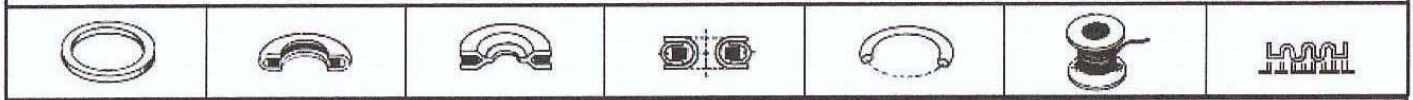


PTFE GASKETS

TECHNICAL SURVEY FORM



COMPANY* :		DATE :	
ADDRESS :			
R. PERSON* :		PHONE* :	
E-MAIL* :		FAX :	

APPLICATION AREA:

FLUID

Type :

Viscosity (23°C):

Temperature:

Working Pressure :

Test Pressure :

CHARACTERISTICS OF JOINT ITEMS (flanges, caps etc.)

Nominal Diameter :

Standard of Joint Items (DIN, ANSI, TSE, ISO vb.):

Out of Standard Flange Type:

FLANGE TYPE		FLANGE MATERIAL	
Flat	<input type="checkbox"/>	Steel	<input type="checkbox"/>
Non Flat	<input type="checkbox"/>	Lined Steel (ebonite)	<input type="checkbox"/>
One sided slot	<input type="checkbox"/>	Other Metal	<input type="checkbox"/>
Double sided slot	<input type="checkbox"/>	Glass	<input type="checkbox"/>
Other type		Plastic	<input type="checkbox"/>
		Other Material	

CONSTRUCTION AND WORKING PROPERTIES (Vibration, thermal shock, sudden pressurechanges, etc.)

USED GASKET

Type :

Life time :

Replacement Reason :

Special Conditions: