HOSE TEC™ TECHNICAL REQUEST FORM

Account:	TR No.:
Contact:	Date:
Phone:	Requested By:
Fax:	New ❑ Revision ❑ P/N:
Email:	Cust/Comp Samples: Yes ❑ No ❑

SECTION A – APPLICATION DETAILS

Equip/Machine Type:_____
Fitting Type: _____
_____
Mostly Indoor Use ❑ Outdoor Use ❑
Operating Pressure PSI Constant ❑ Pulsating ❑
Normal working pressure: _____ psi @ _____ ° F / C
Maximum working pressure: _____ psi @ _____ ° F / C
Normal working temperature: _____ ° F / C
Maximum working temperature: _____ ° F / C
Maximum environmental temperature: _____ ° F / C
Vacuum: _____ in. Hg

What is hose transporting? _____
Solid ❑ Liquid ❑ Gas ❑
Is it hazardous? _____
Is jacket abrasion a problem? _____
Sample Approval Required? _____
What is being used now? _____
Is it satisfactory? Yes ❑ No ❑
If not, why? _____
Most desirable feature:_____
_____

SECTION B – PRODUCT CONSTRUCTION

Similar Hose Tec™ Product No.:_____
I.D.: _____" ± _____" O.D.:_____" ± _____" Strip Thickness: _____" ± _____"
(if tolerance not specified, standard manufacturing tolerance will be used)
Hose Material:_____
(e.g. Material can be Stainless Steel, Galvanized Steel or Alumized Steel)
Fittings Required: No ❑ Yes _____
Packing: Yes ❑ No ❑
Other Details: _____ Packing Type: _____

SECTION C – BRANDING & LABELING

Hose: ❑ Regular Hose Tec Labeling
❑ Special Label Required: _____
Directional Flow Arrows: Yes ❑ No ❑
Lay Lines: Yes ❑ No ❑ Standard Black Color: Yes ❑ No ❑ Other Paint Color Required: _____

SECTION D – APPLICATION DRAWING

Sketch the installation and include all dimensions and motions of hose during application.

Size (inches): _____ (in the event the fittings or hose have different sizes, include asll sizes and show on the appilcation drawing).

It's as easy as 1..2..3! 1. Photocopy 2. Complete 3. Fax FAX: (765) 762-5502 Toll-Free FAX: (800) 879-8232