



Questionnaire | Request a Quote

Name: _____ Date: mm / dd / yyyy _____

Company: _____

Address: _____

City: _____ State: _____ ZIP-Code: _____

Phone: _____ E-mail: _____

I am interested in:

_____ units of ViscoClean *(fill in number of units needed)*

Need Control Top: Yes _____ / No _____

If YES for Control Top, please select from following options:

>>Communication: _____ 24 VDC NPN
_____ 24 VDC PNP
_____ ASI-B
_____ Device Net

>>Function: _____ on / off
_____ modulating

Elastomer: _____ FKM
_____ EPDM

Need Weld-in flange GEA Tuchenhausen Model: TT50/40-01KKK-1.4404

Yes: _____ pcs *(will be part of delivery)*

No: _____ *(will be ordered through customer)*

Need Material Certificate: Yes _____ | No _____

Notes: _____

Please submit this form by fax: +1(559) 429-4228 or email: info@viscotec.com

ViscoTec, Inc.

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