

Form to be filled at time of an equipment failure

Pump serial number
Suction pressure
Discharge pressure
System pressure
System temperatureF
Measure flow (opt)
Liquid %
Was the system cleaned using this pump yes no (please circle)
In case of a base mounted pump please provide a alignment report and a clear picture
showing the pump was grouted
Is the pump running with a Vfd yes no (please circle)
Model
Serial number
Supplied by company and phone number req
What model
Hertz setting
Motor coricl number
Motor serial number
Motor amps at shut off
Motor amps valve in the balance position
Please send this form to service@flofab.com and parts@flofab.com with several

installation pictures

Manufacturer of Pumps, Fuel Oil and Glycol Fill Systems, Valves, Heat Exchangers, Expansion and Hot Water Storage Tanks and more...