



# PEPPERL+FUCHS

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## Level Application Sheet

Point

Continuous

Submitted By: \_\_\_\_\_ Representative: \_\_\_\_\_

### Application Location

Company \_\_\_\_\_ Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

### Detection Material (Liquids and Solids)

Description \_\_\_\_\_  Liquid  Solid  Sanitary

State (Liquid)  Still  Turbulent  Foam  Slurry

State (Solid) Particle Dia \_\_\_\_\_ Dust \_\_\_\_\_

Dielectric Constant (Range) \_\_\_\_\_ Temp (Range) \_\_\_\_\_

Pressure (Range) \_\_\_\_\_ Viscosity (Range) \_\_\_\_\_

Build-up Potential  None  Heavy  Medium  Light

Foam Height (Describe) \_\_\_\_\_

Describe method of detection (angle, fill rate, agitator, dust, etc.) \_\_\_\_\_

### Installation Data (Draw tank on opposite side of application sheet with all dimensions and mounting)

Location  Indoor  Outdoor Temp Range \_\_\_\_\_

Area Classification  Non-Hazardous  Hazardous \_\_\_\_\_

Area Designation  High Noise  High Vibration Describe \_\_\_\_\_

Measure During Fill  Yes  No Fill Method \_\_\_\_\_

Tank Material \_\_\_\_\_ Process Connection \_\_\_\_\_

Empty Length (Sensor to tank bottom) \_\_\_\_\_

Full Length (Span - tank bottom to material full) \_\_\_\_\_

Head Height(Full to tank top) \_\_\_\_\_ Length of Detection Mounting Nozzle \_\_\_\_\_

Tank Obstructions(describe) \_\_\_\_\_

### Sensor Data (Preferences if any)

Electrical Input \_\_\_\_\_ Electrical Output \_\_\_\_\_

Wetted Material \_\_\_\_\_ Supply Voltage Available \_\_\_\_\_



# Fax

<b>To:</b> Centro, Inc.	<b>From:</b>
<b>Fax:</b> 901-357-1379	<b>Pages:</b>
<b>Phone:</b> 800-344-3286	<b>Date:</b>
<b>Re:</b>	<b>CC:</b>

Please fill out this specification form and fax to one of the three locations:

Memphis: 901-357-1379

Little Rock: 501-835-2277

Nashville: 615-255-2212