



TANK HEATING SPECIFICATION SHEET

Please provide the requested information by E-mail to info@mxrtech.com or call 1-951-303-4600.

COMPANY NAME: _____

CONTACT: _____

ADDRESS: _____

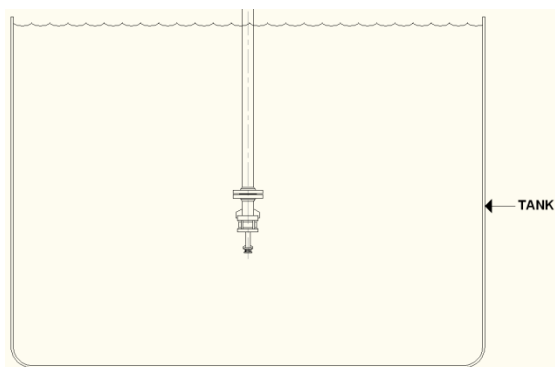
CITY, STATE, ZIP CODE: _____

PHONE NUMBER: _____

E-MAIL: _____

Steam Conditions		
Steam:		
Pressure:		psig
Temperature:		°F
Flow Rate:		#/hr.

Tank Contents		
Liquid		
Viscosity:		cP
Specific Gravity:		
Initial Temp.:		°F
Specific Heat:		BTU/# °F
Volume of Liquid:		gal.
Final Temperature:		°F
Tank Turn Over Time:		min.



Construction Requirements	
Mounting Orientation:	<input type="checkbox"/> Vertical <input type="checkbox"/> Side Tank Operating Pressure: _____ psig
Tank Shape & Dimensions:	<input type="checkbox"/> Rectangular or Square Length _____ ft. Width _____ ft. Height _____ ft. <input type="checkbox"/> Cylindrical Height or Length _____ ft. Diameter _____ ft.
Minimum Liquid Level: _____ ft.	If solids are present, what is max. particle size? _____ microns
Maximum Liquid Level: _____ ft.	
Type Connections:	<input type="checkbox"/> NPT <input type="checkbox"/> _____ lb. flanged <input type="checkbox"/> Other _____
Construction Material:	<input type="checkbox"/> 316 Stainless Steel <input type="checkbox"/> Carbon Steel <input type="checkbox"/> Other _____
Comments:	