

Pump/Compressor Design Data Sheet

Technical Contact: _____ Company: _____

Phone: _____ Fax: _____ Email: _____

Pump/Compressor Requirements: <ul style="list-style-type: none"> • Compressor Flow Rate: • Inlet Pressure • Outlet Pressure • Helium Leak Rate • Max. Startup Pressure • Proof Pressure • Burst Pressure 	<p>_____ <input type="checkbox"/> SCFM <input type="checkbox"/> ACFM <input type="checkbox"/> SLPM</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
Temperature & Media Requirements: <ul style="list-style-type: none"> • Ambient Temperature • Media Gas • Max. Gas Temperature • Min. Gas Temperature • Relative Humidity 	<p>_____ <input type="checkbox"/> °F <input type="checkbox"/> °C</p> <p>_____</p> <p>_____ <input type="checkbox"/> °F <input type="checkbox"/> °C</p> <p>_____ <input type="checkbox"/> °F <input type="checkbox"/> °C</p> <p>_____ %</p>
Electrical Requirements: (Select all that apply) <ul style="list-style-type: none"> • AC Voltage • Frequency • Phase ~ OR ~ • DC Voltage • DC Motor 	<p><input type="checkbox"/> 115 <input type="checkbox"/> 208 <input type="checkbox"/> 230 <input type="checkbox"/> 380 <input type="checkbox"/> 460 <input type="checkbox"/> 575</p> <p><input type="checkbox"/> 50 Hz <input type="checkbox"/> 60 Hz <input type="checkbox"/> 50/60 Hz <input type="checkbox"/> 400 Hz</p> <p><input type="checkbox"/> Single <input type="checkbox"/> Three</p> <p><input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 28 <input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Brushed <input type="checkbox"/> Brushless</p>
Compressor Valve Gasket Material:	<p><input type="checkbox"/> Teflon <input type="checkbox"/> Viton (Fluorocarbon)</p> <p><input type="checkbox"/> Aluminum O-Ring <input type="checkbox"/> Other: _____</p>
Miscellaneous: <ul style="list-style-type: none"> • Motor Enclosure • Motor Speed 	<p><input type="checkbox"/> ODP <input type="checkbox"/> TEFC <input type="checkbox"/> TENV <input type="checkbox"/> XP- Div <i>Group(s):</i> _____</p> <p><input type="checkbox"/> 1750 RPM <input type="checkbox"/> 3450 RPM <input type="checkbox"/> Variable Speed</p>
Design: (Select all that apply)	<p><input type="checkbox"/> Integral Mount (motor to pump) <input type="checkbox"/> Pedestal Mount</p> <p><input type="checkbox"/> Pedestal Mount with a common base plate</p> <p><input type="checkbox"/> Single Containment <input type="checkbox"/> Double Containment</p> <p><input type="checkbox"/> Series Plumbing <input type="checkbox"/> Parallel Plumbing</p>
Inlet/Outlet Ports:	<p><input type="checkbox"/> NPT <input type="checkbox"/> Cajon (Metal Seal Style) <input type="checkbox"/> Tube <input type="checkbox"/> Weld Socket</p> <p><input type="checkbox"/> Other: _____</p> <p>Port Specification: _____ Port Size: _____</p>

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<p>Special Testing or Requirements:</p> <ul style="list-style-type: none"> ▪ <input type="checkbox"/> NR007 ▪ <input type="checkbox"/> NR008 ▪ <input type="checkbox"/> NR036 ▪ <input type="checkbox"/> NR020 ▪ <input type="checkbox"/> NR035 ▪ <input type="checkbox"/> NR023 ▪ <input type="checkbox"/> NR024 ▪ <input type="checkbox"/> NR025 ▪ <input type="checkbox"/> Other 	<p>LEAK TEST AND CERTIFICATION 1 X 10⁻⁷ SCC/SEC HELIUM</p> <p>RAW MATERIAL CERTIFICATION. STATING MATERIAL TYPE ON ALL WETTED SURFACES.</p> <p>STATIC PRESSURE TEST AND CERTIFICATION OF PRESSURE (1.5X MAX. OPERATION PRESSURE) WITH AIR FOR 30 MINUTES PER UNIT</p> <p>VISUAL AND DIMENSIONAL INSPECTION REPORT PER PUMP DRAWING.</p> <p>PERFORMANCE TEST; RUNNING CERTIFICATION AT 60 HZ FOR MAX. AIR FLOW, MAX. VACUUM AND MAX. OPERATING PRESSURE, PER UNIT.</p> <p>MOTOR CURRENT TESTING CERTIFICATION, PER UNIT.</p> <p>SENIOR AEROSPACE METAL BELLOWS STANDARD INSPECTION EVIDENCE.</p> <p>SENIOR AEROSAPCE METAL BELLOWS ES-1150 CLEANING CERTIFICATION.</p>
<p>Environmental or Qualification Requirements:</p>	
<p>Special Quality Provisions:</p>	
<p>Application Information and Comments:</p>	