



Gasket Application Data Form

Company _____
 Contact _____
 Title _____
 City _____
 Phone _____
 E-Mail _____

Application _____
 Pipe Flange _____ Heat Exchanger
 Manway _____ Compressor
 Valve Bonnet _____ Flu Duct
 Pump Casing _____ Pressure Vessel
 Other _____

General Service and Conditions

Temperature: (°C) _____
 Continuous Operating _____
 Minimum Design _____
 Maximum Design _____
 Thermal Cycling: Yes No
 Cycles/24hours _____
 Vibration: Yes No

Pressure: (psig/bar) _____
 Continuous Operating _____
 Minimum Design _____
 Maximum Design _____
 Pressure Stability: Stable Unstable
 Installation: New Existing

Media Data

Fluid _____
 pH _____
 Concentration _____

State: Liquid Gas Mixed
 Specific Gravity _____
 Suspended Particulates: Yes No
 Size _____

Connection Information

STANDARD FLANGE

Material _____
 Size _____ Rating _____
 Surface Finish _____
 Phonographic Grooves _____
 Concentric Grooves _____
 Facing Raised Flat _____
 Tongue & Groove Other _____
 Bolt Material _____
 Bolt Grade _____
 Bolt Diameter _____
 Number of Bolts _____

NON-STANDARD FLANGE

Material _____
 Contact Area: ID _____ OD _____
 Surface Finish _____
 Phonographic Grooves _____
 Concentric Grooves _____
 Facing Raised Flat _____
 Tongue & Groove Other _____
 Flange Thickness _____ Bolt Circle Dia _____
 Bolt Material _____
 Bolt Grade _____
 Bolt Diameter _____
 Number of Bolts _____

