



Application Questionnaire.

Company Name:.....Date:.....

Contact Name:.....

Address:.....

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Item:.....Quantity:.....Tag:.....

Line Media:.....

Flowrate(s): Minimum:.....Normal:.....Maximum:.....

Pressure(s): Minimum:.....Normal:.....Maximum:.....

Viscosity: Minimum:.....Normal:.....Maximum:.....

Density/S.G: Minimum:.....Normal:.....Maximum:.....

Temperature:Minimum:.....Normal:.....Maximum:.....

Type of flow: Pulsating:.....Continuous:.....Intermittent:.....

Flow Orientation:Vertical:.....Horizontal:.....Inclined:.....

Preferred Materials of construction:.....

Power Supply:.....Hazardous Area.....

Electronic Readout (Required Function):

Batch:.....Total:.....Rate:.....Transmission:.....

Alarms:High:.....Normal:.....Low:.....

Power Supply:.....

Compensation:Temperature:.....Pressure:.....Density:.....

Special Notes:.....

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