



Application Sheet Contact Report MAGNICATOR® II

Section: M200
Bulletin: M200.01
Date: 1/1/99
Supercedes: NEW

Specialists In Liquid Level Indication

Today's Date: _____ Required Delivery Date: _____ Person Completing Application Sheet: _____

Rep #: _____ Rep: _____ Quote: _____

Customer: _____ Ref: _____

Address: _____

Contact: _____ Tel: _____ Fax: _____

Tag No.: _____ Qty.: _____

Material: _____

Process: _____

Style: _____

Pressure: _____ Unit: _____
Maximum _____ Operating _____

Temp: _____
Maximum _____ Operating _____

Flange Rating: _____

Process Connection Size/Type: _____

Vent/Drain: _____

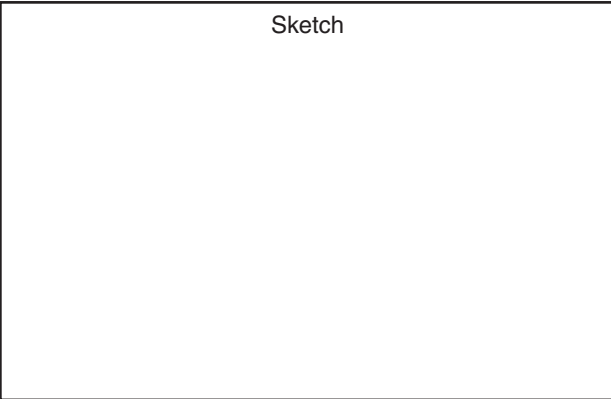
Specific Gravity: _____ Indicator: _____ Vessel Centerline: _____

Options: _____ Scale: _____

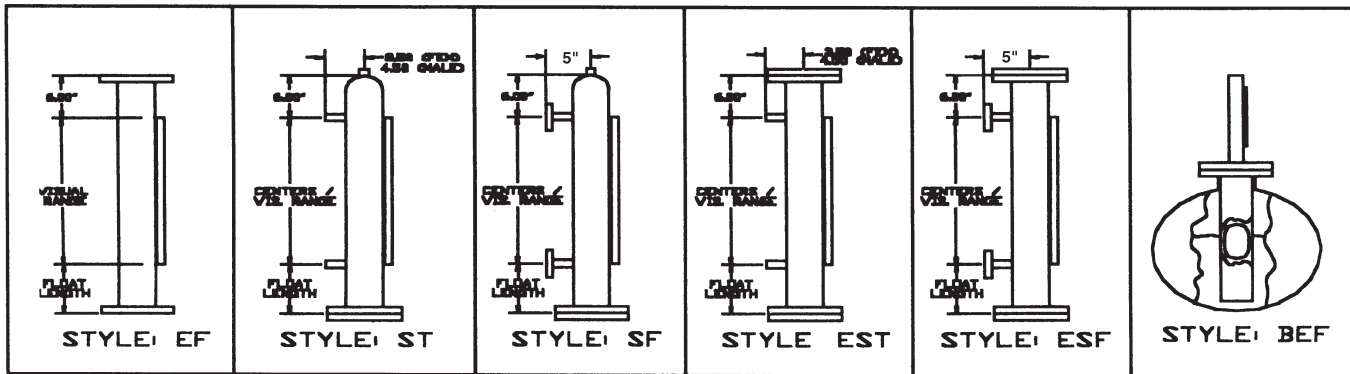
Notes: _____

Accessories: Transmitter _____ RS-2/2 _____ MS-10 _____ AS-100 _____ B2-20 _____

P/N: _____



Other Styles Available - Call for Assistance



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