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Filter Selection Worksheet

For application assistance or a quotation, simply complete this form and e-mail or fax a printed copy to (954)572-3401. If you are unsure of certain application information, indicate with a question mark. Use the space at the bottom to provide additional information, make comments, or ask questions. If you'd rather call us, our telephone number is (954)572-2700.

Name			
Company			
Title			
Address			
Address 2			
City	State	Postal Code	
Country			
Phone			
Fax			
Your Email			
This request is for Application advice A quotation			
This application is A new installation A replacement Add	ditional filtration applic	ation	
Process Goals & Filtering Objectives			
APPLICATION DATA			
Operation Continuous Batch			
Liquid to be filtered			
Percentage of Solids (per gallon)			
Viscosity (cps)			
Specific Gravity (sg)			
Particle Characteristics (hard, soft, sticky, etc.)			
What is the upstream Straining or Separation technology			
Flow Rate (gpm)			
Operating Pressure (psig)			
Design Pressure (Maximum psig)			

Operating Temperature (°F)
Design Temperature (Maximum °F)
Filter Housing, material of construction required 316 S/S 304 S/S Carbon HALAR® Lined
Inlet and Outlet Connection Type ☐ Flanged ☐ Threaded ☐ Sanitary
Desired Connection Size (in)
Desired O-Ring/Gasket Material
Media Retention Required (Micron Size)
Absolute or Nominal rating Absolute Nominal
Desired Filter Media ☐ Filter Bags ☐ Cartridge Elements ☐ Strainer/Lined Baskets
CURRENT FILTER INFO
If Replacement filter, are you using ☐ Filter Bags ☐ Cartridge Elements ☐ Strainer/Lined Baskets
Length (in)
Diameter (in)
How Many
How often are you changing out your filter medium

ADDITIONAL INFO

Additional Comments / Questions