Flow Application Information

1. General:

Pipe Size (O.D.): _____ Schedule/Wall Thickness: _____

Pipe Material: _____ Liner Material: _____

Pressure Rating: _____ Process Connection: _____

Orientation: Horizontal: ☐ Vertical (upward flow): ☐ Vertical (downward flow): ☐

2. Installation Conditions:

Indoor: ☐ Outdoor: ☐ Ambient Temperature: Min: _____ Max: _____

Can The Process be Shut Down For Installation? Yes ☐ No ☐

Is There a Source of Noise/Vibration Near The Meter? Yes ☐ No ☐

Does Pulsating Flow Exist? Yes ☐ No ☐

Piping Material Plastic ☐ Metal ☐ Please Specify Type: _____

Is The Measurement Point In An Area That Could Become Submerged? Yes ☐ No ☐

Full Pipe: Yes ☐ No ☐

Bi-Directional Flow: Yes ☐ No ☐

Flow Description: Constantly Steady: ☐ Varies Slightly: ☐ Pulsating: ☐

Linear Distance of Straight Run Available At Meter Installation Site:

Upstream: _____ Downstream: _____

Please Specify Any Potential Flow Disruptor's Within 10 Pipe Diameters of Install:

Elbow: ☐ _____ Tee: ☐ _____ Pump: ☐ _____ Valve: ☐ _____

Diffuser: ☐ _____ Taper: ☐ _____ Other: ☐ _____

Hazardous Area: Yes ☐ No ☐ If So, Please Specify: _____

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3. Process Conditions: (please be specific)

Liquid: ☐ _____ Gas: ☐ _____

Flow Rate:	Units: _____	Min: _____	Norm: _____	Max: _____
Pressure:	Units: _____	Min: _____	Norm: _____	Max: _____
Temperature:	Units: _____	Min: _____	Norm: _____	Max: _____
Viscosity:	Units: _____	Min: _____	Norm: _____	Max: _____
Density:	Units: _____	Min: _____	Norm: _____	Max: _____

Conductivity Value: _____ µS Suspended Solids: _____ %

4. Performance: (check all that apply)

Intended Use: Measurement: ☐ Control: ☐ Portable: ☐ Permanent: ☐

Measurement Type: Volumetric: ☐ Mass: ☐ Velocity: ☐ Other: ☐ _____

Expected Accuracy: +/- _____ % of rate or +/- _____ % of span

Expected Repeatability: +/- _____ % of rate or +/- _____ % of span

Power Supply: 24 VDC: ☐ 120 VAC: ☐ Battery/Wireless: ☐

Communication: Hart: ☐ Modbus: ☐ Ethernet/IP: ☐ Other: ☐ _____

Outputs: 4–20 mA: ☐ _____ Pulse: ☐ _____ Frequency: ☐ _____

Relay: ☐ _____ Other: ☐ _____

Comments: