

## Filter questionnaire gas

To solve your filtering problem, we require exact data about operating conditions and requirements. We kindly ask you to fill out this questionnaire and send it

back to us so that we can determine the suitable filter type for your application. We will send you our quotation as soon as possible.

1. Gas to be filtered:

2. Molar mass:	<input type="text"/>	kg/kmol	
Density:	<input type="text"/>	kg/m <sup>3</sup>	
Operating temperature:	<input type="text"/>	°C	<input type="text"/> °F
Design temperature:	<input type="text"/>	°C	<input type="text"/> °F

3. Operating pressure:	<input type="text"/>	barg	<input type="text"/>	psig
Design pressure:	<input type="text"/>	barg	<input type="text"/>	psig

4. Flow rate:	<input type="text"/>	kg/h	<input type="text"/>	Nm <sup>3</sup> /t
	<input type="text"/>	lb/min.	<input type="text"/>	scfm

5. Allowable initial pressure drop in clean status:	<input type="text"/>	bar	<input type="text"/>	psid
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6. Required grade of filtration:	<input type="text"/>	micron
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7. Deposition	Coalescer	<input type="checkbox"/>
	Coalescer / Demister	<input type="checkbox"/>
	Particle filter	<input type="checkbox"/>
	Demister	<input type="checkbox"/>

8. Required is	Single filter	<input type="checkbox"/>
	Duplex filter	<input type="checkbox"/>
	Duplex filter Double Block & Bleed	<input type="checkbox"/>

9. Details of contamination:

10. Approval / certification:	Yes <input type="checkbox"/>	by:
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11. Quantity:

12. Material for filter housing and element:

13. Required diameter:

14. Remarks / accessory:

15. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone / E-Mail: \_\_\_\_\_