



CASTLE PUMPS LTD

Your process delivered.

PUMP SPECIFICATION FORM

Please return to: sales@castlepumps.com

1. Application Details -

Please fill in the table to the best of your knowledge.

Application:	
Liquid:	
Pump Orientation:	Horizontal Vertical Immersed
Flow Rate:	
Inlet Pressure:	
Outlet Pressure:	
Head/Pressure:	
Specific Gravity:	
Viscosity:	
Temperature:	
Voltage:	
Frequency:	
IP Protection:	

2. Hygiene Requirements -

If you don't require a hygienic pump, then please move on to question 3.

Please answer to the best of your knowledge.

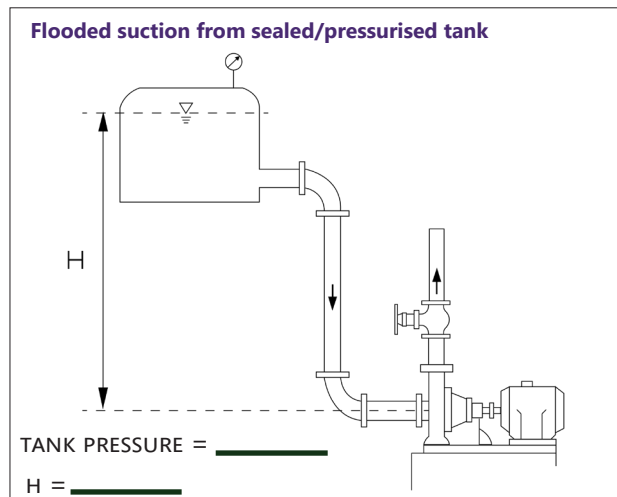
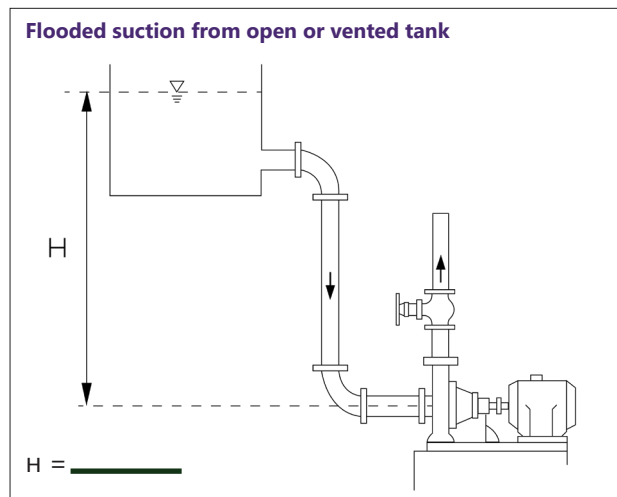
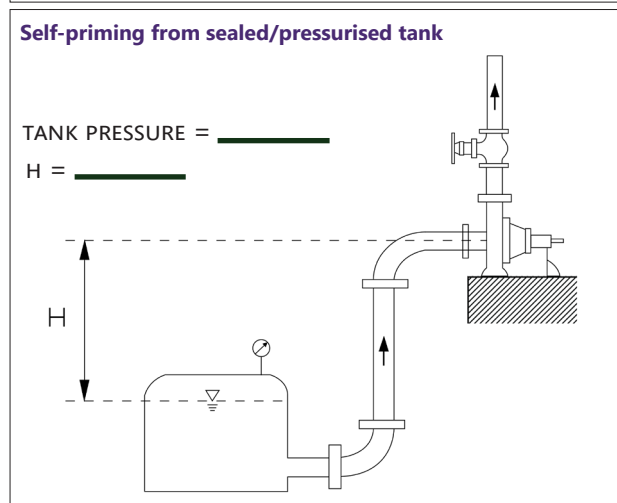
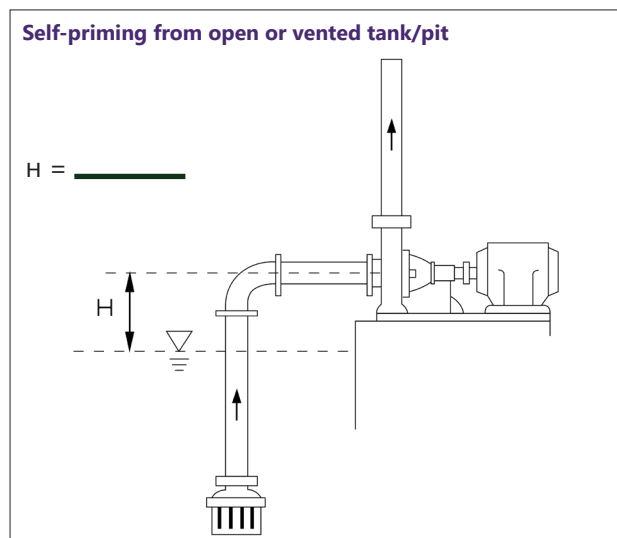
How will the pump be cleaned?
How will the motor be cleaned? Does it need to be CIP?
Will the pump be dismantled for cleaning?
Motor requirements: IP Rating Jet Wash Motor Shroud
Certification: 3A EHEDG Self-Certification No Certification
Is surface finish required?
Is a drainage port required?

