



Application Detail Form P-950 Viscosity Index 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):

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

Sample Data:

Analyzer	Unit of Measure	Normal	Maximum	Minimum
Viscosity Range:	SFS / SUS / cSt / cP			
Viscosity Temperature:	°C / °F		N/A	N/A
Specific Gravity:	None		N/A	N/A
Water:	%		N/A	N/A
Solids:	PPM		N/A	N/A
Dissolved Solids:	%		N/A	N/A

Sample Contaminants (Describe):

Sample Slipstream Limits:

Inlet to Analyzer: _____ barg / psig
 Temperature Range: _____ °C / °F (Min) to _____ °C / °F (Max)
 Return Tap from analyzer: _____ barg / psig
 Distance from analyzer to process tap: _____ meters / feet to return tap: _____ meters / feet
 Cooling Water Temperature _____ °C / °F
 Cooling Water Pressure _____ barg / psig

Additional Notes:

ORB Instruments, Inc.

4724 South Christiana - Chicago, Illinois 60632 - USA
773.927.8600 Phone - 773.927.8620 Fax - www.orbinstruments.com



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