

Application Data Sheet No: \_\_\_\_\_

Date: \_\_\_\_\_

Mode of Enquiry : Direct Visit / Telecall / Email / Post

**COMPNY INFORMATION**

Company Name	_____	Contact	_____
Email	_____	Phone	_____
Address	_____	Fax	_____
	_____	State	_____
City	_____	Zip	_____

**PROJECT INFORMATION**

Project Name \_\_\_\_\_

End Client \_\_\_\_\_

Site Location \_\_\_\_\_

**CLASSIFICATION**

<input type="checkbox"/> Firm Requirement	<input type="checkbox"/> Budget / Tender	<input type="checkbox"/> Inland	<input type="checkbox"/> Exports
<input type="checkbox"/> New Project	<input type="checkbox"/> Replacement	<input type="checkbox"/> EPC Contractor	<input type="checkbox"/> End User/ Water Board

**APPLICATION****VALVE ENQUIRY / SPECIFICATION**

Valve Type \_\_\_\_\_

Valve Size \_\_\_\_\_

Pressure Rating \_\_\_\_\_

Quantity \_\_\_\_\_

**LIQUID DATA**

Fluid Type	_____	Concentration %	<input type="text"/>
Fluid Temp	_____	Specific Gravity	<input type="text"/>
Pressure	_____	Viscosity	<input type="text"/>
Solid	_____	Type	<input type="text"/>

**EXISTING VALVE SPECIFICATION**

Valve Make	_____	Supplier	_____
Valve Type	_____	Valve Model	_____
Valve Rating	_____	Accessories, if any	_____
MOC	_____		_____

**DOCUMENTS**

Any Special Requirements ? \_\_\_\_\_

Specific Materials \_\_\_\_\_

 Testing Specific Data or Drawings**SPECIAL CONTROLS / INSTRUMENTS**

Automation \_\_\_\_\_ SCADA \_\_\_\_\_

**ADDITIONAL INFORMATION**

Attach System Layout Drawing