

Inquiry form sheet: Liquid-Liquid heat exchanger

Company	City
Contact Name	Country
Street Address	Phone
Zip code	Fax
Email	

* Mandatory input

Hot Fluid				
Liquid Composition				
Application data	Value	Unit	AE Unit	Other unit
Flow rate*		m ³ /h	<input type="checkbox"/> GPM	<input type="checkbox"/>
		kg/h	<input type="checkbox"/> lb/h	<input type="checkbox"/>
Inlet temperature*		°C	<input type="checkbox"/> °F	<input type="checkbox"/>
Outlet temperature		°C	<input type="checkbox"/> °F	<input type="checkbox"/>
Operating pressure		mbar	<input type="checkbox"/> psig	<input type="checkbox"/>
Max. pressure drop		mbar	<input type="checkbox"/> psig	<input type="checkbox"/>
Transferred Power		kW	<input type="checkbox"/> BTU/h	<input type="checkbox"/>
Physical data	Value	Unit	AE Unit	Other unit
Specific gravity		kg/m ³	<input type="checkbox"/> lb/gal	<input type="checkbox"/>
Specific heat		kJ/kg	<input type="checkbox"/> BTU/lb°F	<input type="checkbox"/>
Viscosity		m ² /s	<input type="checkbox"/> cP	<input type="checkbox"/>

Cold Fluid				
Liquid Composition				
Application data	Value	Unit	AE Unit	Other unit
Flow rate*		m ³ /h	<input type="checkbox"/> GPM	<input type="checkbox"/>
		kg/h	<input type="checkbox"/> lb/h	<input type="checkbox"/>
Inlet temperature*		°C	<input type="checkbox"/> °F	<input type="checkbox"/>
Outlet temperature		°C	<input type="checkbox"/> °F	<input type="checkbox"/>
Operating pressure		mbar	<input type="checkbox"/> psig	<input type="checkbox"/>
Max. pressure drop		mbar	<input type="checkbox"/> psig	<input type="checkbox"/>
Transferred Power		kW	<input type="checkbox"/> BTU/h	<input type="checkbox"/>
Physical data	Value	Unit	AE Unit	Other unit
Specific gravity		kg/m ³	<input type="checkbox"/> lb/gal	<input type="checkbox"/>
Specific heat		kJ/kg	<input type="checkbox"/> BTU/lb°F	<input type="checkbox"/>
Viscosity		m ² /s	<input type="checkbox"/> cP	<input type="checkbox"/>