

Application Form P-700 RVP



Budgetary Quote Existing Project Project Name _____

Contact: _____
 Title: _____
 Company: _____
 Address: _____
 Address: _____
 City, State ZIP: _____
 Country: _____
 Phone: + _____
COUNTRY CODE PHONE NUMBER
 Cell: _____
 Email: _____

Desired Delivery
Date: _____

If replacing an existing analyzer what is being replaced?

Analyzer Manufacturer: _____

Analyzer Model: _____

Please Describe the Application (i.e. process stream and monitoring objectives):

Laboratory Test Method _____ will be used to correlate with the new on-line analyzer.

Sample Data:

Analyzer	Unit of Measure	Normal	Maximum	Minimum	Temperature
RVP Range:	psi / bar				
Viscosity:	cSt / cP (@ process temperature)				
Water:	%		N/A	N/A	
Solids:	PPM		N/A	N/A	
Dissolved Solids:	%		N/A	N/A	

Sample Contaminants (Describe):

Sample Slipstream Limits:

Inlet to Analyzer: _____ barg / psig at _____ °C / °F

Return Tap from analyzer: _____ barg / psig

Distance from analyzer to process tap: _____ meters / feet to return tap: _____ meters / feet

Additional Notes:

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**Instrument location:**

- Existing Shelter Existing 3 Sided Shelter/Environmental Cabinet New Shelter Request Orb Quote for Shelter

Available Utilities:

- Instrument Air Max. allowable air consumption _____ Air pressure _____
 Atmospheric Drain Max. allowable flow to drain _____

Electrical Power Supply:

_____ Volts AC _____ +/- Volts AC _____ Hz _____ Phase

Output Signal:

One 4-20 mA output signal is standard

Output Range (minimum): _____ (maximum): _____

Communication Output:

optional, please check one:

- Serial/RTU TCP/IP Ethernet None

Area Classification (please check one):

- CSA/CUS Class 1, Div. 1, Group B, C & D T6 ATEX Ex d IIB + H2 T6 Gb

Environment:

Temperature range inside analyzer shelter (minimum): _____ °C / °F (maximum): _____ °C / °F

Expected humidity inside analyzer shelter: _____ %

Will analyzer be subjected to a tropical climate: _____ Yes _____ No

Special environmental requirements (describe): _____

Commissioning & Start-up:

Do you or the end-user request commissioning & start-up assistance: _____ Yes _____ No

If yes, please detail: _____

Process Sample Supplied for FAT:

Customer Supplied: _____ Yes _____ No Product Name: _____

If No, please explain: _____

