ThermOmegaTech®

A&D VALVE REQUEST FORM

CUSTOM THERMOSTATIC VALVES

The application parameters below will be used to determine the correct Part Number.

Contact Name:
E-Mail:
Project Name:

1. Briefly describe the intended use and application:

2. Do you need a: ☐ Complete Valve Assembly with the housing/body included?
☐ Cartridge Only with a STEP file to build your own manifold?

	MINIMUM	MAXIMUM
3. Design Temperature Extremes (Survival Only) (°F)		
4. Operating Temperatures (Fully Functional) (°F)		
5. Design Pressure Extremes (Survival Only) (psi)		
6. Operating Pressures (Fully Functional) (psi)		
7. Desired Flow Rate (gal/min)		
8. Allowable Pressure Drop (psi)		

9. Do you need to ☐ **DIVERT** fluid based on temperature, or do you need to ☐ **MIX** two fluids to reach a desired temperature?

10. What type of fluid will flow through this valve? Please select one:
Brand/Type? Water Ratio? (%)
HTS Oil? (High Temperature Stability) Please select one: DI Water Used? Please select one:

11. Allowable envelope dimensions?

12. Maximum allowable weight? (lbs)

13. Do you need lock-wire holes or Click-Loc®? Please select one:

14. Do you require the materials to be fully TRACED? Please select one:

15. Will Buy American Act (FAR 52.225-9), DFARS Restriction on Acquisition of Specialty Metals (DFARS 252.225-7009) or any other sourcing restrictions apply to this product? Please select one:

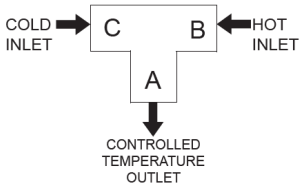
16. Please select the acceptable materials for the elastomers, if known. Also, please note if any of these materials are preferred. If you are uncertain, we can help!

	ACCEPTABLE	PREFERRED
Buna-N	☐	☐
EDPM	☐	☐
Viton® / Fluorocarbon FKM	☐	☐
Fluorosilicone FVMQ	☐	☐
GLTS / VM125 Viton® AMS-7287	☐	☐
Kalrez® FFKM (or equivalent)	☐	☐

17. Please select the acceptable metals, if known. Also, please note if any of these metals are preferred. If you are uncertain, we can help!

	ACCEPTABLE	PREFERRED
Bronze (CDA836)	☐	☐
Brass (CDA360)	☐	☐
303 Stainless Steel	☐	☐
316 Stainless Steel	☐	☐
Other:	☐	☐

18. For MIXING Applications ONLY:
What is your desired Controlled Outlet Temperature? (°F)



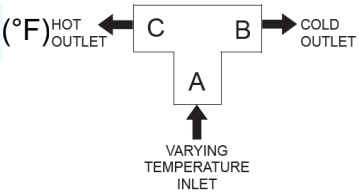
(°F)

Max ΔP between Cold & Hot Inlets?

(psi)

For DIVERTING Applications ONLY:
At what temperature (°F) should the fluid be fully diverted to the HOT OUTLET (C)?
At what temperature (°F) should the fluid be fully diverted to the COLD OUTLET?

Warmer than (°F)



Cooler than (°F)

19. Passivation required? Please select one:

20. Do you any additional special processes not listed? Please describe the type, method, class, and any additional standards.

21. Is serialization required? Please select one:

22. Please describe any other exposures requiring compatibility:

23. What quantities would you like us to quote?

24. Please provide any additional details or requirements we should know about regarding this request:

ThermOmegaTech Internal Use Only:

Selected Part Numbers for Quote:

Selected Wax Temperatures for Quote:

Action Items for ThermOmegaTech:

Action Items for Customer:

Additional Notes: