

Customer Information:

Company Name:	<input type="text"/>	Country:	<input type="text"/>
Contact Name:	<input type="text"/>	E-Mail Address:	<input type="text"/>

Is it a replacement? Please, provide previous rupture disc information:

DonadonSDD Lot number:	<input type="text"/>	Purchase Order n°:	<input type="text"/>
Quantity Required:	<input type="text"/>	Note:	<input type="text"/>

NEW Rupture Disc Selection:

Tag n°:	<input type="text"/>	Rupture Disc Quantity:	<input type="text"/>
Size:	<input type="text"/>	Rupture Disc Material:	<input type="text"/>
Burst Set Pressure:	<input type="text"/>	Unit of Measure:	<input type="text"/>
Burst Set Temperature:	<input type="text"/>	Unit of Measure:	<input type="text"/>

Do you need to protect your plant also from de-pressure / vacuum? If **YES**, please fill out the data below:

Burst Set DePressure:	<input type="text"/>	Unit of Measure:	<input type="text"/>	<i>You can find more information on our DOUBLE WAY disc here</i>
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Process Data:

Will Gas/Steam or Liquid burst the Rupture Disc? Gas Steam Liquid Media:

Do you need a flow calculation? If **YES**, please fill out the data below:

Flow Rate:	<input type="text"/>	Unit of Measure:	<input type="text"/>
If the MEDIA is GAS, please provide the Molecular Weight:	<input type="text"/>	If the MEDIA is LIQUID, please provide the:	Density: <input type="text"/>
			Viscosity: <input type="text"/>

Equipment Design Pressure(MAWP):	<input type="text"/>	Unit of Measure:	<input type="text"/>
What Max Operating Pressure will the disc see while in service?	<input type="text"/>	Unit of Measure:	<input type="text"/>
and a what Operating Temperature?	<input type="text"/>	Unit of Measure:	<input type="text"/>
Do you have information regarding the type of operating pressure?	<input type="text"/>		If cycling or pulsating, what is the Frequency? <input type="text"/>
Will the disc see any Vacuum?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Will the disc see any Back Pressure?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If Yes, How Much? <input type="text"/> Unit of Measure: <input type="text"/>

Additional requirement on rupture disc:

Is UD Mark (ASME VIII) required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Is Non-Fragmenting design required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is there a safety valve downstream of the disc?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Is a Sanitary Application?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is an 'Alarm sensor indicator' or 'burst sensor' required for the bursting disc assembly?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>					

Data required for Holder selection:

Holder Quantity:	<input type="text"/>	Holder Material:	<input type="text"/>
<i>Please, communicate more information regarding:</i>			
Flanges and Rating:	<input type="text"/>	Or Connection Type:	<input type="text"/>

Note: