

## Level Application Assistance Form:

Please provide as much detail as possible for prompt assistance. Fax the completed form to Technical Support at your local GF sales office.

Distributor Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State/County: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Extension: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Please provide description of intended application on separate sheet (include critical factors/tolerances/fill-drain cycles, etc.).

Tank Type: Vertical Cylinder  Horizontal Cylinder  Conical  Rectangular

Sensor Mounting: Indoor  Outdoor  Indicator: Indoor  Outdoor  Sun  Shade

Cable run from sensor to indicator: \_\_\_\_\_

Available power: \_\_\_\_\_ Amperage: \_\_\_\_\_

Fluid type \_\_\_\_\_ Fluid Viscosity: \_\_\_\_\_ Fluid Specific Gravity: \_\_\_\_\_

Vapors: Yes  No  Agitation: Yes  No

Tank Material: \_\_\_\_\_ Tank Depth m (ft.): \_\_\_\_\_ Diameter m (ft.): \_\_\_\_\_ Dimensions: \_\_\_\_\_

Tank Radius m (ft.): \_\_\_\_\_

Fluid temp. range °C (°F): min. \_\_\_\_\_ max. \_\_\_\_\_ nominal \_\_\_\_\_ Vessel pressure bar (psi): min \_\_\_\_\_ max \_\_\_\_\_

Output: Continuous  Point  Output Type: Relay  4 to 20 mA (fixed)  4 to 20 mA (prog.)

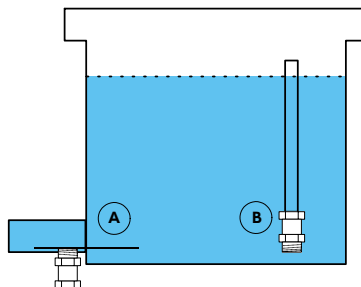
Technical  
Reference

### FOR CONTINUOUS PRESSURE SENSING

Mounting: Standpipe to tank bottom  Through wall  Pipe run exiting tank

### Continuous Pressure Sensor Detail

Please indicate your installation, pipe dimensions, and sensor location information.



- A) Example of in-line installation
- B) Example of submersible installation