

<input checked="" type="checkbox"/> Bearings Plus <small>A Waukesha Bearings Business</small>	<input type="checkbox"/>			<input type="checkbox"/>			
DOCUMENT TITLE	THRUST BEARING INQUIRY SHEET			DCR	DCR-0728-2015-11-06		
DOCUMENT No.	DE-BPI-CS-FR-0016	REV	01	DATE	11/6/2015	TIER	4

Bearings Plus • 11951 North Spectrum Blvd • Houston, TX 77047 • USA
Email: sales@bearingsplus.com • Tel: (713) 948-6000 • Fax: (713) 944-3950

THRUST BEARING INQUIRY SHEET

Name				Date					
Title				Phone					
Company Name				Fax					
Address				Email					
City, State, ZIP		City		State		ZIP			
		Country							
APPLICATION INFORMATION									
Machine Description									
Industry		Choose an item.		Project Name					
Usage		<input type="checkbox"/> New Product <input type="checkbox"/> Retrofit <input type="checkbox"/> Prototype <input type="checkbox"/> Other:				Est. Qty.			
Current Bearing Style									
Current Problems									
Design Priority 1 = High Priority 6 = Low Priority		Rank 1 Thru 6	Cost:	Life:	Power Loss:	Temp:	Load: Other:		
		Details							
OPERATING CONDITIONS									
Operating Speed (rpm)				Shaft Rotation		Shaft Orientation			
Min		Design		Max		Runner Material			
				<input type="checkbox"/> Bi-directional <input type="checkbox"/> Uni-directional		<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical			
Direction of Shaft Rotation		<input type="checkbox"/> CW or <input type="checkbox"/> CCW as viewed from							
Main Thrust Load									
Min		Design		Max		Reverse Load			
						Start-Up Load			
Lubricant	Type						<input type="checkbox"/> Pressurized <input type="checkbox"/> Flooded <input type="checkbox"/> Directed		
	Or	API Gravity						Type	
		Viscosity	Temp1		Visc1		Pressure		
			Temp2		Visc2		psig		kPa
						°F	°C		
Runner Misalignment									
Bearing Misalignment									
BEARING GEOMETRY									
Bearing Type		<input type="checkbox"/> Flexure Pivot® <input type="checkbox"/> Tilt Pad <input type="checkbox"/> Taperland <input type="checkbox"/> Flat Plate <input type="checkbox"/> Not Sure							
Are leveling links required?		<input type="checkbox"/> Yes <input type="checkbox"/> No							
Are temperature sensors required?		<input type="checkbox"/> Yes <input type="checkbox"/> No							
If yes:		<input type="checkbox"/> Thermocouples <input type="checkbox"/> RTDs		How many per thrust face?					

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BEARING GEOMETRY (CONT.)				
Is thrust load measurement required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Is axial clearance or shaft position adjustment required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Shims?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bearing Split	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Shaft Diameter at the Bearing Location		<i>in</i>		<i>mm</i>
Runner (Thrust Collar) Thickness		<i>in</i>		<i>mm</i>
Max Thrust Collar Diameter		<i>in</i>		<i>mm</i>
Max Overall Thickness		<i>in</i>		<i>mm</i>
ATTACHMENTS				
<input type="checkbox"/> Sketch or drawing of bearing housing <input type="checkbox"/> Other (please specify):				
COMMENTS				