



PUMP APPLICATION FORM

To help us recommend the proper pump for your use, please furnish as many details as possible. This information will be considered strictly confidential.

FROM:

Company _____ Date _____
Individual _____ Title _____
Street _____
City _____ State _____ Zip Code _____

CAPACITY AND SPEED

Capacity required _____ U.S. gallons per minute. Operating speed _____ RPM
Is service continuous or intermittent? _____ If intermittent, please explain _____
Is there a filter system? _____ Average flow required _____ U.S. GPM

LIQUID PUMPED

Type and concentration _____ pH _____ Pumping temperature _____ °F
Viscosity at 70°F _____ at 100°F _____ at 210°F
Specific gravity _____ or weight per U.S. gallon _____
Are solids or abrasives present? _____
If so, please explain _____

DISCHARGE PRESSURE (if any)

Pounds per square inch _____ or _____ foot head Constant or varying? _____ If varying, explain _____
Vertical distance from center line of pump to highest discharge outlet _____
Pipe size _____ I.D. Total length of discharge line _____ Number of elbows _____ 90°; _____ 45°
No. & desc. of other fittings _____
Is there a heat exchanger? _____ Pressure drop _____ PSI
Type of filter system _____ Average pressure drop _____ PSI

SUCTION LINE

Vertical distance from center line of pump to surface of liquid supply _____ Pipe size _____ I.D.
Total suction line length _____ No. of elbows _____ 90°; _____ 45°;
No. & desc. of other fittings _____
Is there a strainer? _____ Type _____ size _____
NPSH available _____ feet. (See NPSH Bulletin TP-103.)

POWER UNIT

To be furnished by user _____ ; furnished by dealer _____ ; furnished by SERFILCO _____
Specify prime mover (electric motor, gas engine, etc.) _____
____ Horsepower developed _____ and other characteristics _____
____ Electric motor: Manufacturer _____ , HP _____ , RPM _____
____ Phase _____ , Hertz _____ , Volts _____ , Motor enclosure _____

Use back of this sheet to identify type of pump or attach sketch.