

# CUSTOM LANCE

## APPLICATION INFORMATION REQUEST FORM

All completed forms should be emailed back to: [appeng@bete.com](mailto:appeng@bete.com)  
 Please fill out the following form as completely as possible to assist in the nozzle selection process.

### Contact Information:

Date:	Name:
Telephone:	Company:
Fax:	Address:
Email:	Job/Reference #:
Industry:	Process Lance is Used in:

### Codes:

Design Code/Registration: <input type="checkbox"/> ASME B31.3 <input type="checkbox"/> PED <input type="checkbox"/> CRN <input type="checkbox"/> None <input type="checkbox"/> Other _____			
Design Vessel Pressure:	<input type="checkbox"/> psi <input type="checkbox"/> bar	Design Vessel Temperature:	<input type="checkbox"/> °F <input type="checkbox"/> °C
Design Liquid Pressure:	<input type="checkbox"/> psi <input type="checkbox"/> bar	Design Liquid Temperature:	<input type="checkbox"/> °F <input type="checkbox"/> °C
Corrosion Allowance:	<input type="checkbox"/> in <input type="checkbox"/> mm	Corrosion:	<input type="checkbox"/> MR0175 <input type="checkbox"/> MR0103 <input type="checkbox"/> A262 Practice

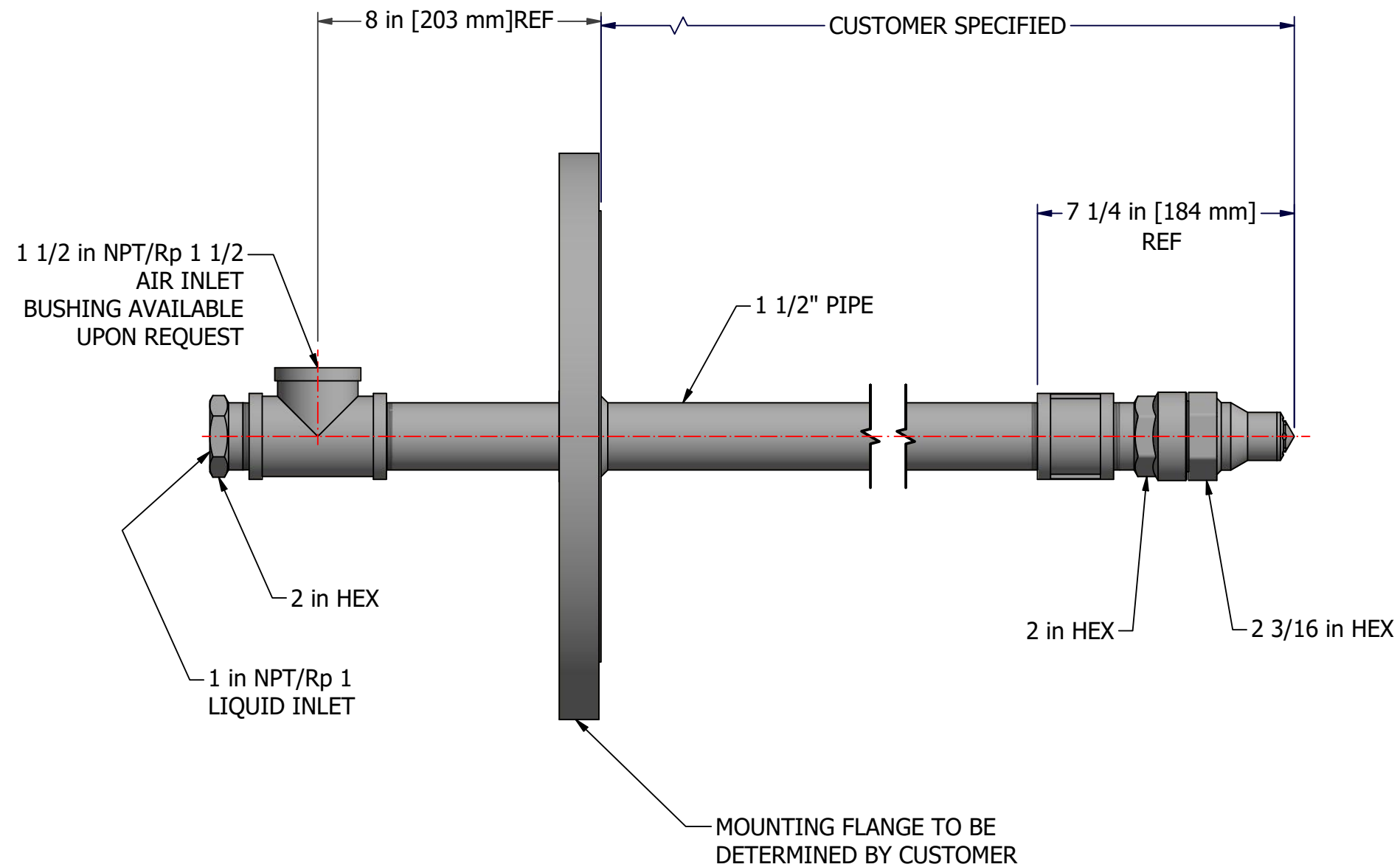
### Additional Testing/QC Requirements:

NDE Type		Extent of NDE and on what components
Dye Penetrant	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Radiographic Test	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Ultrasonic Test	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Hardness	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Hydrotest	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (specify)		

