



**VERAX**  
**Form**

## Enquiry regarding VCF pipe joints

Edition 1  
Ratified by:  
Jan Webjörn  
1998-04-08

**1) Enquiry issued by:**

Company: \_\_\_\_\_  
Department: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Telefacsimile: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
**Ref. Nr:** \_\_\_\_\_ **Project name:** \_\_\_\_\_

**2) Type of service:** \_\_\_\_\_

**3) Pipe:** \_\_\_\_\_ inch      DN: \_\_\_\_\_      O.D: \_\_\_\_\_ mm  
Wall thickness: \_\_\_\_\_ mm  
Material: \_\_\_\_\_

**4) Applicable VERAX Standard:** \_\_\_\_\_ VCF \_\_\_\_\_

**5) Functional requirements:**

Type of fluid: \_\_\_\_\_  
Max. working pressure: \_\_\_\_\_ bar  
Bending moment: \_\_\_\_\_ kNm  
Axial load: \_\_\_\_\_ kN  
Max. working temperature: \_\_\_\_\_ °C  
Proof test pressure: \_\_\_\_\_ bar at \_\_\_\_\_ °C

**6) Type and quantity of joints:**

Regular: \_\_\_\_\_ pcs  
Swivel: \_\_\_\_\_ pcs  
Blind: \_\_\_\_\_ pcs  
Other: \_\_\_\_\_ pcs

**7) Time schedule (latest dates)**

Preliminary response: \_\_\_\_\_  
Budget price: \_\_\_\_\_  
Firm tender: \_\_\_\_\_  
Delivery: \_\_\_\_\_

**8) Signed by:** \_\_\_\_\_

\_\_\_\_\_  
**Date:** \_\_\_\_\_

Please return completed form to **VERAX:**

**Postal address:**  
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SE-655 91 KARLSTAD  
SWEDEN

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For further information: <http://www.verax.se>