

## FORM FOR ANALYSIS OR REPAIR OF MECHANICAL SEALS



Company Name	Vessel Name	Contact

### Pump Information

<b>Pump Manufacturer</b>	<b>Pump Type</b>
<b>Serial Number</b>	<b>Pump Service</b>
<b>Fluid ( Medium )</b>	<b>Temperature</b>
<b>RPM</b>	<b>Rotating from Motor side</b>
	CW <input type="checkbox"/>
	CCW <input type="checkbox"/>
<b>Cooling</b>	<b>Heating</b>
Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
No <input type="checkbox"/>	No <input type="checkbox"/>
<b>Suction Pressure</b>	<b>End Pressure</b>
<b>Shaft Diameter</b>	<b>Shaft Sleeve Diameter</b>