



ROTARY EQUIPMENT APPLICATION SHEET

COMPANY INFORMATION:

DATE: COMPANY NAME: CONTACT:

PHONE: EMAIL:

SHAFT/SLEEVE OD: STUFFING BOX ID: DEPTH OF STUFFING BOX:

APPLICATION: SHAFT SLEEVE MATERIAL:

EQUIPMENT DESCRIPTION:

FLUID/MEDIA DESCRIPTION:

RPM:

MEDIA: pH: CONCENTRATION:

MAX PRESSURE: MAX TEMPERATURE: MIN TEMPERATURE:

SUCTION PSI: DISCHARGE PSI: STUFFING BOX PSI:

PRESENT PACKING ARRANGEMENT:

IS FLUSH PRESENT? IF SO, WHAT IS LANTERN RING POSITION?

OTHER COOLING?

COMMENTS:

SLADE'S RECOMMENDATION:

SLADE REP: DATE: