

STEAM DESUPERHEATER SPECIFICATION SHEET

Please provide the requested information by E-mail to sales@proconsystems.com or call 403-255-2921

COMPANY NAME: _____

CONTACT: _____

ADDRESS: _____

CITY, PROVINCE: _____

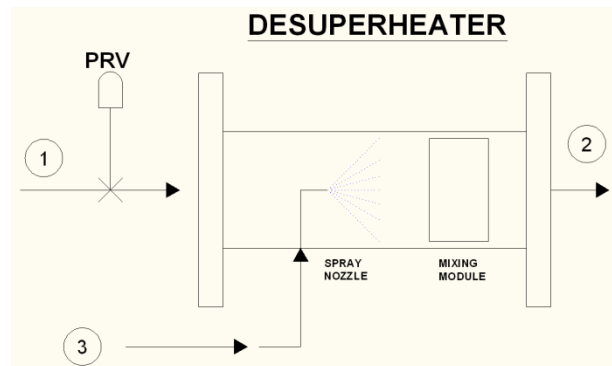
PHONE NUMBER: _____

E-MAIL: _____

1 SUPERHEATED STEAM			
Flow Rate:	Max:		pph
	Min:		pph
Pressure:			psig
Temperature:			°F
Line Size:			in.

2 DESUPERHEATED STEAM		
Pressure:		psig
Temperature:		°F
Line Size:		in.

3 COOLING WATER		
Pressure:		psig
Temperature:		°F
Line Size:		in.



Construction Requirements			
Mounting:	<input type="checkbox"/> Vertical	<input type="checkbox"/> Horizontal	
Connections:	1. Main Line	<input type="checkbox"/> ___ lb. flanged	<input type="checkbox"/> Butt Weld
	2. Cooling Water:	<input type="checkbox"/> ___ lb. flanged	<input type="checkbox"/> Butt Weld <input type="checkbox"/> NPT
Design Pressure:	_____ psig	Design Temperature:	_____ °F
Materials of Construction:			
Special Requirements, Codes, Etc.:			
Comments:			