



## Excess Flow Valve Specification Sheet

Date		<b>For Quotation:</b>	P.O. Box 1957
Company Name		Please complete and return to Total Valve Systems	Broken Arrow, OK 74013
Contact Name		Attention Gayle Peltier	Ph #: (918) 258-7035
Phone		<a href="mailto:gpeltier@totalvalve.com">gpeltier@totalvalve.com</a>	Fax #: (918) 251-6426
Email		<a href="mailto:sales@totalvalve.com">sales@totalvalve.com</a>	<a href="http://www.totalvalve.com">www.totalvalve.com</a>
<b>GENERAL</b>	1	Service	
	2	Location	
	3	Equipment Number	
	4	Quantity	
	5	Area Classification	
<b>VALVE</b>	6	Model	
	7	Size of Valve	
	8	End Connections (threaded, double flange, wafer)	
	9	Class of Service	
	10	External Manual Bypass System    Yes _____ No _____	
	11	Manufacturer	
<b>SERVICE CONDITIONS</b>	12	Media:	
		Liquid _____ Gas _____ Vapor _____	
	13	Specify Gravity of Media	
	14	Desired Closing Flow Rate (GPM/SCFM)	
	15	Normal Operating Flow Rate (GPM/SCFM)	
	16	Minimum Flow Rate (GPM/SCFM)	
	17	Direction of Media Flow	
	18	Inlet Pressure (PSIG)	
	20	Outlet Pressure (PSIG)	
	21	Inlet Temperature (F°)	
22	Direction of Valve    Vertical _____ Horizontal _____		
<b>Line</b>	23	Pipe Line Size	
	24	Pipe Schedule	
<b>Materials</b>	25	Materials	
		Body:	
		Trim:	
		Seat:    Soft _____ Metal: _____	
		Spring	
26	Application of Valve		
<b>Additional Requirements/Notes:</b>          			
<b>PLEASE PROVIDE DATA/SPEC SHEETS PER EACH VALVE</b>			

