



R.P. ADAMS COMPANY, INC

R.P. ADAMS COMPANY, INC.
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AIR/GAS/STEAM FILTER DESIGN QUESTIONNAIRE

Type Of Quotation: [] Budget [] Firm • Date Quote Required: _____ • Approx. Installation Date: _____

CUSTOMER INFORMATION:

Company Name: _____

Address: _____

Contact: _____

Telephone: _____ Fax: _____

E-Mail: _____

PROCESS INFORMATION

VALUE

Fluid Name: _____

Molecule Weight of Gas _____

Fluid Flow SCFM _____

ICFM* _____

lb/hr _____

Operating Temperature °F _____

Operating Pressure PSIG _____

Pressure Drop Allowed PSIG _____

Design Pressure PSIG _____

*If flow is in ICFM, then indicate ambient conditions:

Ambient Temperature °F _____

Ambient Pressure PSIA _____

Ambient Relative Humidity % _____

DESIGN INFORMATION:

Design Basis: R.P. Adams Standard [] ASME Code []

Preferred Materials of Construction: Cast iron [] 304 SS []

Quote a condensate trap with this unit? YES [] NO []

REMARKS: _____

Please complete the questionnaire and fax to R.P. Adams or email to hx@rpadams.com to permit us to evaluate the application and properly select and size the correct R.P. Adams product.