



Specialty Tool & Supply, Inc.

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Phone: (936) 760-1100 Fax: (936) 760-3100
Heat Exchanger Services and Tube Slewing

CUSTOMER: _____

NO. of expansions _____ Est. Start Date _____

Contact Phone _____ Fax: _____

PARENT TUBE, SLEEVE AND MANDREL APPLICATION DATA.

PARENT TUBE DATA:

SLEEVE DATA:

MATERIAL: _____

MATERIAL: _____

SPECIFICATION _____

SPECIFICATION _____

NOMINAL O.D. _____

O.D. _____

WALL THICKNESS _____

I.D. _____

AVERAGE WALL _____

MINIMUM WALL _____

WALL THICKNESS WITH TOLERANCE _____

LENGTH WITH TOLERANCE _____

SLEEVE END CONFIGURATION, PRI/SEC, & MIN/MAX DIAMETER APPLICATION DATA

