



SCREW PUMP ENQUIRY QUESTIONNAIRE

Enquiry Date (dd/mm/yy):

Customer Info

Company Name:	Address, Street & No.:
Contact Person:	Address, City:
Contact Person E-mail:	State:
Contact Person Phone:	Country:
Contact Person Mobile / Skype (if any):	Post / ZIP Code:
Contact Person(s) in copy (if any):	Main Office Phone:
E-mail of Contact Person(s) in copy (if any):	Other details:

Project and Enquiry Info

Customer Enquiry Reference Number / Name:
Project / Package Name:
Item No. / Tag No.:
Country of Final Destination of the Goods:
Offer Date required within:
Budgetary or Firm Enquiry:

Industry / Market Area

Oil & Gas <input type="checkbox"/>	Petrochemical <input type="checkbox"/>	Chemical <input type="checkbox"/>	Food & Beverage <input type="checkbox"/>	Shipbuilding & Marine <input type="checkbox"/>
Power Generation <input type="checkbox"/>	Paints <input type="checkbox"/>	Pharmaceuticals <input type="checkbox"/>	General Industry <input type="checkbox"/>	
Others (please specify) <input type="checkbox"/>				

Pump General Info

Pump Quantity Required (with the same operating conditions): units
 NOTE: If an additional Pump with different operating conditions is required, please fill a new form

Scope of Supply:

Bare Shaft Pump: <input type="checkbox"/>		Pump Complete with Motor and/or other Accessories: <input type="checkbox"/>		
Reduction:	None <input type="checkbox"/>	Reduction Gear <input type="checkbox"/>	Variable Speed Drive <input type="checkbox"/>	Others (pls specify) <input type="checkbox"/>
Coupling:	None <input type="checkbox"/>	3P Prinz Std <input type="checkbox"/>	Magnetic Drive <input type="checkbox"/>	Others (pls specify) <input type="checkbox"/>
Driving Motor:	None <input type="checkbox"/>	Electric Motor <input type="checkbox"/>	Diesel Engine <input type="checkbox"/>	Others (pls specify) <input type="checkbox"/>
Relief Valve:	None <input type="checkbox"/>	3P Prinz Std <input type="checkbox"/>	API Std Safety Valve <input type="checkbox"/>	Others (pls specify) <input type="checkbox"/>
Baseplate:	None <input type="checkbox"/>	3P Prinz Std <input type="checkbox"/>	Others (pls specify) <input type="checkbox"/>	
Piping Connections:	3P Prinz Std <input type="checkbox"/>	Counterflanges <input type="checkbox"/>	Others (pls specify) <input type="checkbox"/>	

Accessories:

Inverter <input type="checkbox"/>	Please specify requirements (if any): <input type="checkbox"/>
Filter <input type="checkbox"/>	Please specify requirements (if any): <input type="checkbox"/>
Pressure Gauge <input type="checkbox"/> Vacuumeter <input type="checkbox"/>	Please specify requirements (if any): <input type="checkbox"/>
Isolation Valves <input type="checkbox"/>	Please specify requirements (if any): <input type="checkbox"/>
Electronic Monitoring Device <input type="checkbox"/>	Please specify requirements (if any): <input type="checkbox"/>
Electric Cabinet/Junction Box <input type="checkbox"/>	Please specify requirements (if any): <input type="checkbox"/>
Others (please specify) <input type="checkbox"/>	

Fluid Data:

Main Fluid (Fluid 1) to be pumped:	Other Fluid (Fluid 2) to be pumped:
Fluid 1 Density (Kg/m ³):	Fluid 2 Density (Kg/m ³):
Fluid 1 Viscosity Min/Norm/Max at operating Temp. Range (cSt):/...../.....	Fluid 2 Viscosity Min/Norm/Max at operating Temp. Range (cSt):/...../.....
Fluid 1 Min/Norm/Max Temp:/...../..... °C <input type="checkbox"/> °F <input type="checkbox"/>	Fluid 2 Min/Norm/Max Temp:/...../.....
Fluid 1 Corrosive (Yes or Blank): <input type="checkbox"/>	Fluid 2 Corrosive (Yes or Blank): <input type="checkbox"/>
Fluid 1 Other Details:	Fluid 2 Other Details:
Air/Gas dissolved in liquid (Yes or Blank): <input type="checkbox"/>	If Yes, please specify volume percentage at operating conditions:
Solid content (Yes or Blank): <input type="checkbox"/>	If Yes, please specify min/max solid particles diameter (mm):/.....
If Yes, please specify Max Weight Percentage of Solids:	If Yes, please specify the nature of the Solid content & max Hardness (if available):

