

### Contact Information

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Country \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Contact Title \_\_\_\_\_  
 Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

### Basic Information

Industry \_\_\_\_\_  
 Company Type \_\_\_\_\_  
 Equipment \_\_\_\_\_  
 Application \_\_\_\_\_  
 Quantity \_\_\_\_\_  
 Number of Passages \_\_\_\_\_ If other, list \_\_\_\_\_  
 Center Hole Required?  Yes  No If yes, what size? \_\_\_\_\_

Port/Passage No(s).	Suggested Port Size	Passage Operating Pressure (PSI)	Max. Flow (GPM)	Flow	Duty: Minutes of operation /Hr /Day	Fluid Type	Comments

Describe and define the frequency of any spike pressures: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Max Fluid Temperature \_\_\_\_\_ °F

Max Revolutions per minutes (RPM) \_\_\_\_\_

Ambient Operating Conditions: \_\_\_\_\_ °F Max. \_\_\_\_\_ °F Min.

Is mounted unit protected from Rain, Snow, Dirt, etc.?  Yes  No

Special Coatings or Material Requirements \_\_\_\_\_

Mounting:  Case Rigid and Spool Floats  Case Floats and Spool Rigid

Explain Mounting and Anti-Rotation Preferences: \_\_\_\_\_

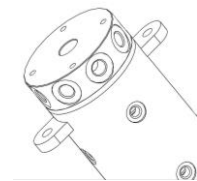
Max diameter of space for case outside diameter including ports and fittings: \_\_\_\_\_

Max overall length allowed: \_\_\_\_\_

Can the mounting flange and/or anti-rotation mounting ear be larger than the diameter? Explain: \_\_\_\_\_

Spool porting:  Spool end

Spool radial



Port end of spool is:  Facing up  Facing down

Preferred radial orientation and number system of the case ports.

180 degrees apart alternatively  90 degrees apart or spiraled around the case evenly

Explain or attach sketch: \_\_\_\_\_

## Features

Include the following features:

- Contamination Exclusion Seal and Grease Zerk purge.
- Secondary end weep seals (External Protection for seal wear seepage)
- Weep passage (Case or spool ported)
- Other:

If other, describe \_\_\_\_\_

Electrification:

Number of Channels	Voltages	Amperage

Wiring or cable Length: \_\_\_\_\_

Plug requirements: \_\_\_\_\_

**Misc. Information**

Date required for quote \_\_\_\_\_

Date required for union \_\_\_\_\_

Other comments

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Date Completed \_\_\_\_\_

Completed By \_\_\_\_\_