

**Level Application Information Form** 

## Date: Author Name: Company/Territory: Customer Info: Phone: Company: Site Name: Email: City, State, ZIP: Fax: Contact Name Title: LEVEL APPLICATION INFO: Info (Name, Tag, Objective, etc.): \_\_\_\_ Level Application Details: Product(s) to be measured: Liquid Liquid/Interface Other\_ Deposits Coats Other Crystallizes Other Minimum Maximum Nominal Minimum Maximum Pressures: Nominal psia Temperature at the flange: Process Temp. Max: Open/Non-Metallic Closed Metallic Storage Vertical Horizontal Silo Other Vessel Orientation: \_\_ Tank/Vessel Width: \_\_\_\_\_ Range from bottom: 0%\_\_\_\_\_ Foam? (Describe) \_\_\_ inches 2<sup>nd</sup> Fluid Dielectric: \_\_\_ For Interface, 2<sup>nd</sup> Fluid Name: Minimum Layer: \_\_\_ Product Requirements # ANSI Flange Sanitary \_\_\_ Process connections: inches Nozzle Pipe Schedule: \_\_\_\_ Accuracy requested: \_\_\_\_\_ % of range Acceptable wetted materials of construction (including seals): 24VDC Loop Power 24VDC 120VAC Other: \_\_\_\_\_ Other \_\_\_\_\_ Signal Output: Pulse Frequency Output(s) Range(s): FM $\square$ CSA Class Division Compact Remote Remote cable length required: \_\_\_ Mag. Gauge Requested Level Technology: Radar TDR Sonic Switch Other: \_\_\_\_ Weight **⊤**...nbuckle TDR Probe ' angth: End type: Application Currently Operating using: **New Application**

F AIF 07/08 Level



Please Include a Sketch of likely installation: