

## Flue Gas Desulfurization Specification Sheet (U.S. Units)

### Contact Information

Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Country \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Your Reference No. \_\_\_\_\_

### End User Contact Information

End User Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Country \_\_\_\_\_

Inquiry Date \_\_\_\_\_  
 Date Quotation Required \_\_\_\_\_  
 Date Equipment Required \_\_\_\_\_  
 Firm Price  Budget Price

Scrubber No. \_\_\_\_\_

Scrubber Name \_\_\_\_\_

New or Existing Vessel?<sup>1</sup>    New    Existing  
 Unit \_\_\_\_\_

Existing Scrubber I.D.<sup>1</sup> (ft-in) \_\_\_\_\_  
 Manhole / Column Access I.D. (in) \_\_\_\_\_

Welding Permitted?    Weld To Tower Shell    Weld To Tower Attachments    No Welding Permitted

### Gas Data

	Normal Operating Case	Maximum Operating Case	Minimum Operating Case
Gas Flow Rate (lb/h)	_____	_____	_____
Gas Pressure (psia)	_____	_____	_____
Gas Temperature (°F)	_____	_____	_____
Density (lb/ft <sup>3</sup> )	_____	_____	_____
Viscosity (cP)	_____	_____	_____

### Liquid Data

Liquid Flow Rate (lb/h)	_____	_____	_____
Liquid Pressure (psia)	_____	_____	_____
Liquid Temperature (°F)	_____	_____	_____
Density (lb/ft <sup>3</sup> )	_____	_____	_____
Viscosity (cP)	_____	_____	_____

### Feed Characteristics

Are any solids present?    Yes, soluble in entrained liquid    Yes, non-soluble    No

Composition \_\_\_\_\_

If yes, concentration (mass %) \_\_\_\_\_    Molecular Weight (lb/lbmol) \_\_\_\_\_

### Operating History of Existing Column

Describe the history of fouling and performance of the FGD Unit

### Mist Eliminator Design

Proposed Material of Construction for this Project \_\_\_\_\_

### Performance Required

Desired Efficiency Objective \_\_\_\_\_  
 Maximum Allowable Pressure Drop in H<sub>2</sub>O \_\_\_\_\_  
 Other Performance Needs \_\_\_\_\_  
 Remove \_\_\_\_\_ % at \_\_\_\_\_ micron

**Relevant drawings must be submitted and can be used in lieu of completing this page.**

## Process Data

### General

FGD System Supplier _____	Reagent Type _____
Absorption Device _____	Number of Absorbers _____
Process _____	
First Stage ME Type _____	Second Stage ME Type _____
Absorber Diameter (in) _____	
Duct Size (in) _____	Hold-Down Description _____
Number of Support Beams _____	
Width of Support Beam (in) _____	

### Mist Eliminator

Number of Stages _____	Mist Eliminator Manufacturer / Style _____
Number of Passes _____	
Blade Spacing (in) _____	
Typical Module Dimensions (in) (HxWxL) _____	

### Mist Eliminator Wash System

Levels of Washing _____	Available Wash Water (gpm) _____				
Location of Existing Wash Levels _____					
Wash Cycles / Strategy _____	Water Pressure (psig) _____				
	<table border="0" style="width: 100%;"> <tr> <td style="width: 25%; text-align: center;"><b>Level 1</b></td> <td style="width: 25%; text-align: center;"><b>Level 2</b></td> <td style="width: 25%; text-align: center;"><b>Level 3</b></td> <td style="width: 25%; text-align: center;"><b>Level 4</b></td> </tr> </table>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Level 4</b>
<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Level 4</b>		
Wash Rates (ft <sup>3</sup> /h.ft <sup>2</sup> ) _____					
Number of Wash Sections _____					
Number of Nozzles _____					
Nozzle Manufacturer / Style _____					

<sup>1</sup> If vessel is existing, please provide vessel elevation, orientation drawing, and drawings of existing tower attachments (or Koch-Glitsch drawing number if applicable).

**Please provide any additional information that will help with your design and describe any documents you will send. Include relevant drawings of existing equipment so that we may design a compatible solution. Use more than one sheet if necessary.**

## Comments/Sketch