

MAGNETIC LEVEL GAGE APPLICATION SHEET

| | |
|-----------------------|----------------------|
| Name: _____ | Date: _____ |
| Company: _____ | Phone: _____ |
| Address: _____ | Fax: _____ |
| _____ | E-mail: _____ |
| _____ | |

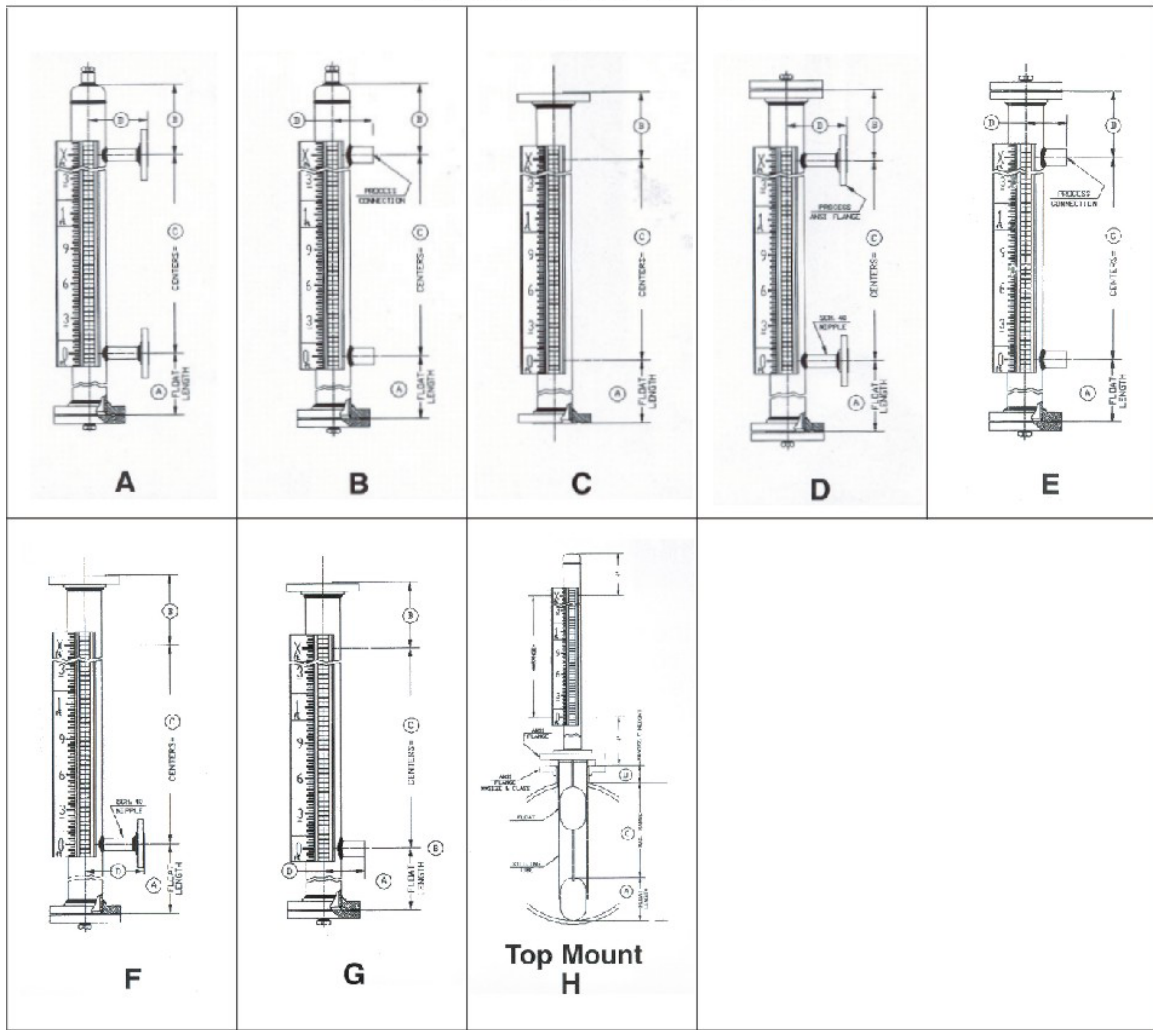
| | |
|--|---|
| <p>Quantity: _____</p> <p>Chamber Style: _____</p> <p>Chamber Material:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 316SS <input type="checkbox"/> 304SS <input type="checkbox"/> CPVC <input type="checkbox"/> ALLOY-20 <input type="checkbox"/> OTHER _____ <p>Process Fluid:</p> <p>Specific Gravity of fluid _____</p> <p>Operating Pressure (PSIG) _____</p> <p>Maximum Pressure _____</p> <p>Operating Temperature _____</p> <p>Maximum Temperature _____</p> <p>Process Connections:</p> <p>Size (inches) _____</p> <p>Flange Rating (PSIG) _____</p> <p>Center to Center (inches) _____</p> <p>Vent Connection _____</p> <p>Drain Connection _____</p> | <p>Indicator:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Indicator Tube <input type="checkbox"/> Flipper/Roller <input type="checkbox"/> Wide Flag <input type="checkbox"/> Single Tracker <p>Scale:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Feet / Inches .25" Æ <input type="checkbox"/> 0% to 100% <input type="checkbox"/> Metric-Meter / Cm <input type="checkbox"/> Other _____ <p>Switches:</p> <p>Quantity Required _____</p> <p>Switch Type</p> <ul style="list-style-type: none"> <input type="checkbox"/> MLS-3 <input type="checkbox"/> MLS-3EX <input type="checkbox"/> MLS-3EX-2 <input type="checkbox"/> MLS-10EX <input type="checkbox"/> PS-2 <p>Notes: _____</p> |
|--|---|

FOR QUOTE F9HI FB7CAD@H98 : CFA TO:

: U . - &) !+ \$ * ! &) , ' '

E-mail: sales@iprocessmart.com

MOUNTING STYLES



TYPICAL INSTALLATION

