

COMPRESSED AIR CONDENSATE CHECKLIST

Your Company Information

Company Name _____
Contact Name _____
Address _____
Telephone Number _____
Email _____

Compressor Data

Compressor Mfg. _____
of Compressors Installed _____
Type & Model _____
Total Compressor Capacity _____

Compressor Lubricant Data

Lubricant Mfg. _____
Lubricant Name _____
Optional Additives/Impurities _____

Factory Data

What does the factory make? _____
Air intake drawn from inside/outside _____

Application Data

Standard Working Pressure (PSI) _____
Operating Hours/Week _____
Compressor Hours/Week _____
Oil Consumption/Month _____
Condensate Generated/Hour _____
Compressed Air Temp _____
Compressed Air Temp After Dryer _____

Environmental Data

Ambient Temperature Degree F _____
Relative Humidity _____

Oil/Water Separator Data

Manufacturer/Model _____
Date of Installation _____
Date of Last Element Change _____
Oil Residue From Outlet (PPM) _____

*Please include any MSDS files on compressor lubricate.

*If any determination was made by a laboratory test, please include a copy of the test report.

**CONTROL SPECIALTIES – WWW.CONTROL-SPECIALTIES.COM
INFO@CONTROL-SPECIALTIES – 800-752-0556**

Please fill in this page and send it with any relevant documentation to info@control-specialties.com