

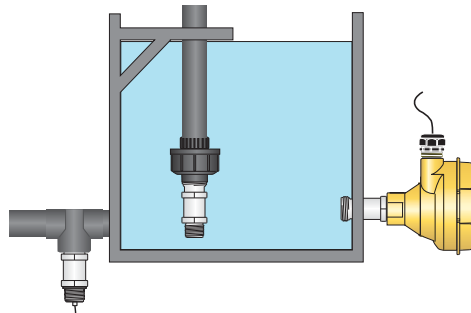
# Level Application Assistance Form:

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

Date: \_\_\_\_\_  
Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Country: \_\_\_\_\_  
Phone: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Name of project: \_\_\_\_\_  
GF Distributor: \_\_\_\_\_ Contact: \_\_\_\_\_ Tel: \_\_\_\_\_  
Description of application (use separate sheet if necessary):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tank Type:  
Vertical cylinder       Horizontal cylinder       Conical       Rectangular   
Tank material: \_\_\_\_\_ Tank Depth m(ft.): \_\_\_\_\_ Tank Diameter m(ft.): \_\_\_\_\_ Dimensions: \_\_\_\_\_  
Tank Radius: m(ft.): \_\_\_\_\_  
Fluid temp. range: min: \_\_\_\_\_ max: \_\_\_\_\_ nominal: \_\_\_\_\_ Control range: \_\_\_\_\_  
Vessel press. bar (psi): min: \_\_\_\_\_ max: \_\_\_\_\_ nominal: \_\_\_\_\_ Control range: \_\_\_\_\_  
Sensor mounted: Indoor  Outdoor       Indicator mounted: Indoor  Outdoor   
Sensor mounted: Inline  Submersible, standpipe       Sun  Shade   
   Submersible, through tank wall

Continuous Pressure Sensor Detail : Please indicate your pipe installation, pipe dimensions, and Sensor location



Fluid to be measured: \_\_\_\_\_ Chemistry: \_\_\_\_\_  
Fluid viscosity: \_\_\_\_\_ Specific gravity: \_\_\_\_\_  
Percent solids: \_\_\_\_\_ Description: \_\_\_\_\_ Size of solids: \_\_\_\_\_  
Vapors: Yes  No       Agitation: Yes  No   
Cable run from sensor to indicator: \_\_\_\_\_ ft./m  
Available power: \_\_\_\_\_ Amperage: \_\_\_\_\_  
Required outputs & Qty: \_\_\_\_\_