

# Technical questionnaire

Company address \_\_\_\_\_

Processed by \_\_\_\_\_ Department \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Date \_\_\_\_\_

Machine type \_\_\_\_\_ Project no. \_\_\_\_\_

## What type of sealing are laminar rings intended to provide?

- |                                               |                                                                           |                                                    |                                       |
|-----------------------------------------------|---------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Splash water ingress | <input type="checkbox"/> Coarse dirt ingress                              | <input type="checkbox"/> Cooling lubricant ingress | <input type="checkbox"/> Dust ingress |
| <input type="checkbox"/> Oil leakage          | <input type="checkbox"/> Grease leakage                                   | <input type="checkbox"/> Other media: _____        |                                       |
| Protection of other seals                     | <input type="checkbox"/> yes / please specify <input type="checkbox"/> no | _____                                              |                                       |
| Operating temperature                         | (in the ring area °C)                                                     | _____                                              |                                       |
| Housing speed                                 | (rpm / direction of rotation)                                             | _____                                              |                                       |
| Shaft rotation speed                          | (rpm / direction of rotation)                                             | _____                                              |                                       |
| Axial movement                                | <input type="checkbox"/> yes / in mm <input type="checkbox"/> no          | _____                                              |                                       |
| Radial movement                               | <input type="checkbox"/> yes / in mm <input type="checkbox"/> no          | _____                                              |                                       |
| Tilting movements                             | <input type="checkbox"/> yes / in ° <input type="checkbox"/> no           | _____                                              |                                       |
| Operating pressure (medium)                   | <input type="checkbox"/> yes / in bar <input type="checkbox"/> no         | _____                                              |                                       |
| Relubrication option                          | <input type="checkbox"/> yes / please specify <input type="checkbox"/> no | _____                                              |                                       |
| Stainless laminar rings                       | <input type="checkbox"/> yes <input type="checkbox"/> no                  | _____                                              |                                       |
| Housing material (tempered)                   | <input type="checkbox"/> yes / hardness <input type="checkbox"/> no       | _____                                              |                                       |
| Shaft material (tempered)                     | <input type="checkbox"/> yes / hardness <input type="checkbox"/> no       | _____                                              |                                       |
| New construction                              | <input type="checkbox"/> yes <input type="checkbox"/> no                  | _____                                              |                                       |
| Changeover to laminar rings                   | <input type="checkbox"/> yes <input type="checkbox"/> no                  | _____                                              |                                       |

## What type of seal has been used previously?

- Permissible leakage \_\_\_\_\_
- Service life \_\_\_\_\_
- What would be the demand:
- |                                  |             |       |
|----------------------------------|-------------|-------|
| <input type="checkbox"/> one-off | (piece/set) | _____ |
| <input type="checkbox"/> monthly | (piece/set) | _____ |
| <input type="checkbox"/> annual  | (piece/set) | _____ |

## Additional questions about the use of Fey retaining rings:

Are the retaining rings tensioned axially? (against) \_\_\_\_\_

How high is the axial load on the rings? (in N) \_\_\_\_\_

Are disassembly cut-outs required? \_\_\_\_\_

Please provide us with a CAD drawing or dimensioned sketch in order to assess the installation situation!

Please send files per e-mail to: [f.ivancan@fey-lamellenringe.de](mailto:f.ivancan@fey-lamellenringe.de)