



Gasket Application Data Form

Company: _____
 Contact: _____
 City / State: _____
 Phone: _____
 E-mail: _____

Date: _____
 Application: _____
 Industry: _____
 Which information are you looking for?
 Torque Values Products
 Safety Data Other: _____

General Service & Conditions

Temperature (°F/°C): °F °C
 Continuous Operating: _____
 Minimum Design: _____
 Maximum Design: _____

Pressure (psig/bar):
 Operating: _____
 Minimum Design: _____
 Maximum Design: _____

Thermal Cycling: Yes No _____ cycles/24hrs
 Vibration: Yes No

Pressure Cycling: Gradual Intermittent
 ± _____ Fluctuation Range (psig/bar)

Media Data

Media: _____
 pH: _____
 Concentration: _____

State: Liquid Gas Mixed
 Specific Gravity: _____
 Suspended Particulates: Yes No Size: _____

Connection Information

STANDARD FLANGE

Standard: ASME AWWA API
 DIN Other: _____
 Material: _____
 Size: _____ Pressure Rating: _____

NON-STANDARD FLANGE

Material: _____
 Contact Area: ID _____ OD _____
 Flange Thickness: _____
 Bolt Circle Diameter: _____

Bolt Grade: _____
 Bolt Diameter: _____
 Number of Bolts: _____

Washer Used? Yes No
 Isolation Requirements?: Yes No
 Previous Product Used: _____

Facing: Raised Flat
 Tongue & Groove Other: _____
 Surface Finish: _____

Certificate Requirements (specify): _____
 Installation: New Existing

Comments/Special Requirements