

**Contact Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_  
**Company Name:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Application:** \_\_\_\_\_ **Type of Industry:** \_\_\_\_\_

### Pipe Specifications

<b>Diameter:</b> _____	<b>Length:</b> _____	<b>Material:</b> _____
<b>Wall Thickness:</b> _____	<b>Wall Type:</b> <input type="checkbox"/> Single <input type="checkbox"/> Double	
<b>Insulation Type:</b> <input type="checkbox"/> Fiberglass <input type="checkbox"/> Calcium Silicate <input type="checkbox"/> Urethane Foam <input type="checkbox"/> Mineral Fiber <input type="checkbox"/> Foamed Glass		
<input type="checkbox"/> Per Lite <input type="checkbox"/> Other _____		
<b>Insulation Thickness:</b> _____		
<b>How Many:</b> Valves _____    Flanges _____    Supports _____    Pumps _____		
45° elbows _____    90°elbows _____    Tee's _____		

### Location

<b>Pipe location:</b> <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors	<b>If outdoors what is the wind speed:</b> _____
<b>Minimum ambient temperature:</b> _____	
<b>Area Classification:</b> <input type="checkbox"/> Ordinary <input type="checkbox"/> Hazardous	<b>Class:</b> _____ <b>Division:</b> _____ <b>Group:</b> _____

### Product Specifications

<b>Product Name:</b> _____	<b>Specific Heat:</b> _____
<b>Max/Min Exposure temps:</b> _____	<b>Density:</b> _____
<b>Corrosive:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Flow Rate:</b> _____
<b>Beginning State</b> <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas	<b>Ending State</b> <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas
<b>Note: if beginning state and ending state are different heat of fusion must be provided</b>	

### Temperature

<b>Process start up temperature:</b> _____	<b>Process maintenance temperature:</b> _____
<b>Time required for heat up:</b> <input type="checkbox"/> 1 hour <input type="checkbox"/> 2 hours <input type="checkbox"/> 4 hours <input type="checkbox"/> 8 hours <input type="checkbox"/> 12 hours <input type="checkbox"/> 24 hours	
<input type="checkbox"/> Other: _____	

### Power Requirements

<b>Operating voltage:</b> <input type="checkbox"/> 120 <input type="checkbox"/> 208 <input type="checkbox"/> 240 <input type="checkbox"/> 277 <input type="checkbox"/> 480 <input type="checkbox"/> Other: _____	
<b>Phase:</b> <input type="checkbox"/> Single <input type="checkbox"/> 3 Phase Wye <input type="checkbox"/> 3 Phase Delta	<b>Circuit breaker size:</b> _____

**Cable type preferred:**     Constant Wattage     Self-Regulating     Recommend

**Comments:** \_\_\_\_\_  
 \_\_\_\_\_

Although Self-Regulating cable can be used without a temperature controller, if a particular temperature is required then a temperature controller must be used. All Constant-Wattage cable applications require temperature control. BriskHeat® can provide this control.

**Should BriskHeat® recommend a controller for this application?**     Yes     No

**Customer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If you have any questions in completing the above checklist, please contact factory.