Pneumatics Checklist for Valves

Project no.: ☐ Machine Building ☐ Medical Technology ☐ Automotive ☐ Components

Customer details

Company: _____

Address: _____

_____

Contact person: _____

Dept.: _____ Phone: _____ Fax: _____

E-mail: _____

Competitor offer: ☐ Yes ☐ No

Internal details

Representative: _____

Sales manager: _____

Application engineer: _____

Customer visits / date : _____ ____ Branch key

Competitor: _____

Standard product: _____

Technical requirements

Valve function: _____ ☐ NC ☐ NO

Actuation: _____

Orifice base: _____ mm

Orifice stem: _____ mm

Type of base: _____

Material of base: _____

Nominal flow rate: _____ l/min

Nominal voltage: ☐ DC ☐ AC ☐ Mains ☐ Accu/Batt.

Voltage tolerance: ☐ Standard

Voltage tolerance: Umin _____ Umax _____

P_E: _____ W/VA

Duty cycle: _____ % ED

Switching frequency: _____

Switching time (to VDI 3290): _____ msec.

Service life: _____ Cycles: _____

Protection class: _____

☐ Plug-in socket ☐ Flying lead ☐ with: _____ mm^2

Colour: _____

Length of leads: _____ mm Tolerance: +/- _____ mm

Protection diode: ☐ Yes ☐ No

Statutory demands and environmental aspects: _____

Demands to standards: ☐ Yes ☐ No

(e.g. VDI, VDE, VDS, VDA, DIN, ISO etc.), which: _____

General features

Size of fitting ☐ M5 ☐ G 1/8'' ☐ Flange base ☐ Other

Pressure [bar]:

P_N = _____ P_{min} = _____ P_{max} = _____

Control pressure [bar]: _____

P_N = _____ P_{min} = _____ P_{max} = _____

Vacuum: _____ mbar

Medium: _____ %

Medium state: ☐ dry ☐ oiled ☐ filtered

Max. acceleration during operation: x-direction _____ m/sec^2

y-direction _____ m/sec^2

Mounting: ☐ x-direction ☐ y-direction

Permiss. leakage: ☐ Standard ☐ l/min

Ambient temperature $T_{min.}$: _____ C° $T_{max.}$: _____ C°

Medium temperature $T_{min.}$: _____ C° $T_{max.}$: _____ C°

Sealing material: ☐ NBR ☐ Viton ☐ Special_____

Basic lubrication: ☐ Yes ☐ No

Misc.: _____

_____

_____

_____

Activities ☐ Dimension sketch ☐ Sample ☐ Offer ☐ Information ☐ Target price

	Qty	Date
Sample		
Pilot series		
Qty per year		
Qty per order		
Total quantity		

Chance of realisation: _____ %

Priority

☐ low

☐ middle

☐ high

Customer's price idea: _____

Customer keep: ☐ Feasibility study ☐ Development costs ☐ Tool costs (according to offer)

Project statement (to be filled in by project division)

Date of receipt: _____ Project no.: _____

To be handled as a project: ☐ Yes ☐ No

Inquiry answerable: ☐ Yes ☐ No

Answer till: _____

Handled by MB450, name: _____ Phone: _____

	Suggested date
Dimension sketch	
Offer	
Sample	

Comments:

Date: _____ Signature: _____

Comments:

Sketch: