То:	_ Fax Number:	
From:	Fax Number:	
LOAD CELL Application Data Sheet	Phone: 864.574.8060 • 800.778.9242	
	Applications Engineering Fax: 864.574.8062	
Company Name:	Contact Name:	
Street Address:		
City:	State:Postal Code:	
Phone:	Fax:	
Please complete and fax both pag	ges to an Applications Engineer for review.	
Material Information:		
Name (specific and generic):		
Type: 🗌 Liquid 🔲 Slurry 🗌 Powd	er 🗌 Flake 🗌 Pellet 🗌 Granular	
Characteristics (free flowing, sticky, wet, bridges	s, rat holes, etc.):	
	If Yes, what is the area classification?	
Solids:		
Bulk Density (lb/cf or g/cc): [Aeration Present (Y/N):	Does bulk density vary? Range?	
If Yes, what type? 🗌 Air Pads 🗌 Air Cannol	ns 🗍 Other:	
Liquids/Slurries:		
Density or Specific Gravity:		
Surface: Calm (Y/N): Turbulent (Y/N):		
Agitator Present (Y/N):		
Electrical Power & Output Requirements:		
Supply Power Available: 115 VAC 22	30 VAC 24 VDC	
Load Cell Output Preferred: 4/20 mA	mV/Volt	
	Bridge Input) Panel Meter (mA Input) PLC	
Vessel Parameters:		
Tank Location: Indoors Outdo	oors	
Tank Weight - Empty: Tank V	Veight - Full:	

Vessel Construction:		
•	contal Cylinder 🔲 Square / Rectangular	
How many legs support vessel? Is tank skirted? (Y/N)		
Foundation Under Tank Legs?		
Is there any external structure connec	cting the tank to other structures? (Y/N)	
Please provide dimensional drawing of tank, including top, showing all fill points and discharge points, and detailed information on the supporting legs. Include external structures attached to this tank such as catwalks, piping, ladders and any other bracing that may be present. Also include any other equipment that may be present such as agitators.		
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	CENTRO INC	

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150 Venture Boulevard • Spartanburg, SC 29306 Phone: 864.574.8060 • 800.778.9242 • Fax: 864.574.8063



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

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