

# Questionnaire for Density

Prior to submission of a quotation we like to have this form returned.

This questionnaire is suited for <sup>137</sup>Cs applications, for <sup>241</sup>Am additional information is needed.

Company	
Contact Name	
Street/P.O.Box	
City	
Postal code	
Country/State	
Phone No.	
Fax No.	

Project/Tag:

Date:

## Process Specifications

Products	/			
Please fill in box 1 or 2 completely				
Density	min	max		kg/l
Concentration	min	max		%
Density Liquid 1				kg/l
Density Solid or Liquid 2				kg/dm <sup>3</sup> / kg/l
Desired accuracy				kg/l / %
Product Temperature	nominal	min	max	°C/F

1

2

## Physical Arrangement

Pipe outside diameter				mm
	<b>thickness</b>	<b>material</b>	<b>density</b>	
Wall	mm			kg/dm <sup>3</sup>
Lining	mm			kg/dm <sup>3</sup>
	mm			kg/dm <sup>3</sup>
Additional	heating/cooling jacket	<input type="checkbox"/>	insulation	<input type="checkbox"/>
At measuring point	recessed	<input type="checkbox"/>	retracted	<input type="checkbox"/>
If retraction or recession at measuring point not possible, please fill in:				
Outside diameter				mm
	<b>thickness</b>	<b>material</b>	<b>density</b>	
Wall	mm			kg/dm <sup>3</sup>
2nd wall	mm			kg/dm <sup>3</sup>
Heating/cooling medium	mm			kg/l
Ambient Temperature				°C/F
Required cable length				
detector-evaluation unit				m
Exproof requested	Yes / No			

Application (for statistical reason)