



Compressed Air System Installation Analysis

Please fill out this form as completely as possible and send to Advanced Filtration

Name _____		Date _____	
Company _____		Division _____	
Address _____			
City _____	State _____	Zip _____	
Title _____		Ph _____	
Email _____		Fax _____	

1 COMPRESSOR DATA					
Manufacturer	Type	HP	SCFM	PSIG	
				Min	Max
A)					
B)					
C)					

2 AFTERCOOLER DATA			
Location:	<input type="checkbox"/> Indoors	<input type="checkbox"/> Outdoors	
Type:	<input type="checkbox"/> Water-cooled	<input type="checkbox"/> Air-cooled	
Water Source:	<input type="checkbox"/> City	<input type="checkbox"/> Well	<input type="checkbox"/> Other _____

SIZE (SCFM)	INLET AIR TEMP	COOLING MEDIUM			OUTLET AIR TEMP
		AIR or WATER	MIN TEMP	MAX TEMP	
A)	°F		°F	°F	°F
B)	°F		°F	°F	°F
C)	°F		°F	°F	°F

3 PIPING TO RECEIVER			
Location:	<input type="checkbox"/> Indoors	<input type="checkbox"/> Air Conditioned Area	
	<input type="checkbox"/> Outdoors	<input type="checkbox"/> Underground	
Insulated:	<input type="checkbox"/> Yes <input type="checkbox"/> No		

LENGTH	PIPE DIAMETER	AMBIENT TEMPERATURE	
		MIN	MAX
A)		°F	°F
B)		°F	°F
C)		°F	°F

4 RECEIVER DATA		
Location:	<input type="checkbox"/> Indoors	<input type="checkbox"/> Outdoors <input type="checkbox"/> Other _____

VOLUME IN GALLONS	AMBIENT TEMPERATURE	
	MIN	MAX
A)	°F	°F
B)	°F	°F
C)	°F	°F

5 PIPING TO DRYER	
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Location: Indoors Air Conditioned Area
 Outdoors Underground
 Insulated: Yes No

LENGTH	PIPE DIAMETER	AMBIENT TEMPERATURE	
		MIN	MAX
A)		°F	°F
B)		°F	°F
C)		°F	°F

6 DRYER DATA	
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Location: DOWNSTREAM FROM AFTERCOOLER
 DOWNSTREAM FROM RECEIVER
 INDOORS OUTDOORS

Manufacturer	Type	Model	Operating	
			PSIG	Inlet Temp.
A)				
B)				
C)				

7 CONDITIONS, PROPOSED SITE	
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INDOOR TEMP _____°F MIN _____°F MAX
 OUTDOOR TEMP _____°F MIN _____°F MAX

AIR FLOW:
 First Shift _____ SCFM MIN _____ SCFM MAX
 Second Shift _____ SCFM MIN _____ SCFM MAX
 Third Shift _____ SCFM MIN _____ SCFM MAX

OPERATING PRESSURE:
 _____ PSIG MIN _____ PSIG MAX

ATMOSPHERIC CONDITIONS:
 Dusty (explain) _____
 Corrosive (explain) _____
 Hazardous (explain) _____

ELECTRICAL SERVICE AVAILABLE: Yes No
 _____ V _____ Ph _____ Hz _____ Amps

WATER SOURCE AVAILABLE:
 City Well Other _____

8 COMPRESSED AIR USAGE	
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GENERAL SHOP AIR - INDOORS _____ %
 GENERAL AIR USAGE - OUTDOORS _____ %
 INSTRUMENTATION & CONTROLS _____ %
 AIR CONDITIONED AREAS _____ %
 OTHER (explain) _____