

Questionnaire | liquids

To solve your filtering problem, we require exact data about operating conditions and requirements.

We kindly ask you to fill out this questionnaire and send it back to us so that we can determine the suitable filter type for your application.

We will send you our quotation as soon as possible.

1.	Liquid to be filtered	_____	
	pH-degree	<input type="text"/>	
2.	Viscosity of the liquid	<input type="text"/> cSt.	at <input type="text"/> °C Temp.
	Operating temperature	<input type="text"/> min °C	<input type="text"/> max °C
	Design temperature	<input type="text"/> min °C	<input type="text"/> max °C
3.	Operating pressure	<input type="text"/> max. bar	
	Design pressure	<input type="text"/> max. bar	
4.	Flow rate	<input type="text"/> m ³ /h	or <input type="text"/> l/min.
5.	Allowable initial pressure drop in clean status	<input type="text"/> bar	at <input type="text"/> °C Temp.
6.	Required grade of filtration	<input type="text"/> µm	or <input type="text"/> Beta value [β _x =y]
7.	Required type of filter	Single filter	<input type="radio"/>
		Duplex filter	<input type="radio"/>
8.	Filter insert	Cleanable	<input type="radio"/>
		Dispoable	<input type="radio"/>
9.	Location of the filter	Suction line	<input type="radio"/>
		Pressure line	<input type="radio"/>
10.	Quantity	<input type="text"/>	
11.	Details of contamination	_____	
12.	Location of installation	_____	
13.	Design Code & Approval <i>(others by request)</i>	<input type="radio"/> AD 2000	<input type="radio"/> U-Stamp
		<input type="radio"/> ASME VIII	<input type="radio"/> PED 2014/68/EU
		<input type="radio"/> Brazilian NR-13	<input type="radio"/> TR CU 010 (EAC)
		<input type="radio"/> Chinese ML	<input type="radio"/> TR CU 012 (EAC)
		<input type="radio"/> EN 13445	<input type="radio"/> TR CU 032 (EAC)
		<input type="radio"/> Nace	<input type="radio"/> Andere _____
13a	API 614	<input type="radio"/> Yes	<input type="radio"/> No
14.	ATEX	_____	
15.	Material for filter housing	<input type="radio"/> Ductile Cast Iron	<input type="radio"/> Stainless Steel
		<input type="radio"/> Steel	<input type="radio"/> Special Material _____
16.	Required diameter	<input type="radio"/> DN	<input type="radio"/> inch
17.	Remarks / accessory	_____	

18.	Name	_____	
	Adress	_____	
	Telephone & e-mail	_____	