



**Application Questionnaire.**

Company Name:.....Date:.....  
Contact Name:.....  
Address:.....  
.....  
Tel:.....Fax:.....E-mail:.....  
.....  
Item:.....Quantity:.....Tag:.....

**Flow meter**

Medium:.....  
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.....  
Custody Transfer Accuracy Required: Yes / No

**Electronic Readout (Required Function):**

Batch:.....Total:.....Rate:.....Transmission:.....  
Alarms: High:.....Normal:.....Low:.....  
Power Supply:.....  
Compensation:Temperature:.....Pressure:.....Density:.....  
Special Notes:.....  
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