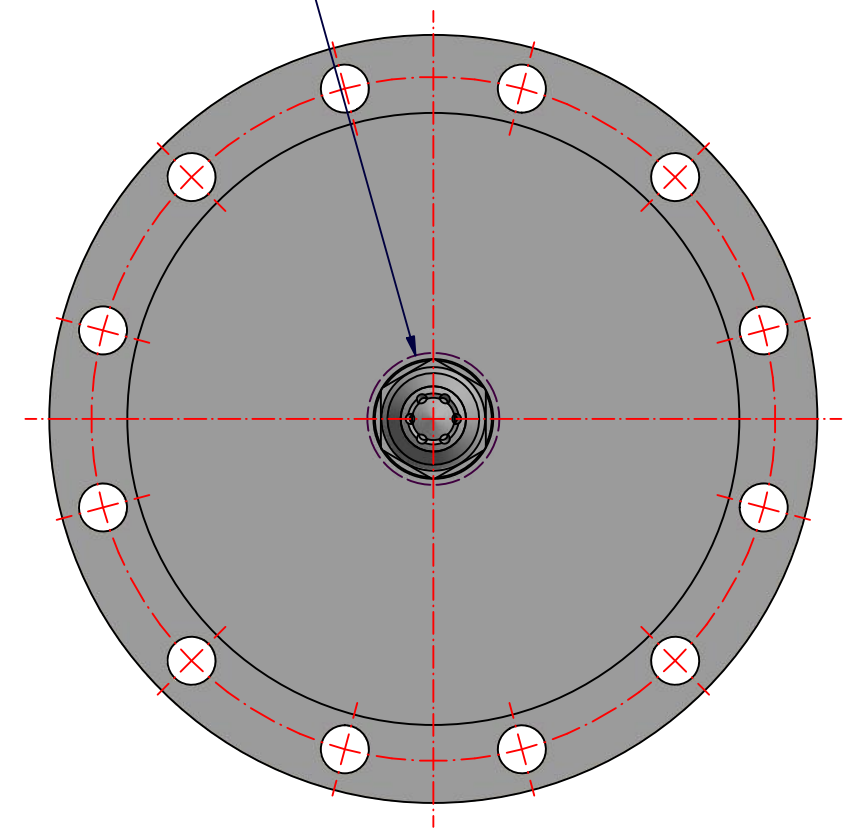
Material Test Reports	<input type="checkbox"/> Yes <input type="checkbox"/> No	Weld Procedure Approval	<input type="checkbox"/> Yes <input type="checkbox"/> No
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### Spray Nozzle Selection:

What Liquid is being Sprayed:		Specific Gravity:	
Liquid Flow Rate:	<input type="checkbox"/> GPM <input type="checkbox"/> L/min	Liquid Pressure Drop:	<input type="checkbox"/> psi <input type="checkbox"/> bar
<input type="checkbox"/> Air/ <input type="checkbox"/> Steam Flow Rate:	<input type="checkbox"/> SCFM <input type="checkbox"/> m <sup>3</sup> /hr	Air/Steam Pressure Drop:	<input type="checkbox"/> psi <input type="checkbox"/> bar
Spray Pattern: <input type="checkbox"/> Full Cone <input type="checkbox"/> Hollow Cone <input type="checkbox"/> Fan		Nozzle Spray Angle:	
Nozzle Material:		Nozzle Connection Size:	
Specify any erosive or corrosive conditions present:		Nozzle Connection Style:	
Nozzle Model (if known):		Is a tack weld required for threaded nozzles?	



Ø2 3/4 in [70 mm]  
CLEARANCE DIAMETER  
REF



**NOTES**

- 1. STANDARD MATERIALS:  
TIP & COVER - COBALT ALLOY 6  
O-RING (LOCATED IN TEE) - VITON  
REMAINING COMPONENTS - 316 STAINLESS STEEL

\* ALTERNATE MATERIALS ARE AVAILABLE UPON REQUEST

B	4/5/2021	JF		34829
A	04/10/2012	KG	JF	26394
REV	DATE	BY	CHECKED	DCR

3RD ANGLE PROJECTION UNLESS OTHERWISE NOTED, REMOVE ALL BURRS AND SHARP EDGES

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TOLERANCES: (EXCEPT AS NOTED)

MACHINED DIMENSIONS: ANGLES.....±1/2°  
 FRACTIONAL.....±1/32"  
 TWO PLACE DECIMAL.....±.01"  
 THREE PLACE DECIMAL.....±.005"  
 CAST DIMENSIONS: UP TO 1".....±.010"  
 FOR EACH INCH AFTER ADD ±.003" PER IN.  
 METRIC: WHOLE NUMBER.....±1mm  
 ONE PLACE DECIMAL.....±.4mm  
 TWO PLACE DECIMAL.....±.14mm

<b>BETE FOG NOZZLE, INC.</b>			
50 GREENFIELD STREET GREENFIELD, MASSACHUSETTS 01301			
1 1/2" SA XXX-B-10			
<b>GENERAL ARRANGEMENT DRAWING</b>			
SCALE: <b>1:4</b>	DRAWN: SL DATE: 3/15/2012	CHECKED: JF DATE: 3/26/2012	REV <b>B</b>
DRAWING NUMBER: <b>LN - 65450</b>			