

To:

FIPA GmbH | Germany

Fax +49 89 962489-11 | info@fipa.com

FIPA Inc. | USA

Fax +1 919 5730871 | sales.us@fipa.com

FIPA Ltd. | Thailand

Fax +66 2 16870-37 | sales.th@fipa.com

From:

Company: _____

Name: _____

Street: _____

City/Country/Zipcode: _____

Phone/Fax: _____

Email: _____

Industry: _____

Vacuum Pumps

Please answer the following questions carefully so we can select the vacuum pump best suited for your purpose. Please note that you can type in the document; printing out is not necessary. Please e-mail or fax this form back to us.

1. Please specify the branch of industry in which the pump will be used

- Packaging Food & beverage Glass
 Graphic arts Wood-working Plastic
 Marble/Stone Metal/sheet metal

2. What will the pump be used for?

- Handling Degasification of silicon mixture
 Vacuum Clamping Degasification of synthetic resin
 Degasification of laminated materials
 Evacuating tanks: Liters: _____ / Time: _____

3. Location of pump

- Indoor Outdoor Mobile
 Temperature range: _____ to _____ °C _____ to _____ °F)
 Relative humidity (e.g. tropical areas) _____ %

4. Medium to be sucked

- Dry air Humid air Oily air Water vapor
 Water Grinding sludge
 Aggressive gases (which): _____
 Temperature of medium: _____ °C (_____ °F)

5. Suction capacity: _____ m³/h or _____ NL/min

6. Vacuum Level (in continuous operation):

_____ mbar (_____ inHg) or _____ % vacuum

7. Duty cycle

- Continuous operation 8-10 h/day 16-18 h/day
 Intermittent operation:
 Operating interval of pump? _____

8. Back diffusion

Must leakage of the medium be prevented when the pump is switched off? (Check valve for oil lubricated vacuum pump) Yes No

9. Maintenance of vacuum

Must the vacuum maintained for a certain period (e.g. for putting down loads in case of power failure)?
 Yes No

10. Vacuum tank

- Available (_____ liters) Desired (_____ liters)
 Capacity suggested by FIPA

11. Maintenance

- Is the pump accessible for maintenance? Yes No
 Is sufficient cooling available for the pump? Yes No
 Is remote monitoring of pump condition possible? (e.g. oil level)
 Yes No

12. General information if new pump is desired:

- Only one pump is required
 Number of pumps needed per year: _____
 Delivery desired within: _____
 Replacement

13. In case of replacement please fill out

- Brand until now _____ Suction capacity _____
 Vacuum level _____ Electricity supply _____