



BITZER US, INC
 4080 Enterprise Way
 Flowery Branch, GA 30542
 (p) 770-503-9226
 (f) 770-503-9440

PRESSURE VESSEL REQUEST FORM

CONTACT INFORMATION

REQUESTED BY _____
 CUSTOMER _____
 CUSTOMER CITY, STATE _____
 CUST CONTACT PERSON _____
 CONTACT PHONE / EMAIL _____
 PROJECT LOCATION _____

DATE _____
 CUSTOMER REFERENCE NUMBER _____
 or PROJECT NAME _____

DESIGN CONDITIONS

REFRIGERANT _____
 SST (Evaporating Temp) _____ °F LIQUID SUBCOOLING _____ °F
 SCT (Condensing Temp) _____ °F SUPERHEAT _____ °F
 Compressor Model _____ OR Mass Flow _____ lb/h

MAIN SELECTION

SHELL AND TUBE CONDENSER INFO

Total Heat Rejection: _____ kBtu/hr

Water _____ Type
 Ethylene Glycol _____ %
 Propylene Glycol _____ %

Entering Fluid Temp: _____ °F
 Available Flow Rate: _____ GPM

OPTIONAL:

Max Pressure Drop: _____ psi (default = 10psi)
 Desired Leaving Fluid Temp: _____ °F (default = EFT + 10°F)

DX SHELL AND TUBE EVAPORATOR INFO

Series: STEM (Std) STEH (High Pressure)
 # of Circuits: 1 (030 - 120 only) 2 (All Sizes)

Evaporator Capacity: _____ kBtu/hr

Water _____ Type
 Ethylene Glycol _____ %
 Propylene Glycol _____ %

Entering Fluid Temp: _____ °F
 Available Flow Rate: _____ GPM

OPTIONAL:

Desired Leaving Fluid Temp: _____ °F (default = EFT - 10°F)

Insulation:

None 3/4" (std) 1 1/2" UV rated

LIQUID RECEIVERS

Orientation: Horizontal Vertical

Pump Down Capacity: _____ lb

Connections:

Std Rotolock

Please specify the position of the water connections, referring to the diagram below:

Left Top Right

