

CHAGRIN FALLS OHIO USA 44022 TEL 800/543-1043 FAX 440/543-4930

## GRAPHITE RUPTURE DISK SPECIFICATION SHEET

QUOTE  ORDER

DATE: \_\_\_\_\_

**LINES 1 THROUGH 6 MUST BE COMPLETED**

1. QUANTITY: \_\_\_\_\_
2. STYLE: (CIRCLE) MONO INVERTED DUPLEX TWO-WAY OTHER: \_\_\_\_\_
3. DISK SIZE: (NOMINAL I.D.) INCHES: \_\_\_\_\_ OTHER: \_\_\_\_\_
4. FLANGE: (CIRCLE) 150# 300# ANSI OTHER: \_\_\_\_\_
5. BURST RATING: PSIG: \_\_\_\_\_ OTHER: \_\_\_\_\_
6. TEMPERATURE RATING: (CHECK)  72°F  \*\*OTHER: \_\_\_\_\_ (CIRCLE) °F °C  
**\*\*MUST CHECK ONE IF TEMPERATURE IS OTHER THAN 72 °F (+40°F TO +100°F):**  
 COMPENSATED FROM A CHART  TESTED IN AN OVEN  TESTED IN A COLD BOX  
 (APPLIES ABOVE +100°F) (APPLIES BELOW +40°F)

### OPTIONS

7. VACUUM SUPPORT: (CHECK)  YES  NO  
NOTE: ONLY NEEDED WHEN BURST RATING IS LESS THAN 25 PSIG AND FULL VACUUM IS EXPECTED.  
 VACUUM SUPPORTS ARE AVAILABLE **ONLY** ON MONO STYLE DISKS.
8. ARMOR: (CHECK)  YES  NO  
NOTE: ARMOR IS STRONGLY SUGGESTED FOR ADDED RELIABILITY AND SAFETY ESPECIALLY FOR LOW & HIGH BURST RATINGS.  
 CARBON STEEL ARMOR IS SUPPLIED AS STANDARD, 316 STAINLESS STEEL IS AVAILABLE UPON REQUEST. **NOTE "316 S.S." ON LINE #15.**
9. T.F.E. COATING: (CHECK)  YES  NO  PRESSURE SIDE  VENT SIDE  BOTH SIDES
10. LINER: (CHECK)  YES  NO  PRESSURE SIDE  VENT SIDE  BOTH SIDES  
(CHECK MATERIAL)  TFE  FEP  PFA  KYNAR  OTHER: \_\_\_\_\_
11. INSULATED DISK: (CHECK)  YES  NO NOTE: +431°F TO +700°F DISKS ARE SUPPLIED AS A COMPLETE ARMORED UNIT WITH INSULATION AND GASKETS
12. GASKETS: (CHECK)  YES  NO (CHECK)  ATTACHED  LOOSE  
(CIRCLE MATERIAL)  
**PRESSURE SIDE:** NON-ASBESTOS SOLID T.F.E. NEOPRENE T.F.E. ENVELOPE  
 OTHER: \_\_\_\_\_  
**VENT SIDE:** NON-ASBESTOS SOLID T.F.E. NEOPRENE T.F.E. ENVELOPE  
 OTHER: \_\_\_\_\_
13. ZENSOR™: (CHECK)  YES  NO RUPTURE DISK BURST SENSOR
14. ASME SEC. VIII COMPLIANCE: (CHECK)  YES  NO

SPECIAL INFORMATION: \_\_\_\_\_

PART NUMBER: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ PURCHASE ORDER NUMBER: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ SHIP VIA: \_\_\_\_\_

ADDRESS- BILL TO: \_\_\_\_\_ SHIP : \_\_\_\_\_

\_\_\_\_\_ SHIP : \_\_\_\_\_

PH #: \_\_\_\_\_ FAX#: \_\_\_\_\_ INITIALS \_\_\_\_\_