

INQUIRY QUESTIONNAIRE

Heat Exchanger Services

Please fax to 201-368-8989 or email to contact@modularprocess.com

Inquiry Date: _____

CUSTOMER INFORMATION

Customer Name: _____ Title: _____

Company Name: _____

Mailing Address: _____

Email Address: _____

Telephone Number: _____ Fax: _____

Type of Business: _____

Notes or Comments: _____

PROCESS INFORMATION

General Process Objectives: _____

Equipment Number/Name: _____

Exchanger Type:

TEMA Class:

Fluid Name & Composition:

Hot Side: _____

Cold Side: _____

Hot Side Location:

Length or Size Limitations: _____

Other Notes or Comments: _____

Fill in as much information as known:

	Hot Side		Cold Side	
	In	Out	In	Out
Total Flowrate []:				
Vapor []:				
Liquid []:				
Noncondensables []:				
Temperature []:				
Density []:				
Viscosity []:				
Specific Heat []:				
Thermal Conductivity []:				
Latent Heat []:				
Pressure []:				
Allowable Pressure Drop []:				
Fouling Resis. (min) []:				
Heat Exchanged []:				
Design Pressure/Vacuum Rating []:				
Design Temperature []:				
Materials of Construction:				