

Operating Conditions - Short Application Form

Type mechanical seal: _____ (Single, Double)

Installation: Top Bottom Middle N/A
 Vertical Horizontal

Pressure: _____ barg Suction,
to _____ barg design Discharge,
to _____ barg Barrier

Speed: to _____ RPM, DOR _____

Temperature: _____ to _____ °C

Process fluid: _____

Solids: _____ Size _____ Concentration _____ %

Barrier fluid: _____

Pump/Equipment: _____

Customer: _____

Customer Tag # _____

Shaft Size: _____

ID Stuffing Box: _____

OD Face Stuffing Box: _____

Depth Stuffing Box: _____

Distance to N.O.: _____

Studs: _____ x Ø _____ on B.C.Ø _____

Materials:

Metal Parts _____

Seal Ring _____

Mating Ring _____

O-Rings _____

Completed by _____ Date _____