

● Company (sender)



Data Sheet for Seamless Pressure Vessels

Please typewrite or use block letters

- Please complete in any case
- ◆ To be completed if applicable or required
- Required only for pressure vessels to be mounted on trucks

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Sales Department
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<p>● Country of destination _____</p>	<p>Limit sizes and weights</p> <p>◆ Maximum outside diameter _____ mm</p> <p>◆ Maximum length _____ mm</p> <p>◆ Maximum weight _____ kg</p>
<p>◆ Customer or user _____</p>	<p>Pressure vessels to be mounted on trucks</p> <p>○ Maximum length of vessel _____ mm</p> <p>○ Effective width for the vessels _____ mm</p> <p>○ Admissible maximum total weight of vessels per truck (excluding gas weight) _____ t</p>
<p>● Intended use</p> <p style="padding-left: 20px;"><input type="checkbox"/> stationary</p> <p style="padding-left: 20px;"><input type="checkbox"/> transportable</p> <p>● Service Position</p> <p style="padding-left: 20px;"><input type="checkbox"/> vertical</p> <p style="padding-left: 20px;"><input type="checkbox"/> horizontal</p>	<p>◆ Design of ends</p> <p>Type of connection _____</p> <p>According to enclosed sketch/drawing _____</p> <p>Valves _____</p>
<p>● Filling medium (e.g. type of gas) _____</p> <p>◆ Capacity for compressed gases _____ Nm³</p> <p>◆ Capacity for liquid gases _____ kg</p> <p>◆ Filling ratio _____ kg/l (for liquid gases)</p>	<p>Surface finish</p> <p>● Inner surface _____</p> <p>● Outer surface shot-blasted acc. to preparation grade B Sa 2½ of the Swedish standard SIS 05 59 00</p> <p>◆ Coating of outer surface _____</p>
<p>● Water capacity, in l _____</p>	<p>◆ Protection for transport</p>
<p>● Number of vessels _____ or total filling volume _____ (consider filling ration, if applicable)</p>	<p>◆ Other details, e.g. accessories, internally and externally mounted components, assembly of pressure vessels to</p> <p><input type="checkbox"/> see reverse</p> <p><input type="checkbox"/> sketch/drawing enclosed</p>
<p>● Design specification Edition _____</p>	
<p>● Inspection authority _____</p>	
<p>Pressure</p> <p>● Operating pressure _____ bar</p> <p>◆ Design pressure _____ bar</p> <p>◆ Test pressure _____ bar</p>	
<p>◆ Working temperature, in °C _____</p>	
<p>● Mode of operation <input type="checkbox"/> static <input type="checkbox"/> dynamic</p> <p>● If dynamic: Number of cycles _____</p> <p style="padding-left: 20px;">Load cycles max. _____ bar</p> <p style="padding-left: 20px;">min. _____ bar</p>	<p>Place and date _____</p> <p style="text-align: right;">Signature _____</p>

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