



Application Questionnaire

QMA401 Process Moisture Analyzer

CUSTOMER

| | | | |
|-----------------------|----------|---------------------|--|
| Customer: | | | |
| Location: | | | |
| Contact name: | | Customer reference: | |
| Contact phone: | | Email: | |
| Installation Address: | Country: | City: | |

APPLICATION

| |
|---|
| Description of application and reason for the measurement: <i>For example, high-purity gases, air separation, semiconductor etching, polymer chip drying, etc.</i> |
| |

GAS COMPOSITION

| Component: | Unit: | Concentration | | |
|------------|-------|---------------|--------|---------|
| | | Maximum | Normal | Minimum |
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PROCESS CONDITIONS AT SAMPLE SOURCE

| | | | | | | | | |
|--------------|------|--|---------|--|------|--|-------|--|
| Temperature: | Max: | | Normal: | | Min: | | Unit: | |
| Pressure: | Max: | | Normal: | | Min: | | Unit: | |

CONDITIONS AT SAMPLE OUTLET/RETURN

| | | | | | | | | |
|--------------------------------|------|--|---------|--|------------------------------|-----------------------------|-------------------------|--|
| Vent to Atmospheric Pressure?: | | | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If no, please complete: | |
| Pressure: | Max: | | Normal: | | Min: | | Unit: | |

MOISTURE / WATER DEW POINT MEASUREMENT

| | | | |
|------------------------|------|--------------------|------|
| Measurement unit: | | Measurement range: | |
| Expected measurements: | Min: | Normal: | Max: |

INSTALLATION

| | | | | |
|---|---------------------------------|---|------------------------------|-----------------------------|
| Location: | Indoor <input type="checkbox"/> | Outdoor (<i>Special Consideration Req'd</i>) <input type="checkbox"/> | | |
| Ambient Temperature | Min: <input type="text"/> | Normal: <input type="text"/> | Max: <input type="text"/> | Unit: <input type="text"/> |
| Installation must be in a Safe (Non-Hazardous) Area !! | | | | |
| Fast Loop desired/required | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Material Certification (BS EN 10204-3.1) desired/required | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

UTILITIES

| | | | | |
|-----------------|---|---|--------------------------------|--|
| Voltage: | 110VAC 50/60Hz <input type="checkbox"/> | 230VAC 50/60Hz <input type="checkbox"/> | Other <input type="checkbox"/> | If other, please specify: <input type="text"/> |
| Instrument air: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Pressure: <input type="text"/> | Unit: <input type="text"/> |

Further information or sketches that help to define the application: