

Inquiry form sheet for fittings

Company/Address

Contact person: _____

Phone: _____

E-Mail: _____

Your Inquiry number: _____

Date: _____

Case of application/description:

Quantities: _____ Diameter nominal DN: _____ Diameter pressure PN: _____

Material: _____ Face-to-Face Dimension: _____

Type of fitting:

ball valve

gate valve

flap

other: _____

valve

multi-way ball valve (please draft below)

Type of connection (standard): _____

Medium inside:

Temperature (°C) Working: _____ max.: _____ Pressure (bar) Working: _____ max.: _____

Medium outside:

Temperature (°C) Working: _____ max.: _____ Pressure (bar) Working: _____ max.: _____

Actuation

manual

electr./pneum.

Purity: _____

Draft/Drawings (or separately attach)

Further requirements (certifications, conformity, standards, test report, ATEX, etc.)

Please send the completed form sheet to: projects@azintec.com