

Cartridge Filter Replacement Specification Sheet

Please provide the following information, if known.

When ordering replacement cartridge filters, please provide the following information:

Filter Part Number: _____

Make and Model of the Dust Collector:

Make: _____ Model: _____

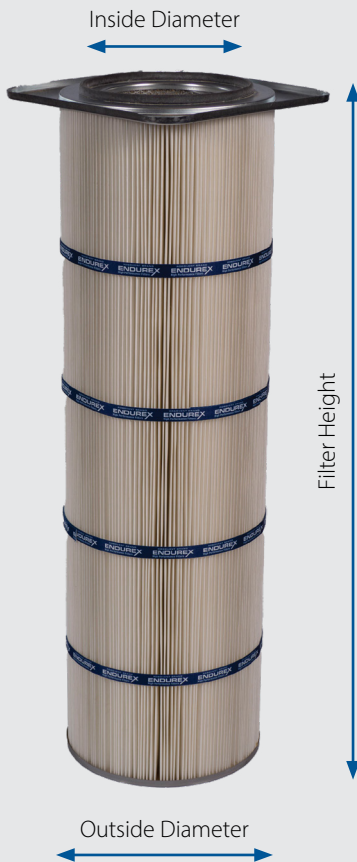
If RoboVent, provide Serial Number: _____

Note: Please fill out one form for each unique filter.

Customer Service:
586.698.1800

Completed forms should be emailed to:
info@robovent.com

Dimensions & Configurations



Filter Height: _____ **Inside Diameter:** _____

Outside Diameter: _____

Gasket: Yes No

Top Cap: Round Oval Flange

Other: _____

Flange Dimension: _____

Corner Type: Rounded 90°

Filter Media (select one):

80/20 FR Nanofiber FR Spunbond PTFE

PTFE Other _____

Outer Construction (if known):

Cage Bands None

Bottom Cap:

Open Closed Closed w/ Bolthole
Endcap Depth: _____

Additional Comments:
