Application Data Sheet | Date: _____

Radiometric Continuous and Point Level

Company Name: _____ Customer Contact Name: _____

Customer Address: _____ Phone and Fax: _____

City, State, Zip: _____ Cell: _____

Sales Person/Rep.: _____ Email: _____

Representative Firm: _____ Tag Number: _____

Required Information

1. What does the customer require from the measurement?

2. Process Description/Name: _____ ○ Solid ○ Liquid

3. Measurement Type: ○ Interface ○ Continuous Level ○ High Point Level ○ Low Point Level

4. What is the density of the process material? _____ ○ SG ○ kg/m³ ○ lb/ft³ @ ○ STP ○ operating

5. What is the upper phase density? _____ ○ SG ○ kg/m³ ○ lb/ft³ @ ○ STP ○ operating

6. Does process build up on vessel wall: ○ Yes* ○ No *If yes how much? _____ ○ in ○ mm

7. What type of process? ○ Continuous ○ Batch

8. What is the normal operating level? _____

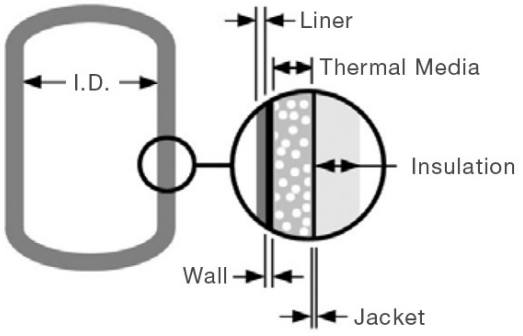
9. Shape of Vessel: ○ Vertical ○ Horizontal
   ○ Other: Vessel Drawing Required *(If vessel drawing is available, please provide and/or sketch on reverse.)*

10. Vessel Dimensions: ○ in ○ mm

11. Vessel Inner Diameter or Width: _____

12. Measurement Span and 100% of Span Elevation: _____

	Source Side Thickness	Detector Side Thickness	Material	Density/Units	Examples
Liner					steel, brick, etc.
Vessel Wall					steel, iron, etc.
Thermal Media					steam, water, etc.
Jacket Wall					steel, iron, etc.
Insulation					fiberglass, etc.



13. Triangle Rankings (in order of importance, 1 is most important):
    Fine Resolution: _____
    Fast Response: _____
    Low Radiation: _____

The above information must be provided for reliable sizing.

Additional Application Information

14. Process Temp: Max: _____ Operating: _____ ○ ºF ○ ºC
15. Pressure: Max: _____ Operating: _____ ○ psig ○ bar
16. Do any of the above parameters change during operation? ○ Yes* ○ No
    *If yes, which parameter(s) and what are their ranges? _____
17. Does the vessel inner diameter or wall thickness change along the measurement length? ○ Yes* ○ No
    *If yes please describe variations in Additional Information section
18. Describe any obstructions in the vessel that exist within path of radiation. _____
19. Does product filling the vessel enter the measurement path? ○ Yes ○ No
20. Does product leaving the vessel vortex? ○ Yes* ○ No
    *If yes, is there a vortex breaker? ○ Yes ○ No
21. Does product filling the vessel create a “cone”? ○ Yes ○ No
22. Is this measurement used for: ○ Indication ○ Control ○ SIS/Safety ○ Shutdown

Electronics

23. Area Classification: _____ (Class/Zone/Division) or ■ General Purpose
24. Ambient Temperature Range: Min: _____ Max: _____ ○ ºF ○ ºC
25. Input Power: ○ 24V DC ○ 110V AC ○ 220V AC
26. Output: ○ 4 … 20 mA/HART ○ Foundation Fieldbus ○ Relay
27. Do you want the gauge to provide intrinsically safe output? ○ Yes ○ No

Radiation Information

28. Maximum Field Near Source Holder (5 mR @ 12 in Standard): _____ ○ mR ○ uSv @ _____ ○ in ○ mm
29. Will the detector be exposed to external X-ray radiation during operation? ○ Yes ○ No
30. Does the customer have a license to possess/use radioactive material? ○ Yes ○ No

Radiation Information

Sketch Vessel or Application Here

If vessel drawings are available, please provide.

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Please provide a current copy of your current radioactive materials license, if available.