

TANK HEATING SPECIFICATION SHEET

Please provide the requested information and fax to Schutte & Koerting at 215-639-1597

COMPANY NAME:

CONTACT:

ADDRESS:

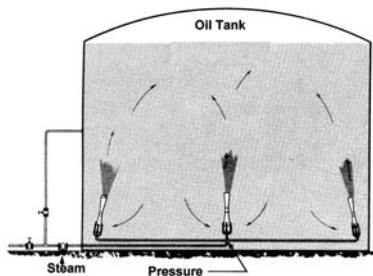
CITY, STATE, ZIP CODE:

PHONE NUMBER:

FAX NUMBER:

EMAIL:

Motive Conditions		
Steam:		
Pressure:		psig
Temperature:		°F
Flow Rate:		#/hr



Suction Conditions (Tank Contents)		
Liquid:		
Viscosity:		cstk
Specific Gravity:		
Initial Temp.:		°F
Specific Heat:		BTU/# °F
Volume of Liquid:		gal.
Final Temperature:		°F
Tank Turn Over Time:		min.

Tank Data	
Tank Orientation:	<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical Tank Operating Pressure: _____ psig
Tank Shape & Dimensions:	<input type="checkbox"/> Rectangular or Square Length _____ ft Width _____ ft Height _____ ft <input type="checkbox"/> Cylindrical Height or Length _____ ft Diameter _____ ft
Minimum Liquid Level: _____ ft	If solids are present, what is max. particle size? _____ microns
*There should be a minimum pressure drop of 20 psi maintained between the heater inlet and the static pressure at the bottom of the tank.	
Type Connections:	<input type="checkbox"/> NPT <input type="checkbox"/> _____ lb. flanged <input type="checkbox"/> Other _____
Construction Material:	<input type="checkbox"/> 316 Stainless Steel <input type="checkbox"/> Ductile Iron <input type="checkbox"/> Bronze <input type="checkbox"/> Other _____
Comments:	