Operation & Service Data:

Flow Rate Min/Norm/Max:	(m ³ /h) <input type="checkbox"/>	(l/min) <input type="checkbox"/>	(US GPM) <input type="checkbox"/>
Outlet Pressure Min/Norm/Max:	(bar) <input type="checkbox"/>	(barg) <input type="checkbox"/>	(psi) <input type="checkbox"/> (psig) <input type="checkbox"/>
Suction Pressure Min/Norm/Max:	(bar) <input type="checkbox"/>	(barg) <input type="checkbox"/>	(psi) <input type="checkbox"/> (psig) <input type="checkbox"/>
System Design Pressure:	(bar) <input type="checkbox"/>	(barg) <input type="checkbox"/>	(psi) <input type="checkbox"/> (psig) <input type="checkbox"/>
Inlet Piping Size:	(mm) <input type="checkbox"/>	(Inches) <input type="checkbox"/>	
Outlet Piping Size:	(mm) <input type="checkbox"/>	(Inches) <input type="checkbox"/>	
Net Positive Suction Head Available NPSH _A (water column meters):	[wcm]		

Pump Applicable Standards: EN/DIN API 676 Others (please specify):

Pump Construction Details:

Pump Enclosure Materials:	3P Prinz Std <input type="checkbox"/>	Others (please specify) <input type="checkbox"/>
Pump Trim Materials:	3P Prinz Std <input type="checkbox"/>	Others (please specify) <input type="checkbox"/>
Trim Hardening Coating/Overlay:	3P Prinz Std <input type="checkbox"/>	Others (please specify) <input type="checkbox"/>

Pump Seals:

MFR's Std Single Mechanical Seals <input type="checkbox"/>	MFR Std Double Mechanical Seals <input type="checkbox"/>	Packing type (stuffing box) <input type="checkbox"/>
Customized Mechanical Seals	Specify other requirements (if any), like Materials, Type, Specific Brands:	
DIN 24960 Unif. Mechanical Seals	Specify other requirements (if any), like Materials, Type, Specific Brands:	
Flushing API Plan (if any) <input type="checkbox"/>		
Magnetic Drive (Sealless) <input type="checkbox"/>		

Flanges Configuration:	3P Prinz Std <input type="checkbox"/>	Others (please specify or send layout drawing) <input type="checkbox"/>
Pump Installation:	Horizontal <input type="checkbox"/> Vertical <input type="checkbox"/>	Others (please specify or send layout drawing) <input type="checkbox"/>
Pump Location:	Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/>	Under Roof <input type="checkbox"/> Others (please specify) <input type="checkbox"/>
Environment Min/Max Temp:/..... °C <input type="checkbox"/> °F <input type="checkbox"/>
Environment Special Conditions:	Marine Corrosive <input type="checkbox"/> Tropical <input type="checkbox"/>	Arctic <input type="checkbox"/> Others (please specify) <input type="checkbox"/>
Pump Painting:	None <input type="checkbox"/> 3P Prinz Std <input type="checkbox"/>	Customized Painting Spec. (please specify and attach) <input type="checkbox"/>
Pump Jacket:	Heating Jacket <input type="checkbox"/>	Cooling Jacket <input type="checkbox"/> Others (please specify) <input type="checkbox"/>

Hazardous Area: Non-Hazardous ATEX If ATEX, please fill below

Zone (0, 1 or 2) <input type="checkbox"/>	Gas Group (I, II, IIA, IIB, IIC) <input type="checkbox"/>	Temperature Class (T1, T2, T3 ... T6) <input type="checkbox"/>	Protection type (Eex-n, Eex-d, Eex-e) <input type="checkbox"/>
Other Hazardous Area Standards:	UL / FM <input type="checkbox"/>	If yes, please specify: Group, Class, Division	
	IECEx on accessories <input type="checkbox"/>	If yes, same ATEX Area will be used	

Driving Motor Features:

Electric Motor Features:	Voltage (V) <input type="checkbox"/>	Phases <input type="checkbox"/>	Frequency (Hz) <input type="checkbox"/>
Hazardous area:	if applicable, please fill the Hazardous Area Questions above		
IP Protection:	IP Level <input type="checkbox"/>	NEMA Enclosure Type <input type="checkbox"/>	
Desired Speed (rotations per minute):rpm		
Other details / features requested:		

Spare Parts Quotation:

Start-Up / Commissioning Spares: 2-Years Operational Spares: Others (please specify):

ADDITIONAL NOTES:

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