



FRIATEC N.A., Engineered Products

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**TH. JANSEN
VALVES**

Request for Quote - Valves

Please fill out the information below as completely as possible. We will review the information and send a proposal to the contact name listed below.

Company: _____ **Date:** _____
Contact Name: _____
Address / City / State: _____
Phone: _____
Fax: _____
Email: _____

Valve Item No: _____
Valve Quantity: _____

Process Description: _____

Gas/Liquid Description: _____

Concentration: _____
Temperature: _____
Operating Pressure: _____
Density: _____
Liquid Viscosity: _____
pH: _____
Flowrate: _____

Solids Type: _____
Solids Concentration: _____
Particle Size: _____

Valve Size: _____
Valve Type: _____ (If known, show preference: butterfly, gate, etc)
Installation: _____ (indoors or outdoors)

Actuator Required: _____ (yes or no)
Actuator Type: _____ (electrical, pneumatic, or hydraulic)
Motor Enclosure: _____ (TEFC, Explosion Proof, etc)
Supply: _____ (Volts/Hz/ph)

Additional Comments _____ (Please fill in information or attach document)

