



# Applications Work Sheet

## Thermal Differential Switch

Fax us at **913-888-0767** with the following information.

Buyer/Engr. Name _____	Phone _____	
Title _____	Fax _____	
Company (End User) _____	E-mail _____	
Address _____		
_____		
City _____	State _____	Zip Code _____

Application	<input type="checkbox"/> Level	<input type="checkbox"/> Flow
Vessel Shape	<input type="checkbox"/> Vertical Cylinder	<input type="checkbox"/> Horizontal Cylinder
Pipe/Vessel Material _____	Pipe Size and Schedule _____	
Power Supply _____	Process Connection _____	
Process Media _____	Ambient Temperature _____	
Operating Pressure Range _____	Maximum Pressure _____	
Operating Temperature Range _____	Maximum Temperature _____	
Solids (%) _____	Turbulence <input type="checkbox"/> Yes <input type="checkbox"/> No	
Specific Gravity _____	Process Coating <input type="checkbox"/> Yes <input type="checkbox"/> No	
Viscosity (cp) _____	Vibration/Mixing <input type="checkbox"/> Yes <input type="checkbox"/> No	
Foam <input type="checkbox"/> Yes <input type="checkbox"/> No	Flow Rate (FPS, GPM, etc.) _____	
	Set Point (FPS, GPM, etc.) _____	
	Set By: <input type="checkbox"/> Factory <input type="checkbox"/> On Location	

Please attach a sketch or drawing indication mounting location, other connections and internal obstructions.

14685 W. 105th Street, Lenexa, KS 66215 913-888-2630 800-676-6794 Fax 913-888-0767 www.sorinc.com