



When completed please fax
back to:
(704) 399-4167
Or email to:
george@sethermal.com

Heated Hose Application Guide

Customer Name: _____
Address: _____
Contact: _____

1. Description of application (include type of equipment plus description of system):

2. Hose type and size, if known: _____ Overall length _____
(If size is unknown, specify fluid/material and flow rate) _____
3. Fitting requirements (size, material, type): _____
Input end: _____
Output end: _____
4. Material being conveyed and heated: _____
5. Material temperatures: _____ °F Max _____ °F Min
_____ °F Operating _____ °F Ambient
6. Pressures: _____ PSI Max Operating Vacuum? Yes No
7. Installation description (if possible, make sketch and attach):
Static bend radius: _____ Flexing application bend radius: _____

If flexing is involved, please specify frequency and amplitude of motion:

8. Special characteristics of conditions, etc.: _____

9. Heater requirements: _____ Volts _____ Watts _____ Amps
10. Temperature sensor: _____ Qty: _____
11. Hose outer cover: Type: _____ Color: _____
12. Operating environment: _____
13. Misc. _____
