



# Application Detail Form P-500 Flash Point Analyzer

4724 S. Christiana Ave., Chicago, Illinois 60632, USA 773 927 8600 (phone) 773 927 8620 (facsimile)

Contact: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State ZIP: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Desired Delivery Date: \_\_\_\_\_  
 Refinery: \_\_\_\_\_  
 Area: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Country: \_\_\_\_\_

If replacing an existing analyzer what is being replaced?

Analyzer Manufacturer:	Analyzer Model:
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Please Describe the Application (i.e. process stream and monitoring objectives):

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Laboratory Test Method \_\_\_\_\_ will be used to correlate with the new on-line analyzer.

### Sample Data:

Analyzer	Unit of Measure	Normal	Maximum	Minimum
Flash Point Range:	°C / °F			
Viscosity:	cP		N/A	N/A
Density:			N/A	N/A
Water:	%		N/A	N/A
Solids:	PPM		N/A	N/A
Dissolved Solids:	%		N/A	N/A

Sample Contaminants (Describe):

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### Sample Slipstream Limits:

Inlet to Analyzer: \_\_\_\_\_ barg / psig at \_\_\_\_\_ °C / °F  
 Return Tap from analyzer: \_\_\_\_\_ barg / psig  
 Distance from analyzer to process tap: \_\_\_\_\_ meters / feet to return tap: \_\_\_\_\_ meters / feet

Additional Notes:

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ORB Instruments, Inc.

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**Electrical Power Supply:**

\_\_\_\_\_ Volts AC \_\_\_\_\_ +/- Volts AC \_\_\_\_\_ Hz \_\_\_\_\_ Phase

**Output Signal:**

One 4-20 mA output signal is standard

Output Range (minimum): \_\_\_\_\_ (maximum): \_\_\_\_\_

**Area Classification** (please check one):

- NEC Class 1, Div. 1, Group C & D
- ATEX Zone 1 II B + H2 T4
- General Purpose Area

**Area Protection Preference** (please check one):

- Explosion Proof

**Environment:**

Temperature range inside analyzer shelter (minimum): \_\_\_\_\_ °C/°F (maximum): \_\_\_\_\_ °C/°F

Expected humidity inside analyzer shelter: \_\_\_\_\_ %

Will analyzer be subjected to a tropical climate: \_\_\_\_\_ Yes \_\_\_\_\_ No

Special environmental requirements (describe):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Commissioning & Start-up:**

Do you or the end-user request commissioning & start-up assistance: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please detail:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Process Sample Supplied:**

Customer Supplied: \_\_\_\_\_ Yes \_\_\_\_\_ No      Product Name: \_\_\_\_\_

If No, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

**Approval:**

Completed by: \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Approved by: \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_