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Company:	Division:	Building:
Titel:	Forename:	Surname:
E - Mail:	Phone:	Fax:
Street:	Post area code:	City:
Country:	Date:	Project:

## PROCESS INFORMATION

	Fluid 1	Fluid 2	Fluid 3	Fluid 4
Product Name:				
Mass flow, minimal:	[kg/h]			
Mass flow, normal:	[kg/h]			
Mass flow, maximal:	[kg/h]			
Density (Gas: Norm condition):	[kg/m³]			
Viscosity:	[mPa s]			
Pressure:	[bar (a)]			
Temperature:	[C°]			
Please specify maximum possible pressure drop:				[mbar]
Are the fluids soluble?				
If yes – please specify the requested variation coefficient:				[%]
If no – please specify droplet (Bubble) diameter with the corresponding surface tension:				[µm] [N/m]
Mixer orientation:	Flow character:	Dosing lance		

## MECHANICAL INFORMATION

Material:	Flanges acc. to:	Scheduled pipe dimension:
Design pressure of product pipe:		[bar]
Design temperature of product pipe:		[C°]
If requested		
Design pressure of heat jacket for cooling/ heating product:		[bar]
Design temperature of heat jacket for cooling/ heating product:		[C°]