PTO →

(please turn over)

3. Suction Conditions -

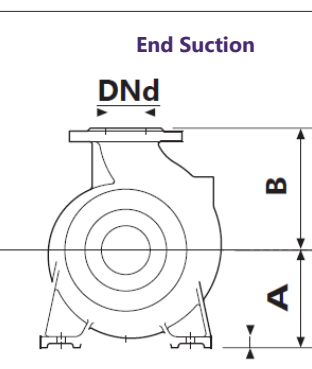
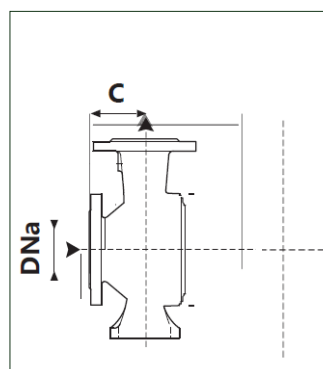
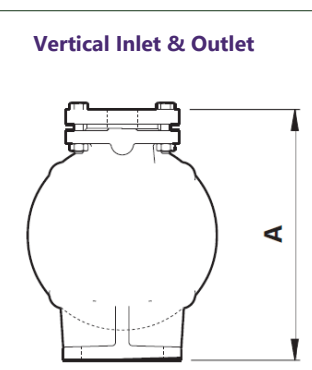
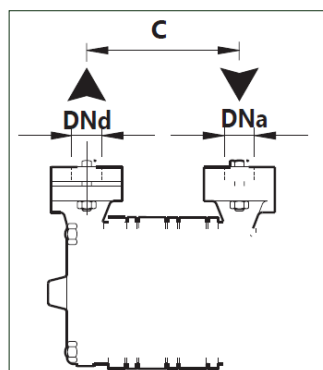
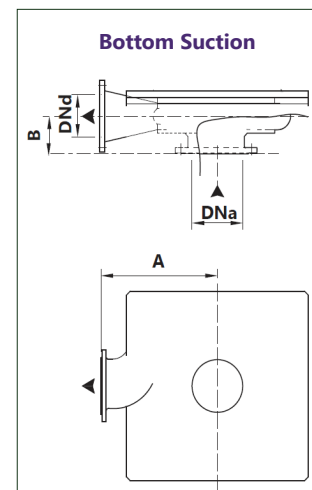
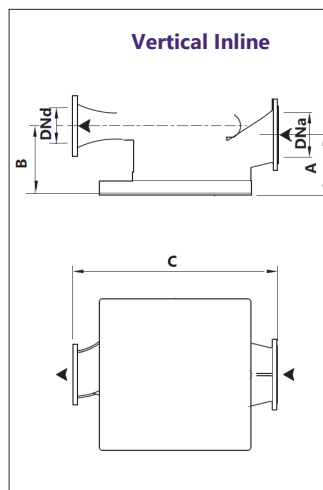
Select **circular box** to indicate type of application, and please specify **dimension H** & **tank pressure** (where applicable) on the lines provided.



4. Installation Type -

Select **circular box** to indicate installation type, and please fill in the table referring to the diagrams where necessary.

Dimension A:	
Dimension B:	
Dimension C:	
DNa Suction Diameter:	
DNd Discharge Diameter:	
Flange Type:	
Flange Rating:	



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