SPECIFICATION SHEET

	Item		PROJECT:								Company:	
	Tag		Made By:									
	1	Fluid										
	2	**CONDITIONS**	Minimum	Normal	Maximum	Units					Address:	
	3	Flow										
	4	Differential Pressure										
F	5	Temperature									Contact:	
L	6	Viscosity										
U	7	Critical Pressure										
I	8	Vapor Pressure									Fax. No.:	
D	9	Noise Level DBA										
	10	Calculated Cv										
	11	Installed Cv									Tel. No.:	
	12	Shut-off Pressure										
	13	Specific Gravity										
	14	Identification										
G	15	Service										
E	16	Line No.										
N	17	Line Size										
	18	Schedule		19 Class			20 Material					
	21	Valve Type		Model		**ACTUATOR**						
	22	Size				34 Type			Model			
	23	Guide				35 Spring Range						
	24	Connection/Pressure	ANSI			36 Flow To	☐OPEN ☐CLOSE					
	25	Body Material				37 Fail Position	☐OPEN ☐CLOSE ☐ LAST					
B	26	Packing				38 Modulating On-Off	☐MOD ☐ON-OFF					
O	27	Yoke	☐EXTENDED ☐BELLOWS			39 Operating Pressure						
D	28	Characteristic	☐LINEAR ☐EXP. ☐Q-OPEN			40 Maximum Pressure						
Y	29	Trim Material				41 Manual Override						
	30	Seat Material										
	31	Shaft Material										
	32	Leakage Rate	Class									
	33	Installation	☐ VERTICAL ☐HORIZONTAL									
C	42	**POSITIONER**	Manufacturer			Model						
	43		Input Signal									
O	44	Valve Open at		mA		PSI		Bar				
	45	Valve Closed at		mA		PSI		Bar				
N	46	Min. Pressure		Output signal		☐YES ☐NO						
T	47	Classification										
	48	**ACCESSORIES**	Manufacturer	Model	Rating	Volts		Amps		Approvals		
R	49	Limit Switch										
	50	Solenoid										
O	51	Filter/Reg/Lub										
	52	Speed Controls										
L	53	Volume Booster										
	54	Position Transmitter										
S	55	Tag / Material										
	56	Other										

Please print this form, fill in the required information and FAX to D.M. Valve Inc. 514-331-3924 or toll free at 1-877-217-6025