



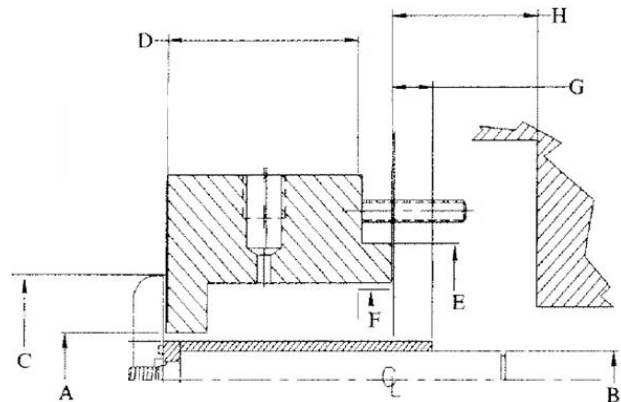
Seal Questionnaire

WMP-6010-SLQ-1.0-12-02-2013

Customer:		Date:	
Application:		Location:	

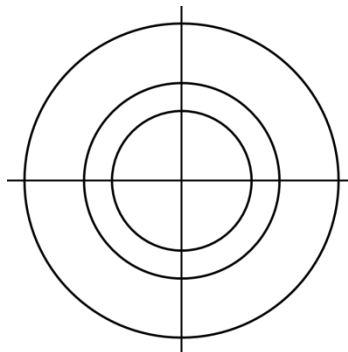
Equipment Dimensions

A. Sleeve OD:
B. Shaft OD:
C. Box Bore:
D. Box Depth
E. OD Pilot:
F. Pilot Length:
G. End of Sleeve:
H. Nearest Obstruction:



Location of:

Bolt Pattern
 Bolt Spacing
 Bolt Size



Bolting

Bolt Pattern:
Spacing:
Bolt Size:

Equipment Specifications

Pump <input type="checkbox"/>
Mixer <input type="checkbox"/> # Stages _____
Manufacturer:
Model No.:
Shaft Speed:

Product Specifications

Product:
Temperature: F / C
Specific Gravity:
Suction Pressure: PSI / Bar
Discharge: PSI / Bar
Stuffing Box: PSI / Bar
Product Corrosive? Yes <input type="checkbox"/> No <input type="checkbox"/>
Product Crystallize? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are Solids Present? Yes <input type="checkbox"/> No <input type="checkbox"/>