



FH	FL	CH	CL	CD	E	G	H	J	K	L			TS	TR

<b>Connection Sizes:</b> Supply _____ Return _____	<b>Tubes High</b> _____  <b>Tube Diameter</b> _____	<b>Fins Per Inch</b> _____  <b>Fin Type:</b> <input type="checkbox"/> Turbex <input type="checkbox"/> Flat <input type="checkbox"/> Wound	<b>Rows Deep:</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2
<b>Connection Type:</b> <input type="checkbox"/> MPT <input type="checkbox"/> FPT <input type="checkbox"/> 150 LB Flange <input type="checkbox"/> 300 lb Flanges	<b>Tube Wall Thickness:</b> <input type="checkbox"/> 0.025" <input type="checkbox"/> 0.035" <input type="checkbox"/> 0.049" <input type="checkbox"/> 0.065"	<b>Fin Thickness:</b> <input type="checkbox"/> 0.010" <input type="checkbox"/> 0.016" <input type="checkbox"/> 0.020" <input type="checkbox"/> 0.025"	<b>Header Material:</b> <input type="checkbox"/> Copper <input type="checkbox"/> Steel <input type="checkbox"/> 90/10 Copper/Nickel <input type="checkbox"/> Stainless Steel
<b>Connection Material:</b> <input type="checkbox"/> Copper <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel	<b>Tube Material:</b> <input type="checkbox"/> Copper <input type="checkbox"/> 90/10 Copper/Nickel <input type="checkbox"/> Carbon Steel <input type="checkbox"/> 304 Stainless Steel <input type="checkbox"/> 316 Stainless Steel	<b>Fin Material:</b> <input type="checkbox"/> Aluminum <input type="checkbox"/> Copper <input type="checkbox"/> 90/10 Copper/Nickel <input type="checkbox"/> 304 Stainless Steel	<b>Air Flow:</b> <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
<b>Casing Gauge</b> _____ <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> 304 Stainless Steel	<b>Core Pitched:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Tube Arrangement:</b> <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical