



Thermafoil® Graphite Pressure Seal Data Sheet

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Please complete the following three steps and email or fax to egc@egc-ent.com. All information is necessary to allow EGC to accurately quote and design a Thermafoil graphite replacement pressure seal for your application.

Step #1: Customer & Valve Data

Company: _____

Contact Name: _____

Phone: _____

Email: _____

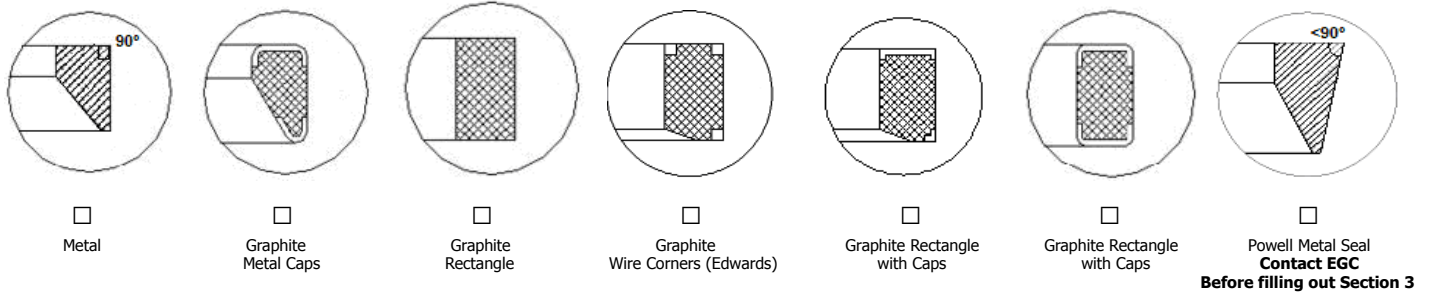
Valve Manufacturer: _____

Valve Size: _____ Valve Type: _____

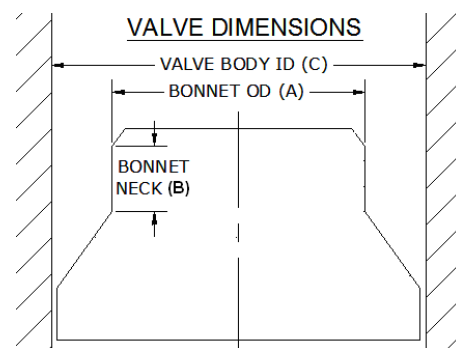
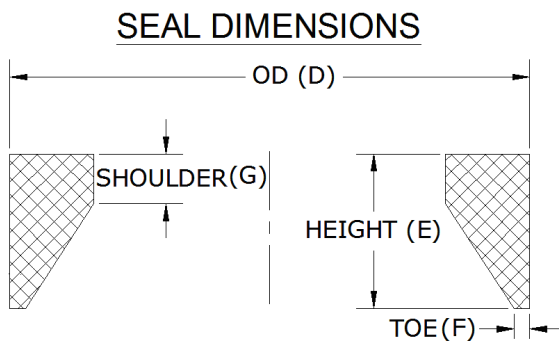
Valve Figure No: _____

Qty. of Seals Required? _____

Step #2: Select the **EXISTING** seal you are measuring and replacing.



Step #3: Provide required dimensions below using the seal and valve illustrations for reference. Accurate data is essential to ensure proper fit and function of the new Thermafoil Pressure Seal.



- | | | | |
|---------------------------------------|-----------|---|------------------------------|
| 1) What is the valve pressure class?* | _____ | 5) E) Seal Height: | _____ in. |
| 2) A) Valve Bonnet OD: | _____ in. | 6) F) Toe Width: | _____ in. |
| 3) B) Bonnet Neck Height: | _____ in. | 7) G) Shoulder Height: | _____ in. |
| 4) C) Valve Body ID: | _____ in. | 8) Were dimensions taken from a new or used seal? | |
| OR D) Seal OD: | _____ in. | <input type="checkbox"/> Used | <input type="checkbox"/> New |

* System operating pressure may be used