

CONFIDENTIAL HOMOGENIZER QUOTATION DATASHEET

To obtain a quotation for your application, give as much data as possible and mail/fax the completed questionnaire to the following address:

Arrow Process Systems
5115 W. 12th St.
Sioux Falls, SD 57106
Phone: (605) 332-4192
Fax: (605) 332-4275

Date: _____

Your Reference: _____

Date Quotation Req'd: _____

Type Of Quotation Req'd: Firm Budget

Approx Installation Date: _____

End User	
Name:	
Address:	
Product(s)	
Pumping Temperature:	
Density at pumping Temperature:	
Viscosity in cps at pumping Temperature:	
Total % Solids:	
Corrosive or Abrasive Materials:	
PH of product(s) :	
Solvents:	
Valve Assembly	
Homogenizer or Pump:	
If homogenizer, Single or Two Stage:	
If pump, Full Flow Relief, By-Pass Control or Less Valve. :	
Operational Requirements	
Capacity in Gallon/Hour or Liters/Hour:	
Operating Pressure in PSI or BAR:	
Maximum CIP/SIP Temperature:	
Electrical Requirements	
Enclosure (TEFC or X-Proof):	
Phase- always 3 phase:	
Hertz:	
Voltage:	
Special Requirements:	
Inlet and Discharge Piping Type and Size	
Inlet:	
Discharge:	
If pump, relief or bypass:	