DFT® Severe Service Control Valves - Application Data and Sizing Sheet

Phone: 800-206-4013, 610-363-8903 Fax: 610-524-9242

CUSTOMER: _____ DUE DATE: _____

ADDRESS: _____ INQUIRY #: _____

_____ REQUIRED DELIVERY: _____

CONTACT: _____ ***PHONE***: ( ) _____ FAX: ( ) _____

VALVE SERVICE _____ VALVE TAG #: _____

PART I - VALVE SPECIFICATIONS

- ***NORMAL VALVE USE***: ON/OFF:_____ CONTROL:_____
- ***Inlet Size***: _____ ***Outlet Size***: _____ ANSI Class: _____ End connections: _____
- Pipe Material: _____ Pipe Schedule: Inlet:_____ Outlet: _____
- Body Material: ASTM A105 _____ A182-F22_____ 316SS_____ Other: _____
- Trim Material: Standard per DFT Bulletin: _____ Other: _____
- Packing Material: Teflon:_____ Graphite:_____ Other: _____
- Seals: EPT O-rings:_____ 304SS/Graphite Gaskets: _____ Other: _____

PART II - SIZING DATA

- ***FLOW MEDIA***: Liquid: _____ Gas: _____ Steam: _____ Other: _____
- SPEC GRAVITY (Liquid/Gas): _____@ _____º F SPEC VOLUME (Steam):_____@ _____º F
- VAPOR PRESSURE (Liquid/Gas):_____@ _____º F VISCOSITY: _____@ _____º F

	UNITS (psig, º F, #/hr,etc.)	DESIGN CONDITIONS	OPERATING CONDITIONS			VALVE SIZING CONDITIONS
			MAXIMUM	NORMAL	MINIMUM	
INLET (P1)						
OUTLET (P2)						
TEMP (T)						
FLOW						

- ***MAXIMUM PRESSURE DIFFERENTIAL VALVE MUST OPEN OR CLOSE AGAINST: _____PSIG***

PART III - ACTUATOR

- **TYPE:**

PNEUMATIC: Diaph:___ Piston:___ HYDRAULIC:___ ELECTRIC:___ MANUAL:___ OTHER:_____

- **POWER SOURCE:**

___ AIR: Min psig:_____

___ ELECTRIC: Volts:_____ AC:__ DC:__ NEMA _____ Enclosure

___ HYDRAULIC: Psig: _____ Capacity (GPM): _____

- **ACCESSORIES:**

___MANUAL OVERRIDE: Top: _____ Bottom: _____

___***POSITIONER***: Type: _____ Model: _____ ***Signal***: 3-15 psig _____ 4-20mA: _____

___SOLENOID: Volt: _____

___LIMIT SWITCHES: Qty: _____ Volt: _____ DPDT: _____ SPST: _____ Open: ___ Closed: ___

___TRANSDUCER: In: _____ Out: _____

___AIR FILTER/REG: With gauges: _____ Without gauges: _____

- **OTHER:**

Upon increase in positioner input signal, valve MUST: Open: _____ Close: _____

Upon loss of power source, valve MUST fail: Open: _____ Close: _____ Other: _____

Upon loss of control signal, valve MUST fail: Open: _____ Close: _____ Other: _____

PART IV - VALVE

- TYPE: HI-100 w/QCT: Top: _____ Bottom: _____ Ultra-Trol: _____ Uniflo: _____

Prepared By: _____ Date: _____ Phone: _____ Fax: _____

(Bold italicized items are required to properly select a DFT control valve)