



Flushing Ring Application Data Sheet

Date _____

Name _____ Phone _____
 Company/Location _____ Email _____
 Customer PO _____ Sales Order No. _____

Design / Construction

Design Pressure _____ Design Temperature _____ Process Media _____
 Ring material of construction Carbon steel 316/316LSS
 Monel 400 Hastelloy C276 Other _____ (please specify)

Ring Connections

Instrument side flange size 0.5 inch 0.75 inch 1 inch 1.5 inches 2 inches
 3 inches 4 inches Other _____ Metric _____
 Instrument side flange configuration Raised Face Ring Type Joint Flat Other _____
 Process side flange size 0.5 inch 0.75 inch 1 inch 1.5 inches 2 inches
 3 inches 4 inches Other _____ Metric _____
 Process side flange configuration Raised Face Ring Type Joint Flat Other _____
 Flange class 150 300 600 900 1500
 2500 Other _____ Metric _____
 Flange Finish (min) 125-250 (Standard) 250-500 AARH Other _____

Flushing Ports

Number of flushing connections 0 1 2 Other _____
 Orientation of ports Standard (symmetrical) Custom _____
 Flushing connection type NPT BSPT BSPP CPI A-LOK
 Socket weld Butt weld Other _____ (please specify)
 Flushing connection size Inches: 0.25 0.5 0.375 1 Other _____
 Millimeters: 6 10 12 16 Other _____

Valve

Valve type Gate Ball Needle
 None Other _____
 Valve material Carbon steel Stainless Steel
 Other _____
 Fire Safe Yes No

Options

Options NACE Captive Studs
 Certificate of Compliance
 Inspection and Testing Certificate
 (If this option is selected, please fill out
 Inspection and Testing Certifications
 form on next page.)

Customer specified tagging _____

Additional requirements _____

SKETCH RINGS or APPLICATION HERE





Inspection and Testing Certifications

No testing or test documentation required.

- | | |
|--|---|
| <input type="checkbox"/> PMI Report | <input type="checkbox"/> SOR Standard Alloy verification of wetted parts using x-ray fluorescence (XRF) technology to positively identify the part material used post manufacturing.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Hydrostatic Pressure Test | <input type="checkbox"/> SOR Standard Process conforms to ASME Section V and is conducted per serial number. If valves are used, hydro testing will be done with valve open and ports plugged.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Visual Inspection Report | <input type="checkbox"/> SOR Standard Visual weld inspection by certified weld inspector per sales order line item.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Factory Acceptance Test | <input type="checkbox"/> SOR Standard Summary of testing schedule completed per sales order line item.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Inspection Test Plan | <input type="checkbox"/> SOR Standard Summary of all the testing processes that will be conducted per sales order line item.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Mill Test Report | <input type="checkbox"/> SOR Standard Certifies that the listed serial numbers were manufactured using the materials on the associated Certified Material Test Reports (CMTR).
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Dye Penetrant Examination | <input type="checkbox"/> SOR Standard Certifies that the listed serial numbers were examined by visible liquid penetrant in accordance with ASME Section V, Article 6.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> NACE Compliance | <input type="checkbox"/> SOR Standard SOR shall provide certification of compliance that the pressure boundary components of the listed serial numbers were manufactured to meet NACE MR0175/ ISO15156.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Ferrite Test | <input type="checkbox"/> SOR Standard Certifies the Ferrite Number (FN) of 20% of the welds per serial number is documented on associated weld map drawings.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Radiographic Examination (X-Ray) | <input type="checkbox"/> SOR Standard Certifies the 3rd party radiographic examination of 5% of welds per sales order line item by sample size in accordance with ASME Section V.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> SOR Standard Certifies heat treatment was conducted to ASTM standards per sales order line item.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Mag Particle Examination | <input type="checkbox"/> SOR Standard Certifies that the listed serial numbers were examined by visible mag particle in accordance with ASME Section V.
<input type="checkbox"/> Customer specified alternate requirements_____ |
| <input type="checkbox"/> Ultrasonic Examination | <input type="checkbox"/> SOR Standard Certifies that the listed serial numbers were examined by 3rd party ultrasonic examination in accordance with ASME Section V.
<input type="checkbox"/> Customer specified alternate requirements_____ |

Additional comments: _____
