

## 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"/> m³/h               | <input type="text"/> l/min.                      |
| 5.   | Allowable initial pressure drop in clean status | <input type="text"/> bar                |  |
| 6.   | Required grade of filtration                    | <input type="text"/> µm                 |  |
| 7.   | Required type of filter                         | Single filter                           | <input type="radio"/>                            |
|      |   | Duplex filter                           | <input type="radio"/>                            |
|      |   | Automatic filter                        | <input type="radio"/>                            |
| 8.   | Location of the filter                          | Suction line                            | <input type="radio"/>                            |
|      |   | Pressure line                           | <input type="radio"/>                            |
| 9.   | Filter insert                                   | cleanable                               | <input type="radio"/>                            |
|      |   | disposable                              | <input type="radio"/>                            |
| 10.  | Shall the filter be heated ?                    | <input type="radio"/> Yes               | <input type="radio"/> No                         |
|      | electric heating                                | <input type="radio"/>                   |  |
|      | steam or waterheating                           | <input type="radio"/>                   | <input type="text"/> °C <input type="text"/> bar |
|      | Thermal oil                                     | <input type="radio"/>                   |  |
| 11.  | Quantity  | <input type="text"/>                    |  |
| 12.  | Details of contamination                        | _____                                   |  |
| 12a. | Grade of contamination                          | <input type="text"/> mg/l               |  |
| 13.  | Location of installation                        | _____                                   |  |
| 14.  | Design Code & Approval:<br>(others by request)  | <input type="radio"/> AD 2000           | <input type="radio"/> PED 204/68/EU              |
|      |   | <input type="radio"/> ASME VIII         | <input type="radio"/> TR CU 010 (EAC)            |
|      |   | <input type="radio"/> Brazilian NR-13   | <input type="radio"/> TR CU 012 (EAC)            |
|      |   | <input type="radio"/> Chinese ML        | <input type="radio"/> TR CU 032 (EAC)            |
|      |   | <input type="radio"/> U-Stamp           | <input type="radio"/> Andere _____               |
|      |   | <input type="radio"/> EN 13445          |  |
| 15.  | ATEX  | _____                                   |  |
| 16.  | Material for filter housing                     | <input type="radio"/> ductile cast iron | <input type="radio"/> stainless steel            |
|      |   | <input type="radio"/> steel             | <input type="radio"/> special material _____     |
| 17.  | Required diameter                               | <input type="radio"/> DN                | <input type="radio"/> inch                       |
| 18.  | Existing Prefiltration                          | <input type="radio"/> Yes               | <input type="radio"/> No                         |
|      | Type of Prefiltration                           | _____                                   |  |
|      | Grade of Prefiltration                          | <input type="text"/> µm                 |  |
| 19.  | Remarks / accessory                             | _____<br>_____                          |  |
| 20.  | Name  | _____                                   |  |
|      | Adress  | _____                                   |  |
|      | Telephone & e-mail                              | _____                                   |  |