



Thermal Transfer Products
 5215 21st Street, Racine, WI. 53406
 Phone: (262) 554-8330
 Fax: (262) 554-8536
 Engineer Fax: (262) 554-9384
 www.thermaltransfer.com
 Email: ttpeng@thermasys.com

**PERFORMANCE REQUIREMENTS
 SHELL AND TUBE HEAT EXCHANGERS**
(For Liquid to Liquid heat exchangers)

Contact Name: _____ Telephone: _____ Date: _____
 Company Name: _____ Fax: _____
 Address: _____ Email: _____
 Type of Application: _____

Heat Load: _____ (HP) or (BTU's/Hr.) or (KW)
 or System (HP) or (KW) _____

Heat Exchanger Location: Return Line
 (Check One) Off Line (Kidney Loop)
 Other: _____

Shell Side (Hot Fluid):

Fluid: _____ SSU: _____ at _____ °F
 CP: _____ at _____ °C
 Flow Rate: _____ GPM or Liter/min.
 Entering Temperature: (if heat load not given) _____ °F or °C
 Desired Leaving Temperature: _____ °F or °C
 Maximum Allowable Pressure Drop: _____ PSI or Bar
 Operating Pressure: _____ PSI or Bar

Tube Side (Cold Fluid):

Fluid: _____
 Flow Rate: _____ GPM or Liter/min.
 Entering Temperature: _____ °F or °C
 Maximum Allowable Pressure Drop: _____ PSI or Bar
 Operating Pressure: _____ PSI or Bar

General Information:

Construction Code Requirements: _____
 Special Material Requirements: _____
 Special Fouling Requirements: _____
 Maximum Length Restriction: _____

Comments:

