Account Manager: _____

For Technical Assistance Call: (714) 953-1635