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Please note: new area code for FCI "442" effective January 1, 2009

Aerospace & Military Products

Temperature, Flow, Liquid Level & Pressure Sensors

Send completed form:

* Required information NOTE: If EMAIL button does not work in your PDF program, SAVE this form then email AerospaceADS@fluidcomponents.com with the PDF as an attachment.

Customer Information	
* Company Name: _____	* Technical Contact: _____
* Address: _____	* Phone: _____ Fax: _____
* City: _____ State: _____ * ZIP/Postal Code: _____	* Email: _____
Country: _____ <input type="checkbox"/> Commercial <input type="checkbox"/> Military	Procurement Contact: _____
	Phone: _____ Fax: _____
	Email: _____

Application Information	
* Sensor type: <input type="checkbox"/> Temperature <input type="checkbox"/> Pressure <input type="checkbox"/> Flow <input type="checkbox"/> Level/Interface <input type="checkbox"/> Other: _____	
Mounting connection: <input type="checkbox"/> Thread <input type="checkbox"/> Flange Description: _____	
Input Power: <input type="checkbox"/> 28 Vdc <input type="checkbox"/> 110 Vac, 60 cycle <input type="checkbox"/> Other: _____	
Alarm Output: <input type="checkbox"/> Open drain buffer <input type="checkbox"/> Analog Output Only <input type="checkbox"/> Other: _____	

Application Sketch	
<input type="checkbox"/> Sending sketch via email	

Process Conditions	
Primary process media (at sensor location): _____ <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	Secondary process media (flow or level): _____ <input type="checkbox"/> Gas <input type="checkbox"/> Liquid
Temperature - specify units: <input type="checkbox"/> °F <input type="checkbox"/> °C <input type="checkbox"/> Other: _____ Minimum: _____ Nominal: _____ Maximum: _____	Temperature - specify units: <input type="checkbox"/> °F <input type="checkbox"/> °C <input type="checkbox"/> Other: _____ Minimum: _____ Nominal: _____ Maximum: _____
Pressure - specify units; <input type="checkbox"/> psig <input type="checkbox"/> psia <input type="checkbox"/> bar(g) <input type="checkbox"/> atm <input type="checkbox"/> Other: _____ Minimum: _____ Nominal: _____ Maximum: _____	Pressure - specify units; <input type="checkbox"/> psig <input type="checkbox"/> psia <input type="checkbox"/> bar(g) <input type="checkbox"/> atm <input type="checkbox"/> Other: _____ Minimum: _____ Nominal: _____ Maximum: _____

Interface description (specify interface state; foam, sediment, slurry): _____

Calibration Conditions *(Customer must specify calibration media)*

Temperature/Pressure Applications	Flow Sensor Applications	Level/Interface Applications
Temperature/Pressure range: <input type="checkbox"/> As entered for the primary media in Process Conditions section above <input type="checkbox"/> As entered for the secondary media in Process Conditions section above <input type="checkbox"/> Other _____ Alarm set point: No. 1 _____ No. 2 _____ No. 3 _____ Analog output signal: <input type="checkbox"/> Not required <input type="checkbox"/> 0-5 Vdc <input type="checkbox"/> 4-20 mA <input type="checkbox"/> Other _____ For temperature applications only Element type: <input type="checkbox"/> RTD <input type="checkbox"/> Thermistor <input type="checkbox"/> Thermocouple	Duct inside diameter: _____ <input type="checkbox"/> Inch <input type="checkbox"/> mm Pipe orientation: <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical Sensing element mounting: <input type="checkbox"/> Side <input type="checkbox"/> Top Flow direction: <input type="checkbox"/> Right to left <input type="checkbox"/> Left to right <input type="checkbox"/> Top to bottom <input type="checkbox"/> Bottom to top Flow rate: Min. _____ Max. _____ Nominal flow rate: _____ Flow units: _____ Alarm set point: No. 1 _____ No. 2 _____ No. 3 _____ Signal output: <input type="checkbox"/> 0-5 Vdc <input type="checkbox"/> 4-20 mA Media: <input type="checkbox"/> Air <input type="checkbox"/> Fuel <input type="checkbox"/> Hydraulic fluid <input type="checkbox"/> Coolant Description: _____	Sensing element mounting: <input type="checkbox"/> Side <input type="checkbox"/> Top <input type="checkbox"/> Bottom Level or interface rate-of-change (at sensing element): _____ <input type="checkbox"/> Inch/sec <input type="checkbox"/> mm/sec <input type="checkbox"/> Inch/hr <input type="checkbox"/> mm/hr Alarm set point elevation distance from mounting connection: No. 1 _____ No. 2 _____ No. 3 _____ No. 4 _____ No. 5 _____ Analog output signal: <input type="checkbox"/> Stepped <input type="checkbox"/> Continuous <input type="checkbox"/> 0-5 Vdc <input type="checkbox"/> 4-20 mA <input type="checkbox"/> Not required <input type="checkbox"/> Other _____