

Questionnaire for Pump Design

WANGEN TWIN



Thank you for your interest! Please fax to 814-515-013 or scan and email to heather@gocentre.com

*Orange = Compulsory Information

*Blue = compulsory information, if orange is unknown

Information to the Company			
Name of Company: <i>(alternative: company's stamp)</i>		Date: <i>(dd/mm/yy)</i>	
Responsible Person at the company:		Agent Code: <i>(internal use only)</i>	
Address:		Customer No.: <i>(if available)</i>	
Post code/city/country:			
Phone / Mobile:			
Email Address:			
Offer required until: <i>(dd/mm/yy)</i>		Delivery required until: <i>(dd/mm/yy)</i>	
Quantity pumps required for this application:		Subject / Commission:	
Industry:			
<input type="checkbox"/> Food & Beverage		<input type="checkbox"/> Oil & Gas	
<input type="checkbox"/> Pharmaceuticals + Cosmetics		<input type="checkbox"/> Chemical Industry / Paper Processing	
Information to the Medium			
Medium Name:			
Flowability similar to <i>(e.g. Honey, Butter, yogurt, ...)</i> :			
Solids content % TS:	<input type="checkbox"/> abrasive	<input type="checkbox"/> chem. aggressive	
Solids size [mm]:	<input type="checkbox"/> hard	<input type="checkbox"/> round	<input type="checkbox"/> soft <input type="checkbox"/> stringy <input type="checkbox"/> sharp cornered
Viscosity [mPa·s]:	Temperature [°C]:		
Specific gravity: [kp/dm ³]:	pH:		
Flow rate:	Information in <input type="checkbox"/> [l/h]	<input type="checkbox"/> [l/Min]	<input type="checkbox"/> [m ³ /h]
Additional Information <i>(e.g. Ingredients)</i> :			
Information to the Suction side			
Pressure: <input type="checkbox"/> positive <input type="checkbox"/> negative	How high?:	Information in <input type="checkbox"/> [bar]	<input type="checkbox"/> [mWc]
Suction/inflow pipe length [m]:	Diameter Ø [mm]:		
Additional Information: <input type="checkbox"/> bends: pcs	<input type="checkbox"/> T-piece: pcs	<input type="checkbox"/> flat slide valve: pcs	
Information to the Discharge side:			
Pressure [mm/bar]:			
Delivery pipe-length [m]:	Diameter Ø [mm]:		
Additional Information: <input type="checkbox"/> bends: pcs	<input type="checkbox"/> T-piece: pcs	<input type="checkbox"/> flat slide valve: pcs	

Pump design and specific Materials				
Bearing Housing:	<input type="checkbox"/> cast iron	<input type="checkbox"/> stainless steel		
Screws:	<input type="checkbox"/> 1.4404	<input type="checkbox"/> 1.4404 H (hardened)		
Mechanical Seal:	<input type="checkbox"/> single acting	<input type="checkbox"/> double acting	<input type="checkbox"/> single acting with knife edge	
	<input type="checkbox"/> double acting with knife edge	<input type="checkbox"/> atmospheric side	<input type="checkbox"/> product side	
Suction flange:	DN <input type="checkbox"/> DIN 11851	<input type="checkbox"/> DIN11864-2	Others:	
Discharge flange:	DN <input type="checkbox"/> DIN 11851	<input type="checkbox"/> DIN11864-2	Others:	
Heating jacket on pump casing: <input type="checkbox"/> yes <input type="checkbox"/> no				
Planned pump: <i>(internal use only)</i>				
Which type of pump currently in use:			How many:	
Additional Information:				
Cleaning in Place				
Cleaning in Place CIP/SIP:	<input type="checkbox"/> yes <input type="checkbox"/> no	Temperature [°C]:		
Medium: <i>(Concentration in %)</i>				
Motor				
Power [kw]:				
Protection Class: IP		<input type="checkbox"/> other: IP		
<input type="checkbox"/> has frequency converter		<input type="checkbox"/> with mounted frequency converter		
Voltage:	<input type="checkbox"/> multi range / Standard	<input type="checkbox"/> other Voltage:		
Frequency:	<input type="checkbox"/> 50 Hz	<input type="checkbox"/> 60 Hz		
Cover over the bearing frame & drive:		<input type="checkbox"/> yes <input type="checkbox"/> no		
Type of Mounting (Standard: spherical feet)				
Optional:	<input type="checkbox"/> base plate	<input type="checkbox"/> mobile		
Lack Coating				
Lack Coating:	<input type="checkbox"/> RAL 5005	<input type="checkbox"/> others:		
Certificates				
<input type="checkbox"/> DIN EN 10204, 3.1	<input type="checkbox"/> ATEX <i>(add. Questionnaire to be completed)</i>	<input type="checkbox"/> EHEDG	<input type="checkbox"/> 3A	
Other important information				
P&I-Diagram:				
Others:				