

## Sulfuric Acid 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

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

Column No. \_\_\_\_\_  
 Column Name \_\_\_\_\_  
 Existing Column 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

### Application

Tower	Feed Stock	Oleum Production
Drying (gas)	Bright S	None
Drying (air)	Dark S	Bypass
Interpass	Ore Roaster	Full Flow
Final	Spent / Sludge Acid	Oleum Strength (mass%) _____
SO <sub>2</sub> Scrubber		
Other		

### Process Data

	Normal Operating Case	Maximum Operating Case	Minimum Operating Case
Pressure (psia)	_____	_____	_____
Temperature (°F)	_____	_____	_____
Gas Flow Rate (lb/h)	_____	_____	_____
Gas Density (lb/ft <sup>3</sup> )	_____	_____	_____
Gas Viscosity (cP)	_____	_____	_____
Gas MW (lb/lbmol)	_____	_____	_____
Liquid Flow Rate (lb/h)	_____	_____	_____
Liquid Density (lb/ft <sup>3</sup> )	_____	_____	_____
Liquid Viscosity (cP)	_____	_____	_____
Liquid Surface Tension (dyne/cm)	_____	_____	_____
Liquid Composition	_____	_____	_____
Estimated Particle Size Distribution (micron)	_____	_____	_____

### Feed Characteristics

Are any solids present?    Yes    Dissolved (%) \_\_\_\_\_    Undissolved (%) \_\_\_\_\_  
    No    Size of solids \_\_\_\_\_

## Mist Eliminator Design

Upgrade Existing Mist Eliminator?    Yes    No  
Reason for Upgrade:

Is a Mist Eliminator currently installed in the vessel?    Yes    No  
Preferences for Proposed New Mist Eliminator:

Material of construction:  
Mist Eliminator \_\_\_\_\_  
Supports & Tower Attachments \_\_\_\_\_

Preferences/Space Limitations for Proposed New Vessel:

## Equipment Type

DEMISTER® mist eliminator  
Scrubber Type "S"  
TYPE "D" SAFETY SCRUBBER mist eliminator housing  
FLEXICHEVRON® mist eliminator

FLEXIFIBER® Impaction Candle type mist eliminator  
FLEXIFIBER® Brownian Diffusion mist eliminator  
YORK-EVENFLOW® Vane Inlet Device  
OTHER \_\_\_\_\_

## Performance Objectives

Efficiency Required \_\_\_\_\_ % at \_\_\_\_\_ micron

<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