Contact Information

Customer Name:

Phone Number: **Email:**

Experimental Fuel Pump Application

1. Engine Make and Model:

2. Engine Horse Power (HP): **3. Voltage:** **12/14 VDC** **24/28 VDC**

4. Fuel Type:

5. Fuel burned by the engine at full throttle (GPH):

6. Fuel consumed by the engine driven fuel pump at full throttle (GPH):

7. Metered or operating pressure of the system (PSI):

8. Unmetered pressure at full throttle (PSI):

9. Not to exceed pressure (No Flow/Full Relief) (PSI):

10. Does the pump need an internal bypass? **Yes** **No**

11. Line Size: **-6 (3/8)** **-8 (1/2)** **12. Pump Location:**

13. Pump Speed: **Single** **Dual**

14. Expected flow of the experimental pump:

15. Expected operating pressure of the experimental pump:

16. Does your fuel system have a return back to the tank?   **Yes**   **No**

17. Does your fuel pump need to be for continuous use?   **Yes**   **No**

16. Are there any other modifications installed into the fuel system? (ex. aftermarket injection system)   **Yes**   **No**

Notes

Please complete this form and email to sales@mcfarlaneaviation.com