Edwards
Pentair Water

Application Data

Customer: _____ Quote #: _____

Contact Name: _____ Date: _____

Phone: _____ Address: _____

Fax: _____

E-Mail: _____

Foam _____ (Brand or Type) Water Mist _____ (Brand or Type) Other _____ (Specify other fluids)

ULFM Listed? YES NO

Viscosity (CPS) _____

Temperature _____

Foam concentration required _____

Suction Pressure _____

Discharge Pressure _____

Pressure Relief Valve – Maximum setting _____

(Normally 10% over discharge)

Desired midship capacity of foam solution flow _____

(Mobile applications only)

Electric Motor

Voltage _____

Phase _____

Hz _____

Enclosure _____

Diesel Engine (Specify engine details required)

_____

_____

Site Elevation _____

ULFM Listed? YES NO

Gasoline Engine

(Specify engine details required)

_____

Water Motor/Pelton Wheel

Available Flow _____

Available Pressure _____

Hydraulic Drive

Available hydraulic motor RPM _____

SAE Mounting _____

PTO

Available PTO RPM _____

Specs _____

Engine or motor controller required? YES NO

Specify functions _____

Please fax completed form back to Edwards - Pentair Water at: 630-859-1226
Tel #: 630-859-7000
Website: www.edwardsmfg.com