

RFQ for 2 way/ 3 way Thermic Fluid Control Valve

(Fill / Tick as applicable)

Customer Details: _____ **Date:** _____

Organization name: _____

Address (Office): _____

City: _____ State: _____ Pin: _____

Phone: _____ Fax: _____

Website: _____ Email: _____

Contact Person: _____ Mobile No.: _____

1. Service Application:

Thermic Fluid

Water

Others, Please specify

2. Pipe size:

3. Flow Rate m3/hr:

4. Flow characteristic: Proportional: On Off: Equal Percentage:

5. Body Form: 3 way 2 way

6. Mixing: Diverting:

7. Pneumatically Actuated: Electrically Actuated:

8. Pressure kg/cm2: Maximum: _____ Operating: _____

9. Inlet Temperature: Maximum: _____ Operating: _____

10. Valve Body Rating:

Please tick your requirement

#150 #300

9. End connections:

Please tick your requirement

ANSI B 16.5 #150 ANSI B 16.5 #300 PN 16 PN 25

10. Seat Leakage: Class IV Metal to Metal Seating (by default)

Any other, please specify

11. Electrical Area Classification, please specify

12. Utility required for Pneumatic Actuator: Available: (Yes/ No)

- Compressed air at 3-7 bar

- Control Signal 4-20 mA from control unit

13. Utility required for Electrical Actuator: Available Yes/ No

Please tick your requirement.

- 230 V, 50 Hz

- 230 V, 60 Hz

- Others, please specify _____

(Manual Override/ Handwheel is provided by default)

Other products of Interest to us are:

- Energy Audit
- Trouble Shooting Consultancy
- Pressure Reducing Station
- New Project/Expansion Design Engineering
- Detailed Engineering
- Automatic Blowdown Control (ABCO)
- Blowdown Heat Recovery
- Boiler Automation O2 Draft Control
- Others, Please Specify: _____

Thermax Representative's Details:

Region: _____

Sales Engineer Name:

Contact Number: (office) (mobile)

Selected Model:

Head Office Comments: