



REGULATOR SPECIFICATION FORM

Please fill in form and email to sales@systemcontrol.com.au

Company Name: Contact Phone:

Contact Email: Contact Name:

LPG First Stage Regulator

What Type of Regulator do you require?

Tank: YES / NO

Cylinders: YES / NO

Regulator/Full Relief: YES / NO

Regulator/OPSO/Partial Relief: YES / NO

Outlet Pressure:

Capacity/Flow Rate:

Second Stage Regulator

What Type of Regulator do you require?

Regulator/OPSO: YES / NO

Regulator/OPSO/Partial Relief: YES / NO

Regulator/OPSO with Safety Diaphragm: YES / NO

Gas Type:

Maximum Inlet Pressure (Optional):

Normal Inlet Pressure:

Outlet Pressure:

Capacity:

Pipe Size (Optional):

Appliance Regulator

Gas Type:

Maximum Inlet Pressure (Optional):

Normal Inlet Pressure:

Outlet Pressure:

Capacity:

Pipe Size (Optional):