

HOSE TEC™ TECHNICAL REQUEST FORM

Customer Name: _____	TR No.: _____
	Date: _____
	Requested By: _____
Contact: _____	New <input type="checkbox"/> Revision <input type="checkbox"/> P/N: _____
Phone No.: _____ Fax No.: _____	Cust/Comp Samples: Yes <input type="checkbox"/> No <input type="checkbox"/>

SECTION A – APPLICATION DETAILS

Equip/Machine Type: _____ What is hose transporting? _____
 Fitting Type: _____ Solid Liquid Gas
 _____ Is it hazardous? _____
 Mostly Indoor Use Outdoor Use Is jacket abrasion a problem? _____
 Operating Pressure PSI Constant Pulsating Sample Approval Required? _____
 Normal working pressure: _____ psi @ _____ ° F/C
 Maximum working pressure: _____ psi @ _____ ° F/C What is being used now? _____
 Normal working temperature: _____ ° F/C Is it Satisfactory? Yes No
 Maximum working temperature: _____ ° F/C If not, why not? _____
 Maximum environmental temperature: _____ ° F/C Most desirable feature: _____
 Vacuum: _____ in. Hg _____

SECTION B – PRODUCT CONSTRUCTION

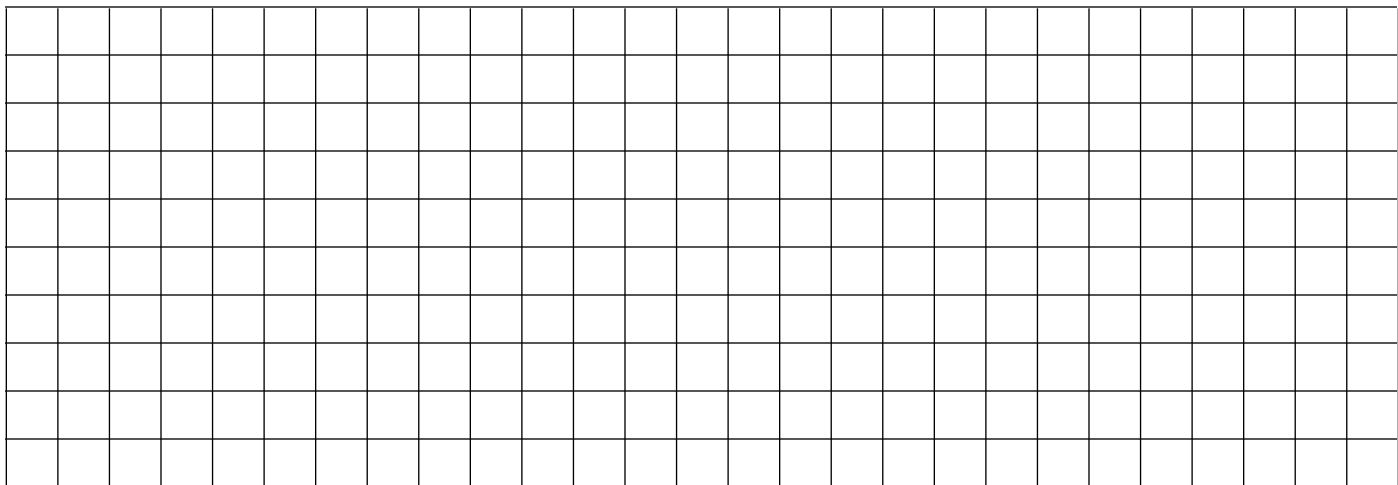
Similar Hose Tec™ Product No.: _____
 I.D.: _____ " ± _____ " O.D.: _____ " ± _____ " Strip Thickness: _____ " ± _____ "
(If tolerance not specified, standard manufacturing tolerance will be used)
 Hose Material: _____
 Liner Material: _____
(e.g. Material can be Stainless Steel, Galvanized Steel or Aluminized Steel)
 Fittings Required: No Yes _____
 Packing: Yes No
 Other Details: _____ Packing Type: _____

SECTION C – BRANDING & LABELING

Hose: Regular Hose Tec Labeling
 Special Label Required: _____
 Directional Flow Arrows: Yes No
 Lay Lines: Yes No Standard Black Color: Yes No Other Paint Color Required: _____

SECTION D – APPLICATION DRAWING

Sketch the installation and include all dimensions and motions of hose during application.



Size (inches): _____ (in the event the fittings or hose have different sizes, include all sizes and show on the application drawing).

It's as easy as 1..2..3! 1. Photocopy 2. Complete 3. Fax FAX: (765) 762-5502 Toll-Free FAX: (800) 879-8232