

# ***Application Requirements***

Date \_\_\_\_\_  
Company Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Describe Application \_\_\_\_\_

Medium (Air, CO<sub>2</sub>, Methane, Etc.): \_\_\_\_\_

Operating Pressure (PSIG) _____	<b>Other System Components:</b>
Operating Temperature (°F) _____	Compressor: Recipricating    Screw    Centrifugal    H.P.
Flow Requirement (SCFM) _____	Aftercooler _____
Connections (NPT/Flange) _____	Centrifugal Separator _____
Maximum Pressure (PSIG) _____	Receiver _____
Maximum Temperature (°F) _____	Dryer _____
Type of Oil _____	Other _____

Performance Efficiency:  
\_\_\_\_\_ Coalescer (Aerosol Removal)  
\_\_\_\_\_ Aerosol Retention (micron) \_\_\_\_\_  
  
\_\_\_\_\_ Particulate (particle interception)  
\_\_\_\_\_ Solid Retention (micron) \_\_\_\_\_  
  
\_\_\_\_\_ Carbon Adsorbtion (vapor removal)

Materials of Construction \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Corrosion Allowance \_\_\_\_\_

Accessories:

_____ Auto Drain	_____ Differential Pressure Indicator (DPI)
_____ Drain Valve	_____ Mounting Bracket
_____ Timer	_____ Flange Adapter (ASME)
_____ Visible Sump	_____ Element Frame Kit (ASME)

Potential Sales Volume (\$Annually) \_\_\_\_\_

Known Competition \_\_\_\_\_

Notes \_\_\_\_\_

Signature \_\_\_\_\_

SE09



# Fax

<b>To:</b> Centro, Inc.	<b>From:</b>
<b>Fax:</b> 901-357-1379	<b>Pages:</b>
<b>Phone:</b> 800-344-3286	<b>Date:</b>
<b>Re:</b>	<b>CC:</b>

Please fill out this specification form and fax to one of the three locations:

Memphis: 901-357-1379

Little Rock: 501-835-2277

Nashville: 615-255-2212