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INSULATED JOINT APPLICATION DATA SHEET

Date: _____ **Your Reference No** _____
Company _____ **Contact Info** _____
Email _____ **Tel** _____
Project Name _____ **End Use Location:** _____

<u>Required Information</u>	<u>Item 1</u>	<u>Item 2</u>	<u>Item 3</u>
Vessel / Pipe OD	_____	_____	_____
Matching Wall Thickness	_____	_____	_____
Matching Wall Grade*	_____	_____	_____
Design Pressure	_____	_____	_____
Taperbore or Thrubore	_____	_____	_____
Max Design Temp	_____	_____	_____
Min Design Metal Temp	_____	_____	_____
Standard or Double Groove	_____	_____	_____
Code (B31.8, B31.4, other)	_____	_____	_____
Material Certificaton	_____	_____	_____
On or Offshore Application	_____	_____	_____
Special NDE Requirements	_____	_____	_____
Pipe Pups Required	_____	_____	_____
Quantity Required	_____	_____	_____

(*) Material and Yield for Wetted Componets
(**) Refers to O-Ring